



(<https://kgidonline.karnataka.gov.in>)

Life Insurance New Business

USER MANUAL FOR SUPERINTENDENT

Karnataka Government Insurance Department

Government of Karnataka

Prepared by

Centre for Smart Governance (CSG)

No. 2A, Hayes Road

Bengaluru - 560025

Karnataka Government Insurance Department Web Page:

- Open the web browser.
- Enter the URL (<http://49.206.243.82:92/>).

The screenshot displays the Karnataka Government Insurance Department website. The header includes the KGID logo, the department name, and the Government of Karnataka. A navigation menu lists Home, Life Insurance, Motor Insurance, Group Insurance, Family Benefit, MIS & Admin, and Contact Us. A language dropdown menu is set to Kannada. The main content area features a banner for Motor Insurance and a login form. The login form has three options: Agency Login (selected), KGID Login, and New Employee Login. It includes fields for Username, Password, and Captcha (with the value 8183). A green Login button and a link for Forgot Password? are also present. The footer contains various policy links and a copyright notice.

Verification and Scrutiny of New Employee Details

LOGIN PAGE- Superintendent:

1. Select the “KGID Login” Tab.

The screenshot displays the Karnataka Government Insurance Department (KGID) website. At the top, the KGID logo and the text 'Karnataka Government Insurance Department, Government of Karnataka' are visible. A navigation bar contains links for Home, Life Insurance, Motor Insurance, Group Insurance, Family Benefit, MIS & Admin, and Contact Us. Below this is a banner for 'Family Insurance' with a 'HOW TO CLAIM LIFE' button. The main content area features a 'Login' section with three tabs: 'Agency Login', 'KGID Login' (which is selected), and 'New Employee Login'. Below the tabs are input fields for 'KGID Number' and 'Mobile Number'. A callout box with an arrow points to the 'KGID Login' tab, containing the text 'Select the KGID Login Tab'. The footer contains various policy links such as About Us, Sitemap, Copyright Policy, Privacy Policy, etc.

2. Superintendent has to enter his “KGID number” and the Mobile number is auto-populated.
3. Click on “Authenticate” Button to get the “OTP”.

help[dot]kgid[at]karnataka[dot]gov[dot]in | +91 080 2237 3845

Kannada

Karnataka Government Insurance Department

Government of Karnataka

Home Life Insurance Motor Insurance Group Insurance Family Benefit MIS & Admin Contact Us

