



NATIONAL INSURANCE ACT 1986
CLAIM FOR FUNERAL GRANT
PARTICULARS OF DECEASED UNINSURED PERSON

Name of deceased Person
(Surname) (Christian names)

Date of Birth [][][] Date of Death [][][]

Certified cause of Death Occupation

Name of Claimant NIS #.
(Surname) (Christian names)

Full Address
..... Tel. #.

To: The Director
National Insurance Services

I, the above named claimant hereby declare that I am
(State relationship if any, to deceased)

to the deceased insured person named above and that I have paid the amount of the funeral expenses.
am liable to pay

(* Words not applicable should be deleted)

I attach the following documents:

- (a) Death Certificate of the deceased insured person;
- (b) Receipt for the amount of funeral expenses paid by me;
- or (c) Undertaker's bill for outstanding funeral expenses.

Note: If there are any uncashed benefit vouchers/pension orders relating to the deceased these should be returned to the National Insurance Office together with this claim.

I hereby claim Funeral Grant in respect of the insured person's death.

Signature of Claimant
(or person authorized to sign on behalf of claimant)

Date

Warning: A person who knowingly makes any false representation for the purpose of obtaining benefit commits a criminal offence punishable by a fine or imprisonment or both.