

**THE STATE TRADING CORPORATION OF INDIA LTD.**

**(PERSONNEL DIVISION)**

EMPLOYEE NO. \_\_\_\_\_

MEDICAL CARD NO. \_\_\_\_\_

**IDENTITY CARD FOR MEDICAL CERTIFICATES (ISSUE/OR CORRECTION OF DETAILS)**

<b>NAME OF EMPLOYEE</b>	
<b>DESIGNATION</b>	
<b>DIVISION / BRANCH</b>	
<b>RESIDENTIAL ADDRESS</b>	
<b>DATE OF INITIAL APPOINTMENT IN S.T.C.</b>	
<b>DATE OF RETIREMENT</b>	

**DETAILS OF FAMILY FOR ISSUE OF NEW CARD OR ADDITION / DELETION OF NAME(S) IN THE EXISTING MEDICAL CARD ARE AS UNDER:**

<b>NAME</b>	<b>Date of Birth</b>	<b>Relation</b>	<b>Occupation</b>	<b>Monthly Income</b>	<b>Remarks (if any)</b>

## CERTIFICATE

A) (i) My wife/husband, whose name is given above, is not employed in the Govt. / Govt. undertaking / Local Body / Pvt. Organization; **OR**

A) (ii) My wife/husband, whose name is given above, is employed, and her employment details are as follows:

Designation:

Name of Organization:

Address:

And she/he has not been availing Medical Facilities from her/his employer/office for herself/himself and other members of the family mentioned above. (Please attach a certificate from the employer/office in this effect)

B) (i) I hereby declare that my Father/Mother/Father-in-Law/Mother-in-Law namely is/are wholly/mainly dependent upon me and that he/she/they normally reside with me.

I also certify that the total monthly income of my Father/Mother/Father-in-Law/Mother-in-Law does not exceed Rs. 500 /- per month as per Rule 1.3 (II) of STC Employees Medical Benefits Scheme which is explained under:

(a) Lump-sum non-recurring income, CPF Benefits, Government of India Price Bonds, Gratuity, Commuted Gratuity, Insurance Benefits, etc. should not be regarded as income for the purpose of this rule. However, recurring monthly income from sources such as houses, land holding etc. should be taken into account for the purpose of assessing income,

(b) That the relief on Pension sanctioned after December 1985 may not be taken into account to determine the gross pension for the purpose of income limit of Rs. 500 /- per month for dependency of parents; and

(c) For reckoning the income of the parent, the Pension originally sanctioned should be taken into account for determining the entitlement and coverage and not the Pension after commutation, subject to other conditions being fulfilled after the CS (MA) rules.

B) (ii) In case any of the above-mentioned member(s) is/are getting pension from the employer, a certificate to this effect may be enclosed.

C) I certify that my son(s) whose name(s) is/are given above is/are unemployed and totally dependent on me.

D) I certify that my daughter(s) whose name(s) is/are given above is/are unmarried, unemployed and totally dependent on me.

I SOLEMNLY AFFIRM & DECLARE THAT THE INFORMATION AS GIVEN ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND NOTHING HAS BEEN CONCEALED.

(SIGNATURE OF EMPLOYEE)

DATE: