

NOK REGISTRATION

Home Station HQ:* _____
Army No* _____
Rank:* _____
Honorary Rank: _____
Name:* _____
Regt/ Corps: _____
Date of Birth (DOB) [DD/MM/YYYY]:* _____
Date of Enrolment (DOE) [DD/MM/YYYY]:* _____
Date of Retirement (DOR) [DD/MM/YYYY]:* _____

VETERAN DEATH DETAILS

Date of Veteran Death (DOD) [DD/MM/YYYY]: _____
Gallantry Awards [If Any]: _____
Pension Status: _____
ECHS Card Number: _____

NOK DETAILS

Name:* _____
Date of Birth (DOB) [DD/MM/YYYY]: _____
Relationship:* _____
Aadhar Number: _____
PAN: _____

ADDRESS DETAILS

State:* _____
District:* _____
House No: _____
Locality:* _____
Post Office: _____
PIN:* _____

CONTACT DETAILS

E-mail: _____
Land Line: _____
Mobile Phone: * _____