Form No.

KERALA STATE INSURANCE DEPARTMENT

Porposal for State Life Insurance

Statement to be made by the person proposing to insure his/her life.

1.	(a) Full name in English (Capital Letters)	
	(b) Male/Female	:
	(c) Date of Birth	. :
2.	Designation and Office address (with District)	•
3.	Permanent Address	
4.	Married/Unmarried	
5.	Date of entry in service	
6.	Name of Department	:
7.	Basic Pay	:
8.	If the proposer is already a holder of S.L.I. policy, state the Policy Nos. and the rate of monthly premium of each policy	:
9.	Monthly premium proposed to be paid	:
10.	Details of first premium remitted	: (a) Amount Rs
	(Original Chalan Receipt to be attached)	(b) Chalan No
		(c) Date of Remittance
		(d) Name of Treasury
	Declared that all what is stated above is true.	
Pla	ce :	Signature & Name of the Proposer.
Da	te :	

Form of Nomination

Form No. 2

Rule-15

Married/Unmarried:	I do hereby nominate the person(s) mentioned below and confer on him/her them the right to receive to the extent specified, any amount eligible under plicy No	f Remarks	(<u>C</u>)
Jamarried:	the extent specified, a such sums aforesaid.	Name & Address of Person to recieve the share of the Minor	(9)
	w and confer on him/her them the right to receive to the extent specified, event of my death. I make this Will so far in regards such sums aforesaid.	Share to be paid to each	(5)
	nfer on him/her the my death. I make th	If Minor, Date of Birth	(4)
	ntioned below and co	Relationship with the insured	(3)
Name of Proposer:	I do hereby nominate the person(s) mentioned belo the Policy No in the	Name & Address of nominee(s)	(2)
Name of Proposer:	I do hereby non the Policy No	Policy Number	(1)

Name, address and signature of Witnesses 1. Place:

Name and address of proposer

Signature

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N.B.: If the proposer has a family at the time of making the nomination it shall be in favour of a member or members of his family (Wife, Husband and Children). If the proposer is unmarried he/she may nominate any person coming under family as defined in Rule 71 Part III - KSR (It will become invalid in the event of his/her acquiring a family).

CERTIFICATE

Certified that the proposer	Sri/Smt	is personally
known to me. His/her basic pay i	s Rs Hi	s/her date of Birth shown as
has been verified with the Service	Records/S.S.L.C. Book and	I found correct
Place:		Signature
Date:		Designation and
	(Office Seal)	Office address of the
		Head of Office

Instructions

- 1. Please furnish details for every item in the proposal form.
- First premium for the policy shall be remitted in any Govt. Treasury by chalan under the Head of Account '8011-105-99' State Life Insurance Fund or by Demand Draft drawn in favour of the District Insurance Officer or by Direct remittance in the District Insurance Office concerned.
- 3. Chalan No., Date of remittance and the name of Treasury should be furnished clearly and the original Chalan Receipt should be attached with the proposal.
- 4. Taking of policy with higher rates of premium than the prescribed minimum rate based on Basic pay will help the insured exempt from taking additional policies on increase in pay in future. (The existing Bonus rate is Rs.78-81 for 1000 rupees of the sum assured. Cash loan against policy will be granted up to a maximum of 80% of the surrender value of the policy).
- 5. The deduction of Monthly Premium from salary shall be started only after receiving the policy number.
- 6. Premium for the current month shall be deducted from the salary for the previous month. If there occurs any lapse in prompt deduction, the policy holder should remit the premium in any Govt. Treasury within a month and forward the original chalan receipt to the Insurance Department.
- 7. Name, Policy No. and amount of premium should be clearly shown in the monthly premium deduction schedules.
- 8. The rate of premium of a policy should not be changed. Additional policies should be taken on increase in Basic Pay. (Seperate proposals are to be sent for this purpose).
- A policy will lapse when there is continuous default of 6 months premium. Policy holders who avail L.W.A. or resign from service may remit their premium directly (monthly or more instalments in advance).
- 10. Those who have crossed the age of 50 years are not eligible for taking policy/Additional Policy.

PRESENT MINIMUM RATE OF SUBSCRIPTION

Pay Range	Rate of Subscription
₹ 9189/-	₹ 150/-
₹ 9190-18739/-	₹ 225/-
₹ 18740-29179/-	₹ 375/-
₹ 29180/- onwards	₹ 450/-
	₹ 9189/- ₹ 9190-18739/- ₹ 18740-29179/-