



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

Life Insurance New Business

USER MANUAL FOR CASE WORKER

Karnataka Government Insurance Department

Government of Karnataka

Prepared by

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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 (KGID) website. The header includes the KGID logo, the text "Karnataka Government Insurance Department" and "Government of Karnataka", and a language selection dropdown menu set to "Kannada". The navigation menu contains links for Home, Life Insurance, Motor Insurance, Group Insurance, Family Benefit, MIS & Admin, and Contact Us. The main content area features a banner for "Motor Insurance" with an image of a car and a motorcycle. Below the banner is a "Login" section with a "Login" link and an "Agency Login" button. The login form includes radio buttons for "Agency Login" (selected), "KGID Login", and "New Employee Login". The form fields are: Username (placeholder: "Enter Username"), Password (placeholder: "Enter Password"), and Captcha (displaying "8183" and a placeholder "Enter Captcha"). A green "Login" button is positioned below the fields, and a "Forgot Password?" link is at the bottom right of the form. The footer contains links for About Us, Sitemap, Copyright Policy, Privacy Policy, Hyperlinking Policy, Security Policy, Terms and Conditions, Help, Screen Reader Access, and Guidelines. A copyright notice at the bottom states: "Content Owned and Maintained by : Karnataka Government Insurance Department, Government of Karnataka. Copyright © 2021. All Rights Reserved."

Verification and Scrutiny of New Employee Details

Login Page: Case Worker

1. Caseworker has to enter his “KGID number” and the Mobile number is auto-populated.
2. 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

Life Insurance..

Login > KGID Login

Life Insurance
Motor Insurance
Family Insurance
Group Insurance

Agency Login KGID Login New Employee Login

KGID Number: 1716113

Mobile Number: 99*****48

Authenticate

Enter the KGID number

Mobile number will retrieve automatically

Click on Authenticate button to get the OTP

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

The screenshot displays the Karnataka Government Insurance Department website. At the top, there is a header with the department's name and logo. Below the header is a navigation menu with options like Home, Life Insurance, Motor Insurance, Group Insurance, Family Benefit, MIS & Admin, and Contact Us. A banner for Family Insurance is visible, featuring a family and an umbrella, with a 'HOW TO CLAIM' button. The main content area is divided into two sections. On the left, there is a graphic with a signpost pointing to Life Insurance, Motor Insurance, Family Insurance, and Group Insurance, along with an illustration of a family and a heart. On the right, there is a login form with the following fields and buttons:

- Agency Login (unchecked), **KGID Login** (checked), New Employee Login (unchecked)
- KGID Number: 1716113
- Mobile Number: 99*****48
- Authenticate button
- OTP: 1123
- Captcha: 7561 (with a corresponding input field containing 7561)
- Login button

Blue callout boxes with arrows point to the OTP and Captcha input fields, and the Login button, with the text "Enter the OTP and Captcha" and "Click on Login" respectively.

Footer links include: About Us, Sitemap, Copyright Policy, Privacy Policy, Hyperlinking Policy, Security Policy, Terms and Conditions, Help, Screen Reader Access, Guidelines.

4. The dashboard displays a report of Processed Applications and the Pending Applications.
5. Number of Applications submitted for verification are displayed.
6. Click on **“View Application”** to open the application.

help[dot]kgid[at]karnataka[dot]gov[dot]in +91 080 2237 3845 Kannada B R GEETHA

Government of Karnataka
Karnataka Government Insurance Department

Home Application for verification Reports

Home > NB Applications for verification Designation : Trainee Department : KARNATAKA GOVERNMENT INSURANCE DEPARTMENT KGID

Submitted Application For Verification

Total Received Applications : 10

Name	Application Reference Number	District	Department	Priority	Status	Action
Pramod SR	20210210110302	Mysuru	KARNATAKA GOVERNMENT INSURANCE DEPARTMENT KGID	New Employee	Pending	View Application

Click on View Application

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

help@kgid[at]karnataka[dot]gov[dot]in +91 080 2237 3845 Kannada B R GEETHA

Government of Karnataka
Karnataka Government Insurance Department

Home Application for verification Reports

Home > Designation : Trainee Department : KARNATAKA GOVERNMENT INSURANCE DEPARTMENT KGID

Workflow of Application.

