If a CPRMS Medical Card is lost/ soiled/ mutilated or misplaced the following procedure may be followed to obtain the duplicate Medical Card:

- 1. An application requesting for issue of duplicate Medical Card by the Ex-employee, (in case the ex-employee is expired application may be submitted by the spouse) to be forwarded through proper channel
- 2. Documents to be enclosed:
 - i) Annexure I & Annexure II (available below)
 - ii) FIR filed with respective Police Station SHO in Original (FIR obtained from Mee-seva will also be considered) for lost/ misplaced cards.
 - iii) Self attested copy of relevant Medical Card
 - iv) Demand Draft Rs 300/- in favor of SCCL payable at Kothagudem.
 - v) Self attested copy of Aadhaar Card of the applicant

THE SINGARENI COLLIERIES COMPANY LIMITED

(A Government Company)

Application for issuing duplicate /fresh Medical Card in case Original Smart Medical issued under CPRMS-NE/ CPRMS-E is lost/misplaced/stolen damaged/mutilated/broken

(To be submitted in Triplicate)

| | General Manager (Per), EE, Wel & CSR Gingareni Collieries Company Ltd. |
|-------------|--|
| Sir, | //Through Proper Channel// |
| Э П, | Sub: -Request for issue of a fresh CPRMS-NE/CPRMS-E Smart Medical Card in place of lost/misplaced/stolen/mutilated/Soiled/damaged smart card— Reg. Ref: - 1) Circular No.CRP/PER/IR/CPRMS/375 dated: 23.03.2018 2) Circular No.CRP/PER/C/06/1752, dated: 04.07.2013 |
| card ii | I have taken membership in CPRMS-NE/ CPRMS-E and a Smart Medical Card No. has been issued to me. I request to arrange to issue me a fresh/duplicate Medical n place of existing one for the following reason. |
| | 1) I have lost/misplaced/got my card stolen atplace on Date: and I have lodged an FIR withPolice Station and I am hereby enclosing FIR (in original) along with Action Taken Report issued by Police Authorities/ I am enclosing an undertaking to return the medical card whenever the original medical card is found/traced. |
| | My CPRMS-NE/CPRMS-E Smart Medical Card got mutilated/Soiled/ damaged/broken due to regular usage |
| Kotha | I am hereby enclosing a Demand Draft vide No obtained from Branch of Bank in favour of SCCL payable at gudem for Rs.300/- for issuing of fresh/duplicate CPRMS-NE/CPRMS-E Smart Medical |
| Card. | gudent for Rs.3007- for issuing of freshfulphicate CFRM3-NE/CFRM3-E Smart Medical |
| | Yours faithfully, |
| | Signature of the Applicant |
| | Name of the Applicant |

Note: Please Strike off either point No.01 or 02, whichever is not applicable

UNDERTTAKING TO BE SUBMITTED FOR ISSUE OF A DUPLICATE MEDICAL CARD UNDER CPRMS-NE/CPRMS-E

| | DATE: |
|---|--|
| TO THE GENERAL MANAGER (PER) EE, WELFARE &CSR | |
| "Through G | M/Area" |
| Dear Sir, | |
| In consideration of my request to issued for Medical card No: | I hereby agree to hold you (THE uences that may arise in issuing me a ses, charges and expenses. I further |
| Dated at this Day of | |
| | Yours faithfully, |
| | |
| | |
| Address & Mobile Number: | |
| Witnesses: | |
| 1. Name: EC: Desig: Place of work: Signature: | |
| 2. Name: EC: Desig: Place of work: Signature: | |