



NORTH CENTRAL RAILWAY

Confidential

Office of the
General Manager(Vig)
Subedarganj ,Prayagraj

SIV-14/2023

No. 2023/04/01563/PC/V3/N/JHS

Date:11.05.2023

**Principal Chief Commercial Manager
North Central Railway
Prayagraj.**

Sub: Preventive Check conducted on the identity and medical cards of the catering vendors at Gwalior station.

In connection with the above mentioned subject, a preventive check was conducted by NCR vigilance on the aspect of identity and medical cards carried by the catering vendors at Gwalior station on 04.04.2023. During the random check conducted on the identity and medical card of catering vendors, it was found that the identity cards of the catering vendors do not bear any reference of their respective medical cards and contract details. Hence, in view of the above to bring about uniformity in the issue of identity cards to catering vendors following system improvement is suggested-

"The identity card shall be issued by the concerned Station Superintendents. The identity card should invariably bear the details of the valid medical card. The validity of the identity card should be co-terminus with that of the medical card. The details of the contract shall also be mentioned on the identity cards. The record of issue of identity card shall be maintained by the Station Superintendent. While working at the station, it shall be mandatory that the concerned vendor should invariably carry the valid identity and medical card. In absence of anyone of them i.e. the medical card or the identity card, the vendor shall not be allowed to work on the stall. The catering inspectors posted at the station should invariably check this aspect and in case of any failure they will be held responsible for such lapse." (Proforma of an identity card is attached.)

This has the approval of SDGM.

**(Dr. Jitendra Kumar)
Dy. CVO/Traffic
For GM(Vigilance)**

DA: As above



NORTH CENTRAL RAILWAY
NAME OF STATION (DIVISION)

IDENTITY CARD No.

Date of Issue

Name of Contract :

Validity of Contract :

Name of Licensee:

Stall No. :

Medical Card No. :

Validity :

Name of Vendor :

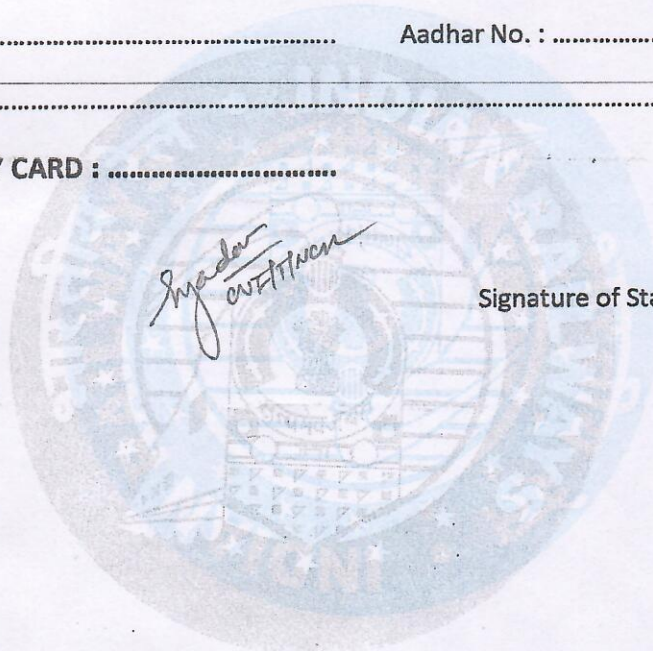
S/o :

Date of Birth :

Aadhar No. :

Address:

Validity of IDENTITY CARD :



Signature of Station Superintendent