Caseworker Verification

Employee Name:Pramod SR | Application Reference Number:20210210110302

Status of Application.

Workflow Details		Application Form		Scrutiny		Uploaded Documents	
Submitted Date	From	To	Remarks	Comments	Status		
10 Feb 2021 11:02:47	Caseworker				Pending		
10 Feb 2021 11:02:47	DDO	Caseworker	No Correction Found	No Correction Found	Forward to Caseworker		
10 Feb 2021 11:00:51	Applicant	DDO			Submitted By the Applicant		

Next

Click on Next Button.

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9. Caseworker has to verify the following details in the Application form:

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

The screenshot shows the 'Caseworker Verification' interface for the Karnataka Government Insurance Department (KGID). The page header includes the KGID logo, contact information (help@kgid[at]karnataka[dot]gov[dot]in, +91 080 2237 3645), language selection (Kannada), and user profile (B R GEETHA). The main navigation bar contains 'Home', 'Application for verification', and 'Reports'. The user's designation is 'Trainee' and the department is 'KARNATAKA GOVERNMENT INSURANCE DEPARTMENT KGID'. The 'Caseworker Verification' section displays the employee name 'Pramod SR' and application reference number '20210210110302'. A tabbed interface shows 'Application Form' as the active tab. Under this tab, there are five expandable sections: 'View Basic & KGID Details', 'View Family Details & Nominee Details', 'View Personal Details', 'View Payment Details', and 'View Medical Examination Report'. A blue callout box with a bracket indicates that each of these details must be verified by the caseworker. At the bottom right of the application form section, there are 'Previous' and 'Next' buttons. The footer contains various policy links: About Us, Sitemap, Copyright Policy, Privacy Policy, Hyperlinking Policy, Security Policy, Terms and Conditions, Help, Screen Reader Access, and Guidelines.

10. To verify the “Basic Details” & “KGID 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](#)

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	:	01-01-1987
Place of Birth	:	Hassan	Gender	:	Male
Pincode	:	573201	Phone	:	8956472365
Joining Date of Government Service	:	13-12-2020	Permanent / Temporary	:	Permanent
Present Designation	:	Trainee	Present Pay Scale	:	30350.00 - 58250.00
Marital Status	:	Unmarried	Divorce / Remarried	:	N/A
Is spouse government employee?	:	No	Group	:	C
Are you an orphan?	:	No			

KGID Details

Employee Pay Scale : 30350.00 - 58250.00

KGID Premium Details

KGID Policy Number / Application Ref Number	Sanction Date	KGID Premium
20210208130605		2770
Total:		2770

Verify **Click on Verify**

12. 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](#)

13. 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

14. 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 / Dysstolic : 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 :	49164	Doctor Name :	DR MANJA NAIK R
Doctor KGID :	1794429	Designation :	SPECIALIST
Doctor Hospital Name :			
<input checked="" type="checkbox"/> Verify			

Previous Next

Click on Verify

Click on Next Button

15. In Scrutiny Caseworker 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.

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

Caseworker Verification

Employee Name: Pramod SR | Application Reference Number: 20210210110302

Workflow Details
Application Form
Scrutiny
Uploaded Documents

[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: Remarks:

Comment:

