

**APPLICATION FORM FOR ISSUE OF MEDICINES FROM  
MARS REMEDIES  
(Kalpakkam / Anupuram / Pallavaram)**

1. Name of the employee / retiree      Designation      IC No.      Section      Unit

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Phone No.      (Residential Address)

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2. Name of the Patient      Relationship      Age      CHSS Card No.

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in case of retired employee /  
deceased employees' family, please  
furnish the validity period of the  
medical card

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3. Name of the Doctor

Consulted in DAE. Hospital / Clinic      Treatment taken for      Date of consultation

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- Note: 1. A 'Not-Available' seal must be obtained on the prescription slip from the DAE Hospital Pharmacy.
2. The patient's name and CHSS Card Number, as indicated on the card, must be written clearly on the prescription.
3. Food items, toiletries, cosmetics, and disinfectants are not admissible, even if prescribed.
4. Only beneficiaries covered under CHSS are eligible to obtain medicines on a credit basis.
5. Medicines must be purchased within 10 days from the date of issue of the prescription.
6. The patient's CHSS Card must be produced for verification.
7. If any item(s) supplied on a credit basis against the submitted prescription are later found to be inadmissible as per rules, the corresponding charges will be recovered from the employee and must be repaid by the individual.

Details of bill(s) for the medicines issued on credit basis.

Bill No.      Date      Amount

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CHSS card Checked &  
Medicines delivered

For MARS REMEDIES  
In charge

Total cost of Medicine(s): Rs.  
Received Medicines  
Signature

Name

Date