



A. Details of the Breadwinner of the Household who is to be covered for Life and Accidental Insurance. (Age between 18 – 50 years)

(Please fill up in CAPITAL / BLOCK Letters only. All fields are mandatory)

Sl. No	Information	Details
1	Full Name	
2	Father's Name	
3	Mother's Name	
4	Mobile Number	
5	Gender (M/F/O)	
6	Date of Birth (dd-mm-yyyy)	
7	Has a bank Account ? (Y / N)	
Address:		
8	Street / House No.	
8	Village / Town / City	
9	District	
10	Block	
Nominee Details		
12	Nominee's Name	
13	Relationship of Nominee with the Breadwinner	

(Check appropriate option)

14. The breadwinner is an **INDIGENOUS INHABITANT / PERMANENT RESIDENT** of Nagaland.
15. Is the Breadwinner enrolled in CMHIS/AB-PMJAY ? If Yes, please provide the **PMJAY ID on the card:** _____



(Signature & Seal of verifying Authority)

B. Details of the members of the household who are to be covered under Accidental Insurance. (Age between 18 – 70 years)

SL. No.	Family Member 's Name	Date of Birth (dd-mm-yyyy)	Relationship with Breadwinner	Has a bank account ? (Y/N)
1				
2				
3				

(Signature of Applicant)

(Signature & Seal of verifying authority)



Name:

Designation:

Contact:

Note:-

- 1. Copy of Identity Proof like Indigenous Inhabitant Certificate / PRC / AADHAAR / PAN / etc. is required to be submitted for verification along with this form.*
- 2. If you have a PMJAY / CMHIS ID, you can register using the Card Number at <https://cmlis.nagaland.gov.in>.*
- 3. Alternately, you can visit <https://cmlis.nagaland.gov.in> and SELF REGISTER by uploading the duly verified application form.*
- 4. Duly verified forms may be submitted to concerned SCK Operators attached with the Office of the Deputy Commissioners for further processing.*