

No.17(11)/2018/WE/D(Res-1)  
GOVERNMENT OF INDIA  
MINISTRY OF DEFENCE  
(DEPARTMENT OF EX-SERVICEMEN WELFARE)  
B WING, ROOM No.221  
SENA BHAVAN, NEW DELHI

Dated 12<sup>th</sup> April, 2019

The Chief of Army Staff  
The Chief of Naval Staff  
The Chief of Air Staff

**Subject :** One time contribution for ECHS membership and entitlement of Ward in empanelled Hospitals/ Medical facilities in respect of World War II veterans, ECOs, SSCOs and Pre-Mature Retires.

Sir,

In continuation of MoD letter No.17(11)/2018/WE/D(Res-1) dated 7.3.2019, I am directed to convey the sanction of the Government prescribing one time contribution for ECHS membership and entitlement of ward in empanelled hospitals / medical facilities in respect of World War-II Veterans, Short Service Commissioned Officers (SSCOs), Emergency Commissioned Officers (ECOs) and Pre-mature Retirees (PMR) and their spouses as under :-

Ser No.	Rank	One time contribution	Ward entitlement
(a)	Recruit to Havildars of Army & equivalent Ranks in Navy & Air Force	Rs. 30,000/-	General
(b)	Nb Sub/Sub/Sub Maj and equivalent Ranks in Navy & Air Force (including Hony Nb Sub/MACP Nb Sub and Hony Lt/Capt)	Rs. 67,000/-	Semi Private
(c)	All Officers	Rs. 1,20,000/-	Private

2. All other provisions of this Ministry's letter referred above, unaffected by this order, will remain unchanged.

3. This issues with the concurrence of Ministry of Defence (Finance) vide their U.O. No.31(02)/2019/Fin/Pen dated 12.04.2019.

Yours faithfully,

  
(A.K. Karn)

Under Secretary to the Govt. of India  
Tele Fax: 23014946

**Copy to :**

1. AG, IHQ of MoD(Army)
2. CGDA, New Delhi
3. MD, ECHS
4. MHA

**Copy for information to**

1. PS to RM
2. PS to RRM
3. PPS to Secretary, ESW
4. PS to JS(ESW)
5. PS to Addl. FA & JS (RK)

Appendix DINSTRUCTIONS FOR MILITARY RECEIVABLE ORDER (MRO)

Controller General of Defence Accounts (CGDA) has nominated the following Army Principal Controllers of Defence Accounts (PCsDA)/ Controllers of Defence Accounts (CsDA) for accounting the contribution made in their areas of jurisdiction.

Ser No	Regional Centre	Polyclinic under jurisdiction of Regional Centres	Name to be Entered in MRO Army PCDA CDA
1.	Jammu	Bakloh, Akhnoor, Baramulla, Baribrahmna, Doda, Jammu, Junglot(Kathua), Leh, Pathankot, Poonch, Rajouri, Samba, Shahpur, Srnagar, Talwara, Uchi Bassi, Udampur, Nagrota (Gujroo),Yol, Mandi, Chamba, Palampur, Kullu, Deragopipur,Kanabal	PCDA (NC) Jammu
2.	Delhi West	Delhi Cantt (BHDC), New Delhi (Lodhi Road), Gurgaon, Shakurbasti, Nuh, Gurgaon(Sohan Road), Khanpur	PCDA (WC) Chandigarh
3.	Delhi East	Noida, Timarpur, Faridabad, Ghaziabad(Hindon),Greater Noida, Palwal	PCDA (WC) Chandigarh
4.	Chandimandir	Chandigarh, Chandimandir, Ropar, Sarkaghat, Mohali, Ludhiana, Jagraon, Sangrur, Patiala, Fatehgarh Sahib, Samana, Nabha, Barnala, Nawansahar, Shimla, Rampur	PCDA (WC) Chandigarh
5.	Jaipur	Alwar, Behror, Hindaun City(Dist Karauli), Mahendragarh, Narnaul, Rewari, Dharuhera, Bharatpur, Bhuwana, Chirawa, Dausa, Jaipur, jhunjhunu, Nim Ka Thana, Sikar, Vidhyadhar Nagar(Sanganer), Kota	PCDA (SWC) Jaipur
6.	Pune	South Pune(Lohegaon), Sindhudurg, Panaji, Sholapur, Ahmednagar, Beel, Latur, Osmanabad, Saugor, Karad, Kolhpur, pune, Orai, Jhansi, Morena, Gwalior, Bhind, Miraj (Sangli), Khadki (Pune), Buldana, jalgaon, Dhule, Devlali, Bhopal, Amravati, Akola	PCDA (SC) Pune
7.	Lucknow	Akbarpur Matti (Kanpur Dehat), Unnao, Barabanki, Hardoi, Lakhimpur(UP), Lucknow, Raebareli, Etawah, Fatehgarh, Kanpur, Agra, Mainpuri, Etah, Barilly, Badaun, Sarsawa, Mathura, Meerut, Aligarh, Muzaffarnagar, Baghpat, Shahjanpur, Moradabad, Hathras, Bijnore, Bulandshshir, Firozabad, Rampur	PCDA (CC) Lucknow
8.	Patna	Ara, Danapur(Patna), Darbhanga, khagaria, Madhubani, Motihari, Munger, Muzaffarpur, Samastipur, Sitamarhi, Siwan, Chhapra, Vaishali, Bhagalpur, Gaya, Sasaram, Buxar	CDA Patna
9.	Jabalpur	Bilashpur, Raigarh, Indore, Mhow, Jabalpur, Satna, Raipur, Rewa, Jagdalpur,Pachmarhi	CDA Jabalpur

