

Notarised Affidavit for BIPAP,/CPAP/Oxygen Concentrate

I, Sh./Smt./Kum. \_\_\_\_\_ S/O/W/ \_\_\_\_\_  
\_\_\_\_\_ serving/Pensioner CGHS beneficiary CGHS Card no.  
\_\_\_\_\_ R/o. \_\_\_\_\_  
\_\_\_\_\_ attached with  
CGHS dispensary \_\_\_\_\_ do solemnly affirm and declare that :

The CPAP/BIPAP/Oxygen Concentrator machine has been advised by  
\_\_\_\_\_ hospital \_\_\_\_\_ in r/o.  
\_\_\_\_\_

I undertake to return CPP/BIPAP/Oxygen Concentrator machine in good working condition to MSD, CHGS Gole Market, New Delhi through concerned CGHS dispensary after its utility is over.

The responsibility for maintenance and upkeep of the machine will lie with me. I shall not claim expenditure incurred, if any, on unkeep and maintenance of the machine.

I will submit the claim at CGHS ceiling/approved rates and the remaining amount, if any, will be borne by me.

I have enclosed a complete sleep lab report/ ABC report and Performa duly filled by treating specialist.

I shall not use the aforesaid machine for any other purpose except treatment of