Motor Insurance

HOW TO CLAIM

Login > KGID Login

- Life Insurance
- Motor Insurance
- Family Insurance
- Group Insurance

Enter the KGID number

Mobile number will retrieve automatically

Click on Authenticate button to get the OTP

Agency Login KGID Login New Employee Login

KGID Number: 100004

Mobile Number: 33*****01

Authenticate

OTP: 1123

Captcha: 3117 3117

Login

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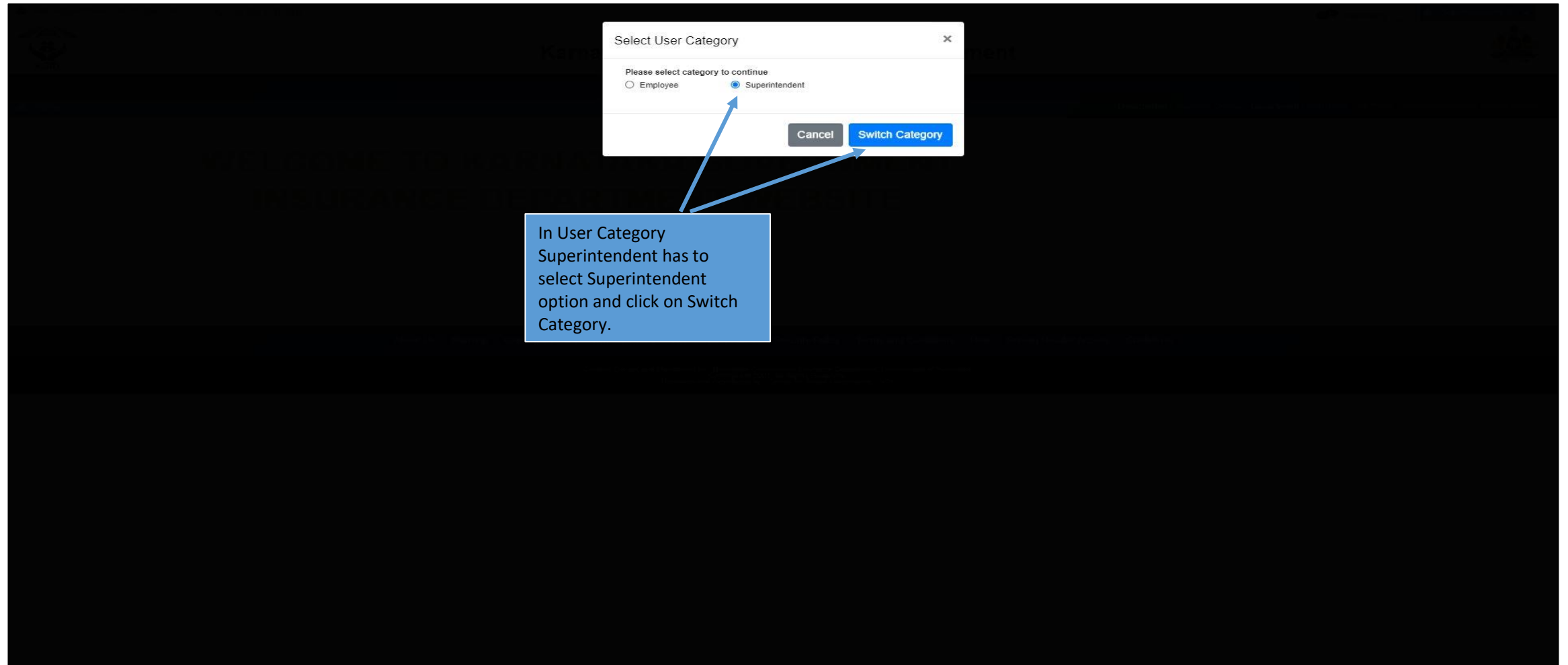
4. Enter the “OTP” and “Captcha” and click on “Login” button.

The screenshot displays the Karnataka Government Insurance Department (KGID) website. The header includes the KGID logo, contact information, and a navigation menu with options like Home, Life Insurance, Motor Insurance, Group Insurance, Family Benefit, MIS & Admin, and Contact Us. A banner for Life Insurance is visible. The main content area features a large illustration of a family under an umbrella, with a signpost listing insurance types: Life Insurance, Motor Insurance, Family Insurance, and Group Insurance. On the right, a login form is shown with the following fields and actions:

- Agency Login (unchecked), **KGID Login** (checked), New Employee Login (unchecked)
- KGID Number: 1123588
- Mobile Number: 70*****65
- Authenticate button
- OTP: Enter OTP (with an arrow pointing to the input field from a callout box)
- Captcha: 5835 (with an arrow pointing to the input field from a callout box)
- Enter Captcha button
- Login button (with an arrow pointing to the button from a callout box)

At the bottom of the page, there is a footer with links for About Us, Sitemap, Copyright Policy, Privacy Policy, Hyperlinking Policy, Security Policy, Terms and Conditions, Help, Screen Reader Access, and Guidelines.

5. After clicking on Login button, the User Category webpage is displayed. Select the **Superintendent** option.
6. Click on “**Switch Category**”.



7. Select the “Application for verification” tab and then click on “NB Applications for verification”.

The screenshot displays the website for the Karnataka Government Insurance Department. The header includes the logo of the Government of Karnataka and the department name. The navigation menu is highlighted, showing the 'Application for verification' tab selected. A dropdown menu is open, listing 'NB Applications for verification', 'MI Applications for verification', and 'MI Renewal Applications for verification'. Two blue callout boxes provide instructions: '1. Select the Application for Verification Tab.' and '2. Select the NB Application for Verification Details Tab.' The footer contains various policy links and copyright information.

Government of Karnataka
Karnataka Government Insurance Department

Home Application for verification Reports

Home Home

Designation : Assistant Director Department : KANNADA, CULTURE AND INFORMATION SECRETARIAT

1. Select the Application for Verification Tab.

2. Select the NB Application for Verification Details Tab.

NB Applications for verification
MI Applications for verification
MI Renewal Applications for verification

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8. The dashboard displays a report of Processed Applications and the Pending Applications.
9. Applications submitted by employees for verification are displayed.
10. Click on **“View Application”** to open the application submitted by an employee.