10.	Hyderabad	Guntur, Secunderbad, Chittor, Giddalur, Golconda, Ananthapur, Cudapah, Eluru, Golconda, Karimnagar, khammam, Kurnool, Mehbubnagar, Nellore, Secunderabad2(Bownpally), Vijaywada	CDA Secunderabad
11.	Chennai	Avadi, Chennai, Chennai(island Ground), Cuddalore, Kanchipuram, Thiruvannamalai, vellore, villupuram, Puducherry, Krishnagiri, Kumbhkonom, Nagapattinam, Thanjavur, Tambram	CDA Chennai
12.	Kochi	Alleppey, Kottayam, Kunnankulam, Thrissur, Iritti, Kalpetta, Kanhaged, Kannur, Perintalmanna, Kozhikode, Kochi, Moovattupuzha, Painavu, Palakkad	JCDA(Navy) Kochi
13.	Guwahati	Agartala, Aizwal, Along, Lunglei, Bongaigaon, Dhubri, Churachandpur, Imphal(Leimakhong), Dibrugarh, Tinsukia, Dimapur, Goalpara, Gawahati, Jorhat, Mokokchung, Lakhimpur, Lanka, Masimpur, Misamari, Shillong	CDA Guwahati
14.	Allahabad	Allahabad, Pratapgarh, Fatepur, Banda, Azmgarh, Faizabad, Gonda, Sultanpur, Ballia, Ghazipur, Jaunpr, Mirzapur, Varanasi, Basi, Deoria, Gorakhpur,	PCDA (CC) Lucknow
15.	Ambala	Ambala, Gohana, Kaithal, Karanal, Kharkhoda, Nrayangarh, Khurkshetra, Panipat, Sonapat, Yamunanagar, Nahan	PCDA (WC) Chandigarh
16.	Coimbatore	Coimbatore, Dindigul, Madurai, Srivilliputtur, Theni, Tiruchirapalli, Salem, Sivagangai, Wellington	JCDA (Air force) Nagpur
17.	Dehradun	Almora, Bageswar, Ranidhet, Banbasa, Dehradun, Dharchula, Vikasnagar, Uttarkasi, Haldwani, Rudrapur, Hempur, Joshimath, Karanprayag( Gopeshwar), Rudraprayag, Kotdwara, Landsdowne, Pauri Garhwal, pithoragarh, Raiwala, Tehri, Roorkee	PCDA (CC) Lucknow
18.	Hissar	Abohar, Bahadurgrah, Bhiwani, Charki Dadri, Didwana, Fatehabad, Hissar, Jhajjar, Jind, Kosli, Lohara, Meham, Narwana, Rohtak, Sampla, Bathinda, Mansa, Bikaner, Churu, Nagaur, Rajgarh, Siirsa, Sriganganagar, Suratgarh	PCDA (SWC) Jaipur
19.	Nagpur	Amla, Nagpur, Wardha, Amravati, Akola, Yavatmal	JCDA (Air force) Nagpur
20.	Visakhapatam	Angul, Balasore, Bhubneswar, Dhenkanal, Puri, Kakinada, Srikakulam, Vishakapatnam, Ramnathapuram, Port Blair	ACDA (Navy) Visakhapatnam
21.	Mumbai	Mumbai, Chiplun, Mahad, karwar, Mumbai(Upnagar), Thane (Nerul), Vasco-da-gama, COD Kandivali	PCDA (Navy) Mumbai

