

NOMINATION FOR DEATH CUM RETIREMENT GRATUITY

(When the Govt. servant has a family and wishes to nominate one member of more than one member thereof)

I hereby nominated the person(s) mentioned below who is/are member of my family and confer on him the right to receive any gratuity that may be sanctioned by Govt. in the event of my death while in service and the right to receive on my death any gratuity which having become admissible to me on retirement may remain up paid my death.

S No.	Name & address of nominee /nominees	Relationship with Govt. Servant	Age	Contingencies on happening of which the nomination Invalid	Name & Address relationship of person, if any, to whom the right conferred of the nominee shall pass in the event of his predeceasing the officer of the nominee dying after death of the officer but before receiving payment of the gratuity. Servant	Amount, of share of the gratuity of each
1	2	3	4	5	6	7
				Death/ Divorce and Insanity		

N.B : The Govt. Servant should draw line across the blank space below the last entry to prevent insertion of any name after the signed.

Date this _____ day of _____ 2015 at Delhi.

Signature of Two witness:-

1. Signature _____	1. Signature _____
2. Full Name _____	2. Full Name _____
3. Address _____	3. Address _____

Signature of Govt. Servant

ACCEPTED

Asstt. Commissioner of Police
Crime, Delhi.

ANNEXURE-"A"

(REFERRED TO IN (1) OF S.O. NO. 421/2013

I _____ Rank _____ No. _____ PIS No. _____ hereby
declare that I voluntarily wish to enroll as a member of the Delhi Police Martyrs' Fund and agree
to subscribe towards this Martyrs' Fund at the rate as decided by the governing body of the
Martyr' Fund from time to time. One day gross salary may be deducted from pay. I shall be
bound by the rules and regulation of the Martyrs' Fund.

Signature of the Applicant.

VERIFIED

Accountant/ _____ /Distt./Unit

ATTESTED

ACP/DDO/ _____ Distt./Unit

ANNEXURE-"B"

NOMINATION FOR BENEFITS UNDER THE DELHI POLICE MARTYRS' FUND-2013

(When the Govt. servant has a family and wishes to nominate the member of more than one member thereof)

I _____ Rank _____ No. _____ PIS NO. _____ son of Sh _____ hereby nominated the persons(s) mentioned below who is/are member(s) of my family and confer on him /them the right to receive to the extent specified below any amount that may be sanctioned by the Chairperson under the "Delhi Police Martyrs' Fund -2013" in the event of my death while in service or which having become payable on my attaining the age of superannuation may remain un-Paid to my death.

Name & Address of the nominee(s)	Relationship with Govt. servant	Age	Share to be paid to each	Contingencies on the happening of which nomination shall invalid	Name , address & relation of person, if any to whom the right of the nominee shall pass in the event of his predeceasing the Govt. servant

Note: - The Govt. servant should draw line across the blank space below his last entry to prevent insertion of any names after he has signed.

Dated: _____

Signature of two witnesses

1. _____

Address _____

2. _____

Address _____

Signature of Govt. Servant

ACCEPTED

ASSTT. COMMISSIONER OF POLICE

**NOMINATION FOR BENEFITS UNDER THE UNION TERRITORY GOVT.
EMPLOYEES GROUP INSURANCE SCHEME-1984**

(When the govt. servant has a family and wishes to nominate the member of more than one member thereof)

I, _____ hereby nominated the person mentioned below who is/are member of my family and confer on him/them they rights to receive to the extent specified below any amount that may be sectioned by the Union Territory Govt. Administrations under the Union Territory Govt. Employees Group Insurance Scheme ,1984 in the event of my death while in service or while having become payable on my attaining the age of superannuation may remain paid at my death .