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Kannada Superintendent 1


Government of Karnataka
Karnataka Government Insurance Department

Home Application for verification Reports

Home > NB Applications for verification Designation : Assistant Director Department : KANNADA, CULTURE AND INFORMATION SECRETARIAT

Submitted Application For Verification

Total Received Applications : 9



Name	Application Reference Number	District	Department	Priority	Status	Action
Pramod SR	20210112132202	Bengaluru (Urban)	KANNADA, CULTURE AND INFORMATION SECRETARIAT	New Employee	Pending	View Application


Pending Application Current Status of Application

Name	Application Reference Number	District	Department	Priority	Status	Action
Pramod SR	20210112132202	Bengaluru (Urban)	KANNADA, CULTURE AND INFORMATION SECRETARIAT	New Employee	Pending	View Application

Click on “View Application”.


11. Workflow Details of the Applications are displayed.
12. Click on **Next** option to proceed further.

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Government of Karnataka
Karnataka Government Insurance Department

Kannada | Superintendent 1



Home >
Home | Application for verification | Reports
Designation : Assistant Director | Department : KANNADA, CULTURE AND INFORMATION SECRETARIAT

Superintendent Verification

Employee Name :Pramod SR | Application Reference Number :20210112132202

Workflow Details
Application Form
Scrutiny

Submitted Date	From	To	Remarks	Comments	Status
12 Jan 2021 15:53:36	Superintendent				Pending
12 Jan 2021 15:53:36	Caseworker	Superintendent	No Correction Found	No Correction Found	Forward to Superintendent
12 Jan 2021 15:33:45	DDO	Caseworker	Issue in both Medical and Application form	Correction required in both forms	Forward to Caseworker
12 Jan 2021 15:07:17	Applicant	DDO			Submitted By the Applicant

Click on Next. → Next

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13. Superintendent has to verify the following details in the Application form:

- * Basic & KGID Details
- * Family Details & Nominee Details
- * Personal Details
- * Payment Details
- * Medical Examination Report

Government of Karnataka
Karnataka Government Insurance Department

Home Application for verification Reports

Designation : Assistant Director Department : KANNADA, CULTURE AND INFORMATION SECRETARIAT

Superintendent Verification

Employee Name :Pramod SR | Application Reference Number :20210112132202

Workflow Details Application Form Scrutiny

Application Form Click Here Medical Form Click Here

- + View Basic & KGID Details
- + View Family Details & Nominee Details
- + View Personal Details
- + View Payment Details
- + View Medical Examination Report

Each of the following details has to be verified by Superintendent

Previous Next

14. To verify the “Basic Details” & “KGID Details” tick the check box **verify**.

Workflow Details | **Application Form** | Scrutiny

Application Form [Click Here](#) | Medical Form [Click Here](#)

[View Basic & KGID Details](#)

Basic Details

Proposer Name	:	Pramod SR	Spouse Name	:	
Present Working office	:	DISTRICT INSURANCE OFFICER, KARNATAKA GOVERNMENT INSURANCE DEPARTMENT, BANGALORE URBAN DISTRICT, BANGALORE	Residential Address	:	Hassan
Father Name	:	Ramesh	Date of Birth	:	13-12-1987
Place of Birth	:	Hassan	Gender	:	Male
Pincode	:	576201	Phone	:	8975641238
Joining Date of Government Service	:	19-12-2020	Permanent / Temporary	:	Permanent
Present Designation	:	Trainee	Present Pay Scale	:	25800.00 - 51400.00
Marital Status	:	Unmarried	Divorce / Remarried	:	N/A
Is spouse government employee?	:	No	Group	:	C
Are you an orphan?	:	No			

KGID Details

Employee Pay Scale : 25800.00 - 51400.00

KGID Premium Details

KGID Policy Number / Application Ref Number	Sanction Date	KGID Premium
20210112132202		2410
Total:		2410

