

D.L.I FORM -1  
APPLICATION FORM FOR DLI

To

The Director  
Accounts & Treasuries,  
Aizawl.

Through the -----  
(Head of Office)

DLI dilna ka rawn thehluk hi min lo chinfel sak turin ka dil a che.

1. Sawrkar hnathawk (thi ta) hming: -----
2. Hnathawh leh hnathawhna hmun: -----
3. Thih ni : -----
4. DLI diltu hming : -----
5. Tuna chenna khua : -----
6. Nomination tlawhchhanin nge a  
Dil Heirship Certificate  
TlaWhchanin : -----  
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Diltu Signature

DLI diltu Pi/Pu ----- hi Kan khua/veng  
chhung a awm ka hriat chian a ni e.

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VCP or YMA President.

D.L.I FORM –11

Statement showing particulars for claiming Deposit Link Insurance (DLI)  
In the case of Government servant who died while in service and had put in not less than five years of service.

1. Name of Subscriber : -----
2. Designation : -----
3. GPF Account No.: -----
4. Pay Scale at the time of Death: -----
5. Date of entry into service : -----
6. Date of death : -----
7. Name and address of Nominee/  
Legal heir who claims the DLI: -----

Signature of head of office