

NHPC LIMITED
(A Govt. of India Enterprise)

Ref. No. -----

NHPC OFFICE COMPLEX -----

**AUTHORITY LETTER UNDER DIRECT PAYMENT SCHEME TO RETIRED EMPLOYEE/
HIS/HER SPOUSE AND SPOUSE/CHILDREN OF DECEASED EMPLOYEE**

The Medical Superintendent,

Sub: Indoor treatment of Shri /Smt.

Dear Doctor,

We shall be grateful if you kindly admit Shri/Smt. _____ (to be identified in the enclosed Photocopy of Medical Identity Card) for treatment as 'in patient' in your Hospital under Direct Payment Scheme. **After the treatment, we request you to kindly verify and confirm the identity of treated patient on the photocopy of the Medical Identity Card, and return same with final bill.**

2. In case ex-employee or his/her spouse and spouse/Children of deceased employee while taking admission in Hospital under Direct Payment Scheme opts for higher category of accommodation than their entitled class, the difference of charges on account of their opting for higher category of accommodation, telephone/diet charges if any will be paid by himself or by his/her spouse and spouse/ children of deceased employee directly to your Hospital. The bill on NHPC should be raised after adjustment/recovery is made on account of providing higher category of accommodation.
3. ***The bill for the treatment of the patient may be raised directly to the authority issuing authority letter, as the case may be.*** The further particulars of patient of admission are as under :

1. Name of the Patient : _____
(a) Medical Card No. : _____
2. Name of Ex-Employees & : _____
Relationship with the patient
3. Employee No. & : _____
Designation at the time of
retirement/ VRS/ Death etc.
4. Entitled category of : _____
admission

Thanking you,

Yours faithfully,

(Signature of the Authorised Signatory)