Verify ← **Click on “Verify” Check Box.**

15. To verify the “Family Details” & “Nominee Details” tick the check box **verify**.

Superintendent Verification

Employee Name :Pramod SR | Application Reference Number :20210112132202

Workflow Details | **Application Form** | Scrutiny

Application Form Click Here | Medical Form Click Here

+ View Basic & KGID Details

- View Family Details & Nominee Details

Family Details

Name of family member	Relation	Date of Birth	Age of Family Member	Alive / Dead	Is Sibling Married?	Alive (Health Condition)	Date of Death	Dead (Death Reason)
Latha	Mother	25-05-1965	55	Alive	N/A	GOOD		
Ramesh	Father	20-05-1955	65	Alive	N/A	GOOD		

Number of Brother's : 0 | Number of Sister's : 0

Number of Children's : 0

Nominee Details

Name of Nominee	Age of Nominee	Relation	% Share	Name of Guardian	Relation with Guardian
Latha	55	Mother	50		
Ramesh	65	Father	50		

Verify **Click on Verify Check Box.**

+ View Personal Details

+ View Payment Details

16. To verify the “Personal Details” tick the check box **verify**.

Personal Details

Is your health in good condition : Yes Height [cms] : 165 Weight [kgs] : 70

Are you married ? If so, No

Details about personal health

Health Details	Comments	Documents(if any)
On what occasion and for what diseases or injuries have you received medical advice, when and by whom?	No	
Has any relative (member of your family) living or, dead, been affected with diabetes, Cancer, Gout, Consumption, epilepsy, Insanity, Apoplexy, Heart failure ? If so, give particulars.	No	
Have you lived in the same house or been associated in any way with a person suffering from consumption or any other infectious diseases within the last two years ? If so, give details.	No	
Have you ever suffered from diseases of the Brain or from Paralysis, Insanity, Epileptic or other fits, or any other nervous disorder ?	No	
Have you ever suffered from Sore-throat, Spitting of blood, Chronic Cough, Asthma, Bronchitis or other diseases of the Lungs ?	No	
Have you ever suffered from Dropsy or diseases of the Liver Kidney or Urinary Organs ?	No	
Have you ever vomited or passed blood or suffered from Diarrhoea, Dysentery or Stomach ache ? If so, since when, how often and how long each time ?	No	
Have you ever suffered from Rheumatic fever or chronic Rheumatism? If so, what joints were attacked? do you suffer from shortness of breath, giddiness or palpitation of heart? If so, since when how often and how long each time ?	No	
Have you ever passed blood, pus, sugar, or albumen in urine? How often do you get up at night to pass urine?	No	
Have you had any other illnesses considered by you to be important or not? If so, give details.	No	
Do you drink wine, spirits or malt liquors? Are you addicted to the use of any narcotic drugs like opium, cocaine, etc. If so, give particulars. Do you smoke tobacco? If so, to what extent ?	No	
[a] Have you remained absent from your work on grounds of health during the last 3 years? If so, state when, how long and or what ailments?	No	
[b] Were you medically advised to have a change of place for health reasons? If so, give reasons and state when and how long.	No	
Has any proposal on your life been previously made to official Branch or Life Insurance Corporation, or Postal Insurance, or Hyderabad state Life Insurance fund? If so, state.	No	

Verify Click on Verify

[+ View Payment Details](#)

17. To verify the “Payment Details” tick the check box **Verify**.

Employee Name:Pramod SR | Application Reference Number:20210208130605

Workflow Details **Application Form** Scrutiny Uploaded Documents

+ View Basic & KGID Details

+ View Family Details & Nominee Details

+ View Personal Details

- View Payment Details

Payment Details

Initial Amount :	1440	Payment Reference No :	4521027890
Purpose :	KGID Premium	Sub Purpose :	Initial Payment
DDO Code :	120270	HOA :	Revenue Head of Account
Date :	12-02-2020		

Verify **Click on Verify**

+ View Medical Examination Report

Previous Next

18. To verify the “Medical Examination Report” tick the check box **Verify**. Click on **Next** to proceed further.

← View Medical Examination Report

Physical Details

Proposer's Height [Cm]: 165	Proposer's Weight [Kgs]: 70
Proposer's Pulse Rate [No's/Min]: 54	Proposer's Breathing Rate [No's/MIN]: 72
Proposer's Blood Pressure : 72	Low / Dystolic : 72
HIGH Systolic : 72	Remarks : good