S No.	Name & address of nominee /nominees	Relationship with Govt. Servant	Age	Share to be paid to each	Contingencies on happening of which the nomination invalid	Name & Address relationship of person, If any to whom the right of the nominee shall pass in the event of his predeceasing the Govt. Servant.
1	2	3	4	5	6	7
					Death/ Divorce and Insanity	

N.B : The Govt. Servant should draw line across the blank space below the last entry to prevent insertion of any name after the signed.

Date this _____ day of _____ 2015 at Delhi.

Signature of Two witnesses:-

1. Signature _____

1. Signature _____

2. Full Name _____

2. Full Name _____

3. Address _____

3. Address _____

Signature of Govt. Servant

ACCEPTED

Asstt. Commissioner of Police
Crime, Delhi.

DECLARATION FOR BECOMING MEMBER AND SUBSCRIBER OF THE
DELHI POLICE MUTUAL WELFARE SCHEME -1990

I, _____ Rank _____ No. _____ hereby
declare that I voluntarily become a member of the Delhi Police Mutual welfare Scheme as
the rate as decided by the Managing Committee of the Scheme from time to time . The
subscription may be decided from my monthly Pay leave salary and regulations of the
Scheme.

Dated _____

Signature _____

Name of Member

(IN BLOCK

LETTERS) _____

Rank _____

Number _____

Name of the Unit/ Distt. _____

Unique Number (PIS No.) _____

ATTESTED

Asstt. Commissioner of Police
Crime, Delhi.

NOMINATION FOR GENERAL PROVIDENT FUND

(When the Govt. servant has a family and wishes to nominate one member of more than one member thereof)

I _____, hereby nominate the person mentioned below, who is/are members of my family, as confined in Rule-2 of the General Provident Fund (Central Services) Rule, 1960 to receive the amount that may stand to my credit in the fund in the event of my death before that amount has become payable for having become payable has not been paid

S.No	Name & address of nominee /nominees	Relationship with Govt. Servant	Age	Share to be paid to each	Contingencies on happening of which the nomination Invalid	Name & Address relationship of person, if any to whom the right of the nominee shall pass in the event of his predeceasing the Govt. Servant
1	2	3	4	5	6	7
					Death/ Divorce and Insanity	

N.B : The Govt. Servant should draw line across the blank space below the last entry to prevent insertion of any name after the signed.

Date this _____ day of _____ 2015 at Delhi

Signature of Two witness:-

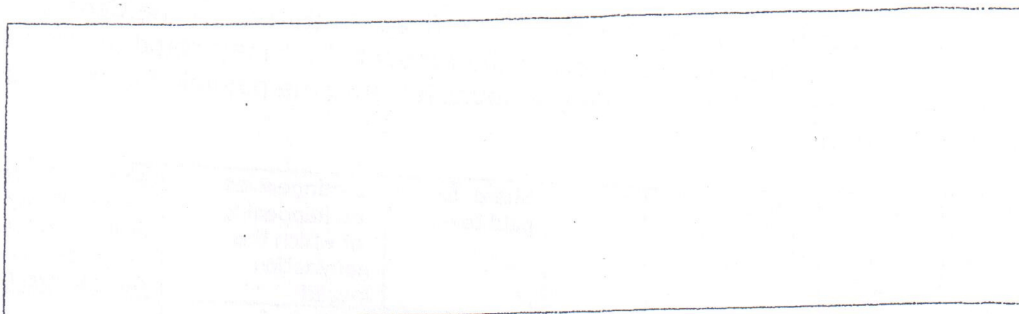
- | | |
|--------------------|--------------------|
| 1. Signature _____ | 1. Signature _____ |
| 2. Full Name _____ | 2. Full Name _____ |
| 3. Address _____ | 3. Address _____ |

Signature of Govt. Servant

ACCEPTED

Asstt. Commissioner of Police
Crime, Delhi.

PHOTOGRAPH OF NOMINEES OF THE POLICE OFFICER



(Signature of the Govt. Servant)

Date_____

Place_____

Name_____

No._____

Rank_____

Posting_____

Asstt. Commissioner of Police
Crime, Delhi.