

In case any changes required to the existing details please specify eg **change of parent polyclinic, change of address and deletion of beneficiary due to death, marriage, over 25 age(son) & employment etc.**

Ser No	Changes required	Reason

NOTE:- 1. The cost of upgraded ECHS cards will be paid @ Rs 135/- per card through DD in favour of **Regional Centre, ECHS Delhi Cantt.**

2. One Photo Copy of old card (both sides) to be attached.
3. One set of latest photograph to be pasted with Application Form.
4. One photo state copy of filled form to be attached alongwith original form.
5. If address is being changed then address proof (Ration Card/Electricity Bill/Aadhar Card) is required, **in case of any other correction proof required accordingly.**
6. If any deletion is reqd then clearly mention the name on the Form with reason.
7. If change in rank is required submit proof for grant of new rank along with the application form.
8. Application to be filled in CAPITAL letters and not running letters and spellings of name should be as per old card. In case of change in NAME or SPELLING, proof is required.
9. **Aadhar Card number is to be mentioned in the column shown.**
10. Write down service no with prefix/suffix as applicable. Please write your No, Rank, Name & Mob No/Tele No on back side of Demand Draft.
11. Affidavit required in case the dependent daughter/disabled son is above 25 Yrs.
12. The new cards will be delivered at Regional Centre where in the forms were deposited. The new cards after arrival shall be informed through SMS, **collection of new cards to be done within seven (07) days. Office Timings : 9 am to 1 pm (Wednesday closed).**
13. Kindly fill the **JEEVAN PRAMAN SCHEME** Register on visiting the ECHS card Reception Cell mentioning your **Aadhar Card No & PPO No which is mandatory.**
14. Our Help Line No -**1800114115 (Monday to Friday : 9 am to 5 pm).**
15. Our website **www.echs .gov. in**