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**GOVERNMENT OF MEGHALAYA
FINANCE (ECONOMIC AFFAIRS) DEPARTMENT
INSTITUTIONAL FINANCE BRANCH**

No. FIF 18/2015/ 17

Dated, Shillong 15th July, 2015

From: Smt D.T.Kharshiing,
Director Institutional Finance & ex-officio
Secretary to the Govt. of Meghalaya
Finance (EA) Department

To: 1. Principal Secretary / Commissioner & Secretary /
Secretary to the Govt of Meghalaya
Home (Police) / Health / Urban Development / C&RD /
Social Welfare
2. The Deputy Commissioner
East Khasi Hills / East Jaintia Hills / East Garo Hills
West Garo Hills / West Jaintia Hills / West Garo Hills
South Garo Hills / South West Khasi Hills / South West Garo Hills
Ri Bhoi / North Garo Hills
3. The Director, Information & Public Relations
Meghalaya, Shillong

Sub: Social Security Schemes- matters relating to

Sir/Madam,

With reference to the subject cited above, I am directed to inform you that the social security schemes viz, Pradhan Mantri Suraksha Bima Yojana (PMSBY), Pradhan Mantri Jeevan Jyoti Bima Yojana (PMJJBY) and the pension scheme, Atal Pension Yojana (APY) have already been rolled out in the State. Apart from APY, progress has been made under PMBSY and PMJJBY. The Government of India vide D.O letter No 10/52/2014-Coord dated 6th July, 2015 (copy enclosed) has laid emphasis on wide dissemination of the **CLAIMS PROCEDURE** so that the benefits of the insurance schemes are realized. Copy of the claims procedure for both the schemes are attached herewith.

In the light of the above, I am directed to request you to take action and extend support accordingly as per instructions laid down in the D.O letter enclosed. Moreover, you are requested to provide information to the nodal officer of the Insurance Companies as sought for therein. The nodal officer of the insurance sector for Meghalaya is Mr Akendra Rajkumar, Area Manager, National Insurance Company and his contact number is 9007103405.

Yours faithfully,

D.T.Kharshiing

(D.T.Kharshiing)

Director Institutional Finance & ex-officio
Secretary to the Govt. of Meghalaya

FTS - No. 294 337/2015/MEGSC

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| NIC - MSU - SHILLONG |
| Duty No. : 871 |
| Date : 15-7-15 |
| File No. : _____ |

An amount of Rs.2,00,000/- is payable on death of a member to his / her nominee(s). The Risk cover will be provided to the person from his/her age of 3 years (Completed) till attaining age 55 years (nearer birthday) as on the annual renewal date. i.e. eligibility will cease on attaining age 55 years (nearer birthday) or on closure of account with the Bank or insufficiency of balance to keep the insurance in force.

Death claim benefit of Rs. 2,00,000/- will be settled by the designated Office of Insurance Company concerned. The process followed will be as under:

Steps to be taken by the Nominee:

1. Nominee to approach the Bank wherein the Member was having the 'Savings Bank Account' through which he / she was covered under PMJJBY; along with the death certificate of the member.
2. Nominee to collect Claim Form, and Discharge receipt, from the Bank or any other designated source like insurance company branches, hospitals, PHCs, BCs, insurance agents etc., including from designated websites. The insurance companies concerned shall ensure wide availability of forms at all such locations. Supply of the form shall not be denied to any person requesting the same.
3. Nominee to submit duly completed Claim Form, Discharge Receipt, death certificate along with photocopy of the cancelled cheque of the nominee's bank account(if available) or the bank account details to the Bank wherein the Member was having the 'Savings Bank Account' through which he / she was covered under PMJJBY.

Steps to be taken by the Bank

1. Upon receipt of death intimation the Bank should check whether the cover for the said member was in-force on the date of his death, i.e., whether the premium for the said cover on Annual Renewal Date, i.e. 1st of June, prior to the Member's death was deducted and remitted to the Insurance Company concerned.
2. Bank to verify the Claim Form & the nominee details from the records available with them and to fill in the relevant columns of the Claim form.
3. Bank to submit the following documents to the designated office of the Insurance Company concerned:
 - a. Claim Form duly completed

- b. Death certificate
 - c. Discharge Receipt
 - d. Photocopy of cancelled cheque of the Nominee (if available).
4. Maximum time limit for Bank to forward duly completed claim form to Insurance Company is thirty days from the submission of the claim to it.