Other Details

Was Proposer Admitted To Hospital?	No
Has Proposer Met With an Accident?	No
Has Proposer Undergone Test Like Ecg, X-Ray, Lasseray?	No
At Present Has Proposer Undergone Any Treatment?	No

Health Details

4) Is there any symptoms of having illness in chest, heart and lungs?	No
5) Is there any symptoms of disease in teeth,gums,tongue,ear,nose,Throat, eyes?	No
6) Does the Proposer have any deficiency or disability	No
Does the Proposer have Thyroid,lymph node in joint, or have scars from surgery	No
7) Any indication of enlargement of Spleen or Liver	No
8) Is there any abnormality in any part of the Gastrointestinal track	No
9) Does proposer suffer from Hernia?	No
10) Is there any abnormalities found in the urinary tract	No
11) Does the proposer have any indication of having diseases or ailments with respect to the Nervous System	No
12) Does the proposer have any indication of having undergone a surgery	No
13) Does the proposer have any marks of which might have occurred accidentally,or done due to any other reason	No
14) Is there any important adverse symptom in the very nature of the proposer's health	No
Does the Proposer have a good life cycle? If not, please give the specific reason	No

Doctor Details

<input checked="" type="radio"/> Within state doctor	<input type="radio"/> Other state doctor		
KMC Code :	49184	Doctor Name :	DR MANJIA NAIK R
Doctor KGID :	1794429	Designation :	SPECIALIST
Doctor Hospital Name :			
<input checked="" type="checkbox"/> verify			

