

APPENDIX 1/55  
(See Rules, 101, Serial No. 41)  
CONCESSION CERTIFICATE

Form for the purpose of issue of rail concession to heart patients to be used by the Office-in-Charge of the Hospital.  
This is to certify that Sh/Smt. \_\_\_\_\_ whose particulars are furnished below is a bonafide heart patient and is required to travel alone or with Escort from \_\_\_\_\_ (Station). He/She is a follow up case in CTVS Department at G.B. Pant Hospital, New Delhi.

PARTICULARS OF PATIENT

- a) Age
- b) Sex

Place  
Date:

Signature \_\_\_\_\_  
Office-in-Charge of Hospital

Seal of the Hospital

\*Indicate the name of the Hospital

- Note: (i) The certificate is valid for three months from the date of issue.  
ii) No alternation in the form is permitted unless attested by the issuing officer  
iii) Certificate should be issued to heart patients only for travel from the station serving his/her place of residence to the station serving the hospital.

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- c) Age
  - d) Sex
- Place

Signature \_\_\_\_\_

Office-in-Charge of Hospital

Date:

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