Forward to Superintendent

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

Tick the check box Verified

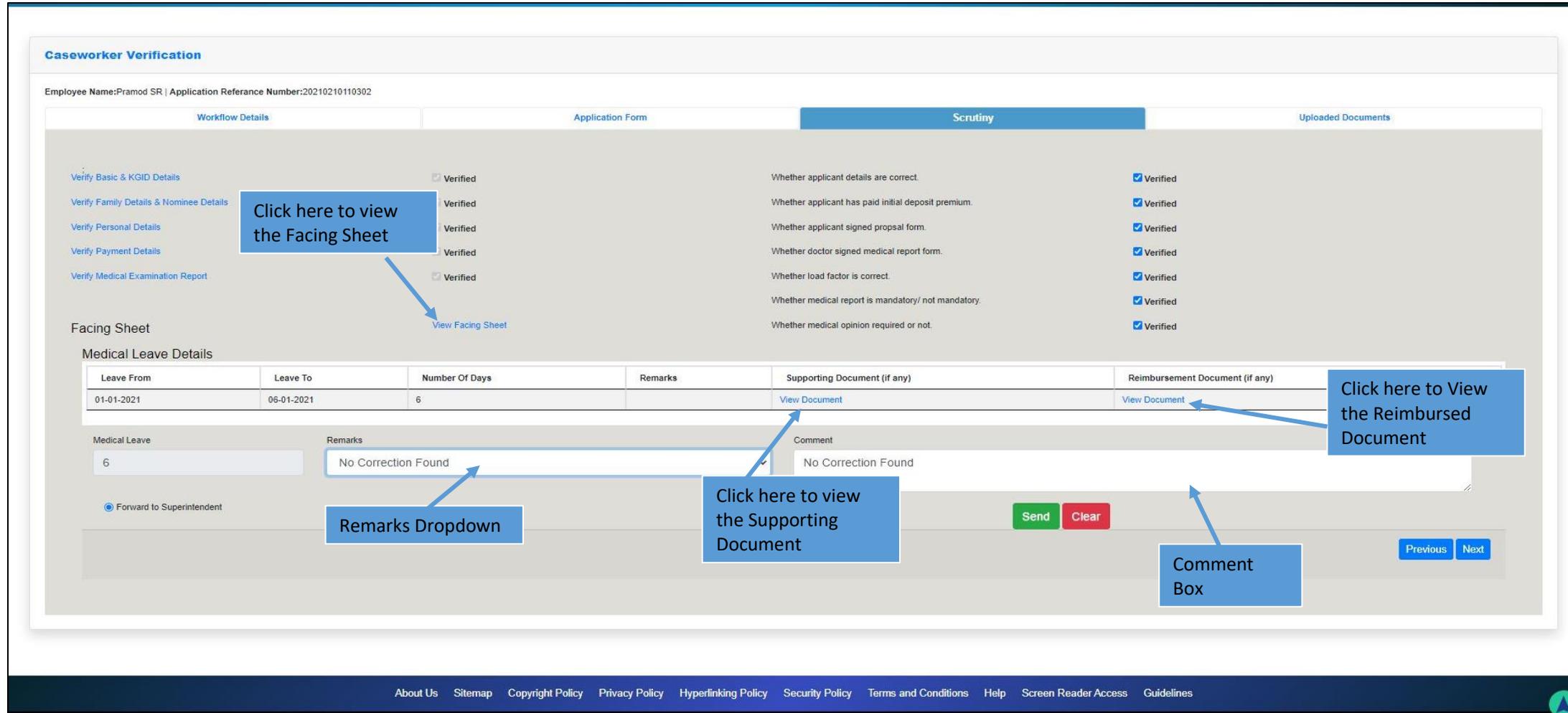
Send
Clear

Previous
Next

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▲

17. Caseworker can verify the “Medical Leave Details” uploaded by DDO.

18. After verification, caseworker can forward the application to Superintendent by selecting the suitable Remarks and providing a comment in the Comment Box.



The screenshot displays the 'Caseworker Verification' interface. At the top, it shows the employee name 'Pramod SR' and application reference number '20210210110302'. The interface is divided into four tabs: 'Workflow Details', 'Application Form', 'Scrutiny', and 'Uploaded Documents'. The 'Scrutiny' tab is active, showing a list of verification items, all of which are marked as 'Verified'. Below this, there is a 'Facing Sheet' section with a table of '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

Below the table, there are input fields for 'Medical Leave' (value: 6), 'Remarks' (value: No Correction Found), and 'Comment' (value: No Correction Found). A radio button is selected for 'Forward to Superintendent'. At the bottom, there are 'Send' and 'Clear' buttons, and 'Previous' and 'Next' navigation buttons.

Annotations on the screenshot include:

- 'Click here to view the Facing Sheet' pointing to the 'View Facing Sheet' link.
- 'Click here to View the Reimbursed Document' pointing to the 'View Document' link in the Reimbursement Document column.
- 'Click here to view the Supporting Document' pointing to the 'View Document' link in the Supporting Document column.
- 'Remarks Dropdown' pointing to the Remarks input field.
- 'Comment Box' pointing to the Comment input field.

The footer contains links for 'About Us', 'Sitemap', 'Copyright Policy', 'Privacy Policy', 'Hyperlinking Policy', 'Security Policy', 'Terms and Conditions', 'Help', 'Screen Reader Access', and 'Guidelines'.

19. Case Worker 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 Application Form	
			Previous