Previous Next

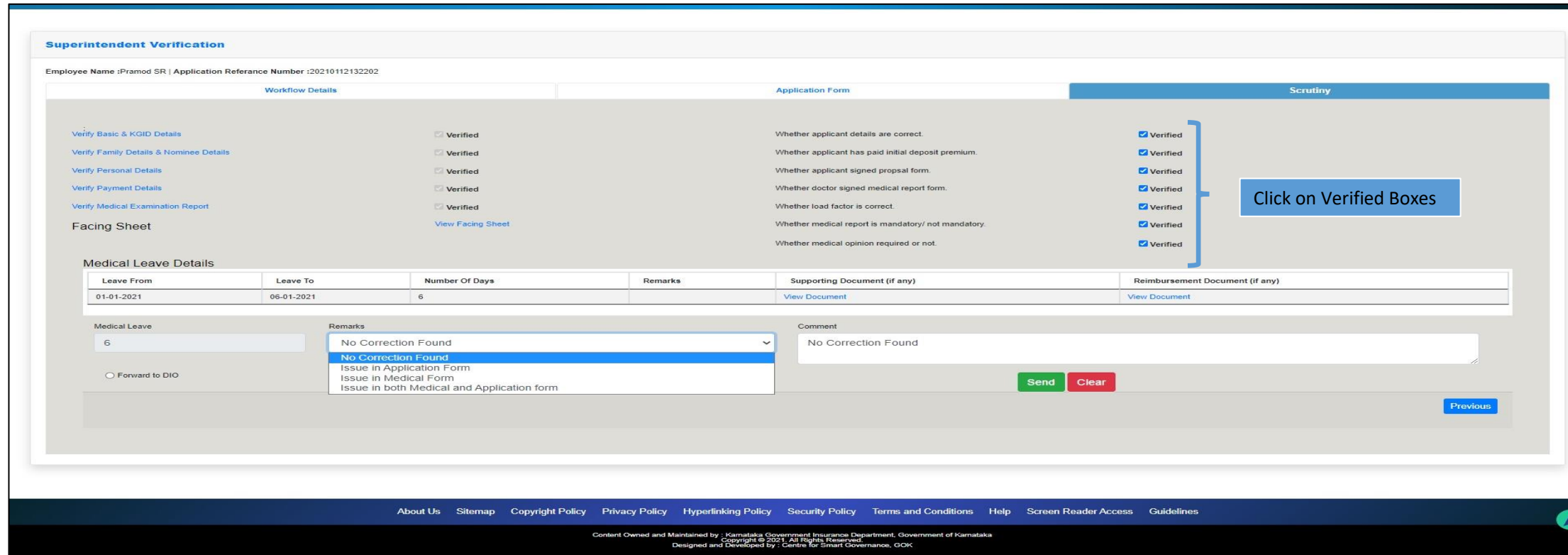
Click on Verify

Click on Next Button

19. In Scrutiny Superintendent has to verify:

- * Whether applicant details are correct.
- * Whether applicant has paid initial deposit premium.
- * Whether applicant signed proposal form.
- * Whether doctor signed medical report form.
- * Whether load factor is correct.
- * Whether medical report is mandatory/ not mandatory.
- * Whether medical opinion required or not.

20. Tick the check box **“Verified”**, if the above mentioned details are correct.



Superintendent Verification

Employee Name :Pramod SR | Application Reference Number :20210112132202

Workflow Details | **Application Form** | **Scrutiny**

Verify Basic & KGID Details Verified

Verify Family Details & Nominee Details Verified

Verify Personal Details Verified

Verify Payment Details Verified

Verify Medical Examination Report Verified

View Facing Sheet

Facing Sheet

Medical Leave Details

Leave From	Leave To	Number Of Days	Remarks	Supporting Document (if any)	Reimbursement Document (if any)
01-01-2021	06-01-2021	6		View Document	View Document

Medical Leave: 6

Remarks:

Comment:

Forward to DIO

[Send](#) [Clear](#) [Previous](#)

Click on Verified Boxes

Whether applicant details are correct. Verified

Whether applicant has paid initial deposit premium. Verified

Whether applicant signed proposal form. Verified

Whether doctor signed medical report form. Verified

Whether load factor is correct. Verified

Whether medical report is mandatory/ not mandatory. Verified

Whether medical opinion required or not. Verified

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21. Superintendent can verify the “Medical Leave Details” uploaded by DDO.
22. After verification, Superintendent can forward the application to DIO by selecting the suitable Remarks and providing a comment in the Comment Box.

Superintendent Verification

Employee Name : Pramod SR | Application Reference Number : 20210112132202

Workflow Details

- Verify Basic & KGID Details Verified
- Verify Family Details & Nominee Details Verified
- Verify Personal Details Verified
- Verify Payment Details Verified
- Verify Medical Examination Report Verified

Facing Sheet

[View Facing Sheet](#)

Application Form

- Whether applicant details are correct. Verified
- Whether applicant has paid initial deposit premium. Verified
- Whether applicant signed proposal form. Verified
- Whether doctor signed medical report form. Verified
- Whether load factor is correct. Verified
- Whether medical report is mandatory/ not mandatory. Verified
- Whether medical opinion required or not. Verified

Scrutiny

Leave From	Leave To	Number Of Days	Remarks	Supporting Document (if any)	Reimbursement Document (if any)
01-01-2021	06-01-2021	6		View Document	View Document

