



Department of Empowerment of Persons with Disabilities,
Ministry of Social Justice and Empowerment, Government of India

Disability Certificate

Chief Medical Officer, Gonda, Uttar Pradesh



Certificate No.: UP5230620070174399

Date: 03/11/2023

This is to certify that I/We have carefully examined Shri **Abhinav Srivastava** Son of Shri **Vijay Kumar**, Date of Birth **01/07/2007**, Male, Registration No. **0952/00000/2306/0065922**, resident of **Chandpur Daulatpur Durjanpur Pachumi Gonda - 271303**, Sub District **Tarabganj**, District **Gonda**, State / UT **Uttar Pradesh**

Whose photograph is affixed above, and I/We satisfied that:

(A) He is a case of **Locomotor Disability**

(B) The diagnosis in his case is **KYPHOSCOLIOSIS, 9-10-2023**

(C) He has **60%** (in figure) **Sixty** percent(in words) Permanent Disability in relation to his NIL as per the guidelines (Guidelines for the purpose of assessing the extent of specified disability in a person included under RPWD Act, 2016 notified by Government of India vide S.O. 76(E) dated 04/01/2018).

The applicant has submitted the following document(s) as proof of residence:

Nature of Document(s): Aadhaar card

Abhinav Srivastava

Signature / Thumb Impression of the Person with Disability

Signature of notified Medical Authority Member

Chief Medical Officer
Gonda, Uttar Pradesh