22.	Kolkata	Barrackpore, Salt lake, Midnapur, Kolkata, Baruipur, Howrah, Benguri, Bankura, Cooch Behar, Gangtok, Kalimpong, Katihar, Krishnanagr, Katihar, Krishnanagar, Behrampur, lebong(Darjeeling)	CDA Guwahati
23.	Ahmedabad	Ahmedabad, Ajmer, Barmer(Jalipa), Bhuj, Jaisalmer, Jamnagar, Jodhpur, Shergarh, Pali, Rajsamand, Dungarpur, Vadodra, Surat, Udaipur	PCDA (Air force) Dehradun
24.	Bangalore	Bangalore, Hassan, Belgaum, Bijapur, Dharwad, Gulbarga, Bidar, Tumkur, Yeahanka(Bangalore), Kolar, Madekeri, Manglore, Shimoga, Virarajendrapet, meg Banglore, Mysore	CDA Bangalore
25.	Bareilly	Agra, Etah, Firozabad, Bagpat, Bijnor, Muzaffarnagar, Mainpuri, Meeurt,Hathras, Aligarh, Mathura, Moradabad, Rampur, Badaun, Barilly, Bulandshahar, Saharanpur(Sarsawa), Shahjanpur	PCDA Meerut
26.	Jalandhar	Ajnala, Amritsar, Batala, Gudaspur, Beas, Bilaspur, Faridkot, Moga, Muktsar, Ferozpur, Garhshankarn (Mahalpur), Hamirpur, Una, Suranassi, Hoshiarpur, Ghumarvin, Barsar, Jalandhar,Kapurthala, Nawansahar, Phagwara, Sultanpuri Lodhi, Jogindernagar	PCDA (WC) Chandigarh
27.	Ranchi	Behrampur, Bhawanipatna, Koraput, Sambalpur, Chaibasa, Dalatganj, Gumla, Ranchi, Dhanbad, Deogarh, Jamshedpur	CDA Patna
28.	Trivandrum	Changanacherry, Kilimanur, Kottarakara, Mavelikara, Nagarcoil, Pathanamthitta, Ranni, Trivandrum, Trivandrum (Med College), Tuticorin, Quilon (Kollam), Tirunelveli	PCDA Chennai

**MILITARY RECEIVABLE ORDER**

Bank's Counterfoil (To be forwarded to the CDA)  
(To be filled in by MRO issuing authority)

Received a sum of Rs 

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Total (Rs in words)

---- Crores	----- lakhs	--- thousands	--- hundreds	----- Tens	----- units
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From ..... (name of the individual/unit/office)

By Cash/Cheque No ..... Date ..... Bank ..... for credit to PCDA/CDA .....  
..... on account of ..... as Defence receipts

BSR Code	D D M M Y Y	Serial No
Bank Seal		

(Signature of the Issuing Officer)  
Unit/Officer

**MRO – 0076/107/405/01**

Depositor's Counterfoil-1 (To be retained by the Depositor)  
(To be filled up by Treasury/RBI/Bank)

Treasury/RBI/Bank .....

Dated .....

Received a sum of Rs ..... (Rupees ..... Only) from .....  
(individual/Unit/Officer) on account of ..... for credit to PCDA/CDA ..... as Defence Receipt

BSR Code	D D M M Y Y	Serial No
Bank Seal		

Depositor's Counterfoil-2 (To be forwarded to PCDA/CDA)  
(To be filled up by Treasury/RBI/Bank)

Dated .....

Treasury/RBI/Bank .....

Received a sum of Rs ..... (Rupees ..... Only) from .....  
(individual/Unit/Officer) on account of ..... for credit to PCDA/CDA ..... as Defence Receipt

BSR Code	D D M M Y Y	Serial No
Bank Seal		

Depositor's Counterfoil-3 (To be retained by Stn HQ/Regional Centre)  
(To be filled up by Treasury/RBI/Bank)

Dated .....