Medical Leave

Forward to DIO

Remarks

No Correction Found

No Correction Found

Issue in Application Form

Issue in Medical Form

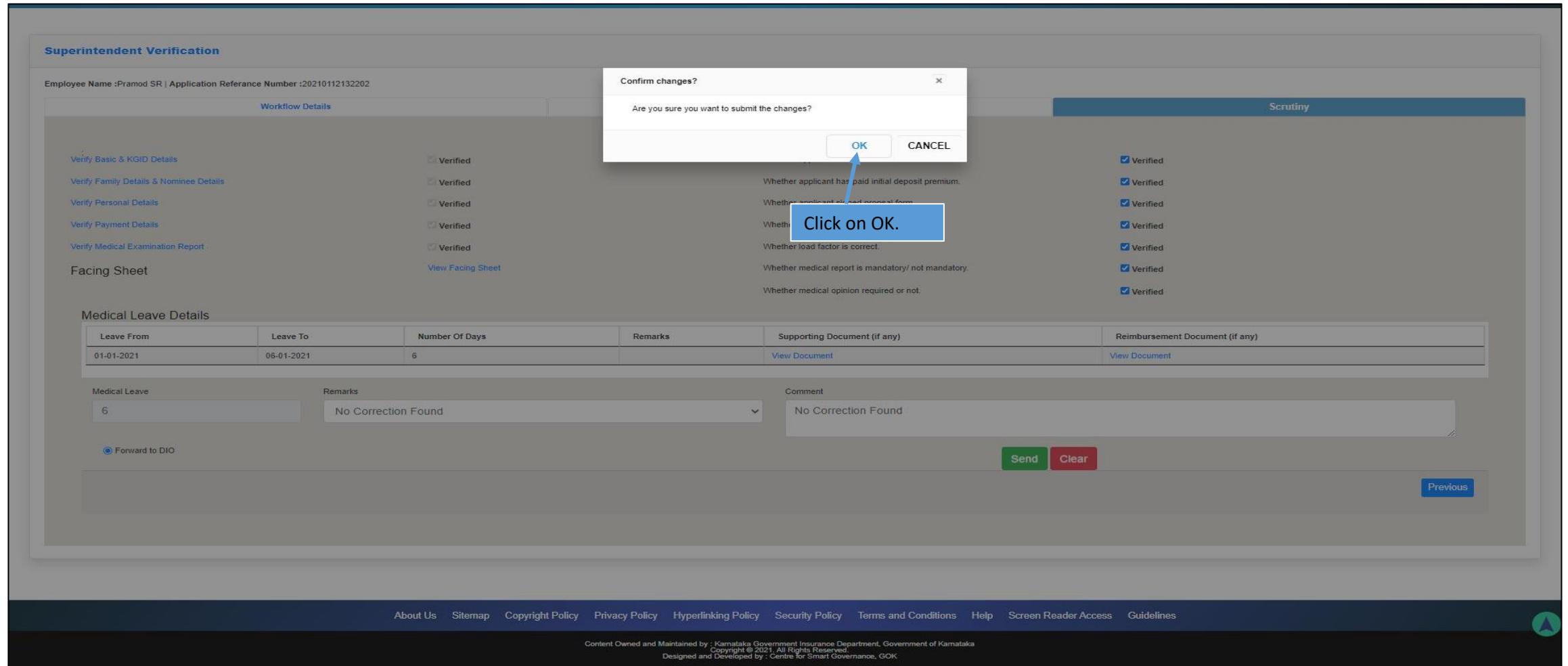
Issue in both Medical and Application form

Comment

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22. The application will ask for Confirm Changes, Click on "OK".



The screenshot displays the 'Superintendent Verification' application interface. A modal dialog box titled 'Confirm changes?' is centered on the screen, asking 'Are you sure you want to submit the changes?' with 'OK' and 'CANCEL' buttons. A blue callout box with an arrow points to the 'OK' button, containing the text 'Click on OK.'.

The background interface includes the following sections:

- Employee Name:** Pramod SR | **Application Reference Number:** 20210112132202
- Workflow Details:** A list of verification steps, each with a 'Verified' checkbox:
 - Verify Basic & KGID Details Verified
 - Verify Family Details & Nominee Details Verified
 - Verify Personal Details Verified
 - Verify Payment Details Verified
 - Verify Medical Examination Report Verified
- Facing Sheet:** [View Facing Sheet](#)
- Medical Leave Details:**

Leave From	Leave To	Number Of Days	Remarks	Supporting Document (if any)	Reimbursement Document (if any)
01-01-2021	06-01-2021	6		View Document	View Document

Medical Leave: 6
Remarks: No Correction Found
Comment: No Correction Found

Forward to DIO

[Send](#) [Clear](#) [Previous](#)
- Scrutiny:** A list of verification steps, each with a checked 'Verified' checkbox:
 - Whether applicant has paid initial deposit premium. Verified
 - Whether submitted by Aad connect from... Verified
 - Whether... Verified
 - Whether load factor is correct. Verified
 - Whether medical report is mandatory/ not mandatory. Verified
 - Whether medical opinion required or not. Verified

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23. Superintendent can click on “**Uploaded Documents**” to View and Download the “**Application Form**” and “**Medical Form**”.

Employee Name:Pramod SR | Application Reference Number:20210208130605

Workflow Details	Application Form	Scrutiny	Uploaded Documents
Application Form	Click Here	Medical Form	Click Here
Click to Download the Application Form		Click to Download the Medical Form	
			Previous