From ……………………….

This is not a form or format. Please do not fill in the blanks and send.

Use this as a template. Write your own letter and get it typed, using this as a model/sample.

Self-attest all att documents.

Mobile No…………………………

To,

Commandant

Command Hospital Kolkata

(Through Zila Sainik Board ……………)

**REQUEST FOR MEDICAL EXAMINATION AND ISSUE OF DISABILITY CERTIFICATE**

Respected Sir,

1. My son ………………………….. dt of birth ……………… has the disability …………………………. (Med Cert att).
2. For obtaining new 64 KB ECHS Card, he requires a disability certificate from the dependent Military Hospital. I request to kindly conduct the medical examination and issue the certificate as per latest format applicable.
3. Following supporting documents are enclosed.
4. Copy of Previous Medical Certificate of son
5. Copy of Birth Certificate of son
6. Copy of Dependent Identity Card of son
7. Copy of Aadhar Card of son.
8. Copy of discharge bookpage in which details of family is entered.

Yours faithfully,

Place:

Date :

**RECOMMENDATIONS**

Place:

Date : (Secretary, Zila Sainik Board)