



Application form for Claiming on Behalf of a Person Died due to an Accident or a Natural Causes - Pension National Insurance Trust Fund



Form No. - 06 (E)

(Read the following instruction sheet before filling the application form.
It is mandatory to fill all the required information in the application)

Date :-
Claim No : NITF/D

01. Details of Deceased Insured

1.1 Name in Full : Rev./ Mr./ Mrs./ Miss. :-

Name with Initials : Rev. / Mr. / Mrs. / Miss. :-

1.2 National Identity Card Number :-

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(A certified photocopy of the National Identity Card should be attached)

1.3 Private Address :-

1.4 Telephone Number : Fixed :- Mobile :-

1.5 District :- Divisional Secretariat :-

Grama Niladhari Division :-.....

02. Details of Deceased Insured's Employment

2.1 Name and address of the institute where employed at the retirement :-

2.2 Designation :-

2.3 Name and address of the institute where employed :-

2.4 Pension Number :-

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 Date of Retirement :-

03. Declaration of the Applicant

3.1 I (Name in Full)
the undersigned, resided at (private address)
and holder of National Identity Card No. solemnly declare and certify the following
details as true and correct.

3.2 Details of the deceased insured (Name of the deceased)
on (date of death)
(Cross out unnecessary words)

3.2.1 I am the legal wife/ Husband.

3.2.2 I am the father/ mother (If the deceased insured was unmarried)

3.2.3 I am the child appearing as the applicant mentioned in 3.1 above and the details of all the children of
the deceased have been given next page. (In case the wife/husband of the deceased is also deceased
or divorced)

3.3 Telephone Number (Mobile) :-

04. Details of heirs who are legally entitled to receive benefits

(Should be filled compulsory)

4.1 Number of heirs legally entitled to receive benefits

4.2 Details of the legal heirs of the benefits entitled by the insured at the time of his/ her death are given below. (Since a last will or a Probate has not been prepared by the insured before his/ her death, you are kindly requested to pay the accident/ natural death compensation provided by the National Insurance Trust Fund to the following heirs)

Serial No.	Name	Relationship with the deceased insured	National Identity Card Number	Date of Birth	Marital Status	Employment

4.3 Details of how to credit money to the legal heirs entitled to the benefits

(If the deceased insured was married :- Details of Children and Spouse

If unmarried :- Details of Parents)

Serial No.	Name	Name of the Bank	Account Number	Bank Branch	Name appeared in the Bank Account

I hereby certify that the above particulars are true and correct.

.....
Date

.....
Signature of the Declarant

05. Confirmation of the Declaration (Cross out unnecessary words/ Applicable for all deceased who are married and unmarried)

I hereby certify that the above details are correct according to my observation. I hereby certify that insured was deceased married/ unmarried and the aforementioned spouse is living and the children or father/ mother are dependents of him and I certify that the above details are true and correct.

Special remarks if any

.....
Date

Signature :-

Name :-

Grama Niladhari Division/ No. :-
(Official Seal is Compulsory)

Instructions to Fill the Application

- 1. The completed application form with only available documents should be received to the National Insurance Trust Fund within 06 months from the date of death.**
- 2. Photocopies of documents should be certified by the Grama Niladhari whenever submitted.**
- 3. In case a last will has not been prepared**
 - 3.1 If married,
 - 3.1.1 To the Husband/ Wife and unmarried unemployed children under 21 years of age
 - 3.1.2 If the spouse of the deceased insured is also deceased or divorced, unmarried unemployed children of deceased insured under 21 years of age
 - 3.1.3 The above age limit is not applicable for totally disabled children
 - 3.2 If unmarried,
 - 3.2.1 To insured's mother/ father (depended on the insured)
- 4. In case a last will has been prepared**
 - 4.1 Claims are distributed only among the heirs those could be considered as dependents of the deceased insured (In terms of Public Administration Circular No. 12/2005) from among the heirs mentioned in the Last Will.
- 5. Documents to be submitted together with the application**
 - (a) Deceased insured's
 - 5.1 Certified photocopy of the Birth Certificate.
 - 5.2 Certified photocopy of the National Identity Card.
 - 5.3 Certified photocopy of the certificate of Death Registration.
 - 5.4 A signed affidavit on a stamp of Rs.50/= in the case of change in the names mentioned in the files of the deceased insured/applicant/dependents.
 - 5.5 Letter of Retirement specifying the date of retirement issued by the institute where the deceased insured was employed.
- 6. In case the insured has died married, the following documents should also be submitted in addition to the documents specified in part "a" above.**
 - 6.1 Certified photocopy of the Marriage Certificate
 - 6.2 Certified copy of the Birth Certificate of the Applicant (Wife/ Husband)
 - 6.3 Certified copy of the Birth Certificates of the children (Photocopies of Birth Certificates of all the children should be submitted)
 - 6.4 Certified photocopies of Identity Cards of the children below 21 years of age
 - 6.5 A Photocopy of the Bank Account of the Applicant (The Bank Account should not be a Joint Account)
 - 6.6 Photocopies of Bank Accounts of the children below 21 years of age (The Bank Account should not be a Joint Account)
 - 6.7 If there are minors below 18 years, photocopies of Bank Accounts opened in National Savings Bank (NSB) for them (The Accounts should not be accounts opened in Postal Bank Branches).
 - 6.8 Certified photocopy of the National Identity Card of the Applicant
 - 6.9 Certified photocopy of the verdict if the spouse of the deceased insured was legally divorced at the time of death of the insured
 - 6.10 If the deceased insured has no children, the certificate of the Grama Niladhari to the effect that.
- 7. When the insured has died unmarried, the following documents should also be submitted in addition to the documents in part "a" above.**
 - 7.1 Certificate issued by the Grama Niladhari to the effect that the deceased insured is unmarried.
 - 7.2 Certified copy of the National Identity Cards of the deceased insured's mother and father
 - 7.3 Certified photocopy of the Birth Certificates of Insured's mother and father/ a copy of search document of the original copy
 - 7.4 If either of the parents of the deceased insured is not living a certified photocopy of mother/ father death certificate.
 - 7.5 Photocopies of the deceased's mother's and father's bank accounts (The accounts should not be joint accounts)
- 8. If the death of the insured was occurred due to an accident, the following reports should also be submitted in addition to the above-mentioned documents.**
 - 8.1 Certified photocopy of the Information Report provided by the police to the Magistrate (Police Investigation Report – It should not be an the oral statement obtained from the police)
 - 8.2 Certified copy of the full Magistrate Court Case Report related to the accident (B report, Police Investigation Report, oral answers should be included)
 - 8.3 Certified photocopy of the Coroner's descriptive report with evidence.
 - 8.4 Certified photocopy of postmortem report (in Health General Form 42)
 - 8.5 Certified photocopy of his/her driving license if the insured died in a car accident only if the insured was driving at the time of the accident
 - 8.6 Train driver statement if the insured died in a train accident

Obtain from the Registrar of the concerned Magistrate Court.