Treasury/RBI/Bank .....

Received a sum of Rs ..... (Rupees ..... Only) from .....  
(individual/Unit/Officer) on account of ..... for credit to PCDA/CDA ..... as Defence Receipt

BSR Code	D D M M Y Y	Serial No
Bank Seal		





**PART-II PARTICULARS OF SPOUSE**

Name of SPOUSE  (Maximum 20 Characters including space)

Gender (✓) Male  Female  Citizenship (✓) Indian  NDG

Date of Birth  (DD-MM-YYYY)

Date of Marriage  (DD-MM-YYYY)

Physical Disability Yes  No  (Ailment) %age

Nature of Disability

Employed Yes  No

Monthly Income \_\_\_\_\_ Aadhar Card No \_\_\_\_\_ PAN No : \_\_\_\_\_

Name Mentioned in Service/ Discharge Book (✓) Yes  No  Blood Group

Drug Allergy (if any)

Contact details (a) Tele No (With STD code)  Mob

(b) E Mail ID :-

Affix Recent Colour Passport size Photo of SPOUSE of Pensioner

Optional

Self Attested photocopy of following documents have been attached:-

Veteran	Spouse
Discharge Certificate / Service Particular Booklet / Any other document to establish served in Armed Forces	Proof of marriage (Pt II order / marriage certificate from Govt Agency / any other valid proof)
PAN Card (if available)	PAN Card (if available)
Aadhaar Card	Aadhaar Card
Receipt of MRO on one time contribution (original)	Death certificate of Veteran in case of demise
Self Declaration from veteran or spouse (in case of demise of veteran)	

I, No. \_\_\_\_\_, Rank \_\_\_\_\_, Name \_\_\_\_\_

solemnly declare that the information furnished above is correct to the best of my knowledge and belief and if found incorrect, I will be liable to legal action and termination of membership.

Date:

(Specimen signature/Left thumb Impression of Applicant)



**PART-III DETAILS OF MRO PAYMENT**

1. Bank  RBI  SBI  Branch

2. MRO No  Date of Payment

3. Amount (Rupees)

**PART-IV TO BE FILLED BY STATION HEADQUARTERS/ RECORD OFFICE**

1. Category of Ward  Private  Semi-Private  General

2. Date of Receipt of Application from

3. Date of validation of Application

4. Documents Checked ( ✓ ) mark against each document

Veteran		Spouse	
Discharge Certificate / Service Particular Booklet / Any other document to establish served in Armed Forces	<input type="checkbox"/>	Proof of marriage (Pt II order / marriage certificate from Govt Agency / any other valid proof)	<input type="checkbox"/>
PAN Card (if available)	<input type="checkbox"/>	PAN Card (if available)	<input type="checkbox"/>
Aadhaar Card	<input type="checkbox"/>	Aadhaar Card	<input type="checkbox"/>
Receipt of MRO on one time contribution (original)	<input type="checkbox"/>	Death certificate of Veteran in case of demise	<input type="checkbox"/>
Self Declaration from veteran or spouse (in case of demise of veteran)	<input type="checkbox"/>		<input type="checkbox"/>

5. Receipt issued on ( )

6. (a) Checked by  (b) Approved by

Registration No \_\_\_\_\_

**RECEIPT FOR DOCUMENTS CUM TEMPORARY RECEIPT  
EX SERVICEMEN CONTRIBUTORY HEALTH SCHEME (ECHS)  
FOR WW-II/EC/SSO/PMR NON PENSIONER VETERANS**

1. Received documents from No \_\_\_\_\_ Rank \_\_\_\_\_ Name \_\_\_\_\_  
towards application for membership of Ex-Servicemen Contributory Health Scheme (ECHS) :-
2. Category of Ward ( ✓ ) Private  Semi Private  General
3. Force Type: \_\_\_\_\_ 4. Regiment/Unit: \_\_\_\_\_
5. Address with State and Pin Code: \_\_\_\_\_
6. Mobile No: \_\_\_\_\_ 7. Date of Birth: \_\_\_\_\_ 8. Date of Retirement: \_\_\_\_\_
9. Parent Polyclinic of Pensioner \_\_\_\_\_, MRO No. \_\_\_\_\_
10. VALID UPTO \_\_\_\_\_