Steps to be taken at designated office of Insurance Company:

1. Verify that the Claim form is complete in all respects and all the relevant documents have been attached. If not, take up with the Bank concerned.
2. If the claim is admissible, the designated office of the insurer shall check whether the member's coverage is in force and no death claim settlement has been effected for the Member through any other account. In case any claim has been settled, then the Nominee shall be intimated accordingly with a copy marked to the Bank.
3. In case the coverage was in force and no claim has been settled for the said member, payment shall be released to the Nominee's bank account and a communication shall be sent to the nominee with copy marked to the Bank.
4. Maximum time limit for Insurance Company to approve claim and disburse money is thirty days from the receipt of the claim from the Bank.

In case where the claim form is directly submitted to any office of the insurer by the claimant, then the insurer's office would forward the same to the concerned bank of the deceased account holder immediately to get necessary verification etc. done from the bank concerned. The concerned Bank Branch will forward the Claim Form to the designated office of the Insurance Company for processing the claim.

(to be completed by the Claimant & Bank)

- NAME OF THE SCHEME : Pradhan Mantri Jeevan Jyoti Bima Yojana
2. POLICY NO. :
3. FULL NAME AND ADDRESS OF THE BANK :
4. NAME OF THE DECEASED MEMBER :
5. SAVINGS BANK ACCOUNT NO. OF DECEASED MEMBER:
6. AADHAR NO. OF DECEASED (if available):
7. DATE OF ENTRY INTO SCHEME BY MEMBER :
8. DATE OF DEATH OF MEMBER :
9. CAUSE OF DEATH :
10. NAME OF NOMINEE * :
11. RELATIONSHIP OF NOMINEE:
12. ADDRESS OF THE NOMINEE :
13. MOBILE NO. OF THE NOMINEE:
14. AADHAR NO. IF AVAILABLE:
15. DETAILS OF SAVINGS BANK ACCOUNT OF NOMINEE:
- IFSC CODE: SAVINGS BANK ACCOUNT NO. :

We hereby declare that the answers to all the above questions are true in every respect and this is the only claim preferred under the Pradhan Mantri Jeevan Jyoti Bima Yojana for the above deceased member. We enclose **Death Certificate** as the proof of death of the Member along with a duly executed discharge form.

*In case the Nominee is a minor, the Guardian/Appointee may fill in the claim form.

(Signature of the Nominee* /Claimant)

We hereby certify that the above member was covered under the PMJBY Scheme and premium was debited from his bank account on the renewal date prior to his death and remitted to _____ (Name of Insurance Company). We also certify that as per our records, Shri/Smt. _____ is the nominee of the above insured Member for the said scheme.

PLACE _____

DATE: _____

(Signature of authorized official of the Bank)

Seal

SCHEME

Policy No: _____

Name of the Bank: _____

I/We, _____

do hereby acknowledge receipt from the -----(Name of Insurance Company), a sum of Rs.2.00.000.- (Rupees Two lakhs only) in full satisfaction and discharge of all our claims under the above policy on the life of Mr./Ms. _____, covered under this scheme under Savings Bank Account No.-----

Dated at _____ this _____ day of _____, 20

Witness: _____

Revenue
Stamp

(Signature of the Nominee* /Claimant)

Details of nominee / appointee (in case nominee is minor):

Name : _____

Mobile No. : _____

E-mail Id: _____

Aadhar Number (if available): _____

Bank Account No. : _____

Name of the Bank : _____

Branch: _____

Address: _____

IFSC Code : _____

{Copy of cancelled cheque to be attached(if available)}

*In case the Nominee is a minor, the Guardian/Appointee may fill in this form.

(Signature of the Nominee* /Claimant)