

From Ng Teng Fong General Hospital
 Jurong Community Hospital
 Jurong Medical Centre

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Members of the NUHS

Authorisation for Collection of Medical Report (Form B)

Note:

This form / letter is required if a representative is collecting the completed medical report on behalf of the applicant of "Application & Consent for Release of Medical Information" (i.e. "Form A")

LETTER OF AUTHORISATION

I, (applicant's name) _____ (applicant's NRIC) _____

hereby appoint (representative's name) _____ (representative's NRIC)

_____ as my representative, and authorise him / her to collect the medical report when it is ready.

I am aware that he / she is required to produce the following documents upon collection:

- This signed letter of authorisation letter
- a copy of his / her NRIC (front and back views)
- a copy of my NRIC (front and back views)

Applicant's Signature & Date: _____