Place: \_\_\_\_\_  
Date: \_\_\_\_\_

Office  
Seal

Signature \_\_\_\_\_  
(Stamp with Rank, Name & Appointment, Officer issuing-  
Temporary Receipt in lieu of Smart Card)

**All photographs to be stamped by issuing Officer.**

PENSIONER	SPOUSE
Name: _____ Date of Birth: _____ Aadhar _____	Name: _____ Date of birth: _____ Aadhar _____

13. ACTIVATION BY  
Place: \_\_\_\_\_  
Date: \_\_\_\_\_

Office  
Seal

Signature \_\_\_\_\_  
(Stamp with Rank, Name & Appointment, OIC Parent Polyclinic)

**Notes:-**

1. All holders of this temporary slip are required to apply online for 64 Kb ECHS Smart Card.
2. This original receipt is required to be returned at the time of collection of Smart Card (s). Receipt will not be destroyed. This will be uploaded at the time of applying online Smart Card.
3. **No Smart Card will be issued if this receipt in original is not produced.**
4. **Deposition of contribution (MRO) as applicable to be ensured prior to issue of this receipt for all Veterans by Stn HQ.**
5. **This receipt will be issued only on verification of discharge book and after verification of eligibility criteria.**
6. **The Original Receipt is valid up to a maximum of SIX MONTHS from the date of issue.**
7. **Slip will be considered activated only after signatures of OIC Parent Polyclinic.**
8. Aadhar verification to be ensured by Polyclinics.

Date: \_\_\_\_\_

Signature of Veteran / Spouse

21  
5

**SAMPLE OF SELF DECLARATION**

I Service No \_\_\_\_\_ Rank \_\_\_\_\_ Name \_\_\_\_\_ (Unit) \_\_\_\_\_,  
solemnly affirm and declare as follows:-

Or

I, \_\_\_\_\_ wife/Father/Mother/Daughter/Son Service No \_\_\_\_\_ Rank \_\_\_\_\_  
Name \_\_\_\_\_ of (unit) \_\_\_\_\_ solemnly affirm and  
declare as follows:-

1. That I am a World War –II veteran / Emergency Commissioned Officer / Short Service Commissioned Officer / Pre-mature Retiree and I am not in receipt of pension.
2. That I have the following legal spouse whose photograph is affixed below on this self declaration certificate:-

Name	Age	Date of Birth	Part II Order No/CRD/SD/POR No	Photograph
<b>Identification Mark:</b>				

**(Photographs(s) to be pasted and signed across by the Applicant)**

3. (a) That I am NOT a member of any other medical scheme funded by Central Govt, PSU or any other Govt undertaking.  
(b) That my spouse is NOT a member CGHS or any other Govt Scheme.
4. I understand that in case I have submitted any incorrect information, or if any ECHS Membership Card is misused or used by any unauthorised person, my membership will be cancelled without any notice or further hearing. In addition, I will forfeit my contribution and I will pay the entire cost of expenditure incurred on such unauthorised person(s). I will also be liable for legal action by the ECHS Organisation. I will also immediately report the loss of my ECHS membership card to the nearest Station Headquarters.
5. That in case of any misuse of Smart Cards(s) or tampering with bills or attempt to defraud, once I become a member, I will forfeit my membership automatically.
6. I undertake that in case of any misbehavior, on my part with Polyclinic Staff, my membership may be suspended/cancelled/ terminated.
7. I understand that the contribution I am making is a one time token amount and is not refundable even if I do not make use of any ECHS facility or opt out of ECHS Scheme.

**ATTESTATION**

Certified that the above statement is declared before me at (Place)-----on this -----day of (Month)-----  
Year-----by DEPONENT Service No -----Rank-----Name-----Who is identified by  
Name-----S/O (Father's name of Identifier)----- and witnessed by  
Name-----S/O (Father's name of first witness)& Name----- S/O  
(Father's name of second witness).

**WITNESS**

Signature of Witness No.1  
1. (Name in Block Capitals)  
(Full Postal Address)

Signature of Witness No.2  
1. (Name in Block Capitals)  
(Full Postal Address)