



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

Disability Certificate

Chief Medical Officer
Office of the Chief Medical Officer Turab Ali Ka Purwa
Fatehpur, Uttar Pradesh, 212601



Certificate/UDID No. UP1440520020007233

Date of Issue: 05/08/2025

This is to certify that I/We have carefully examined **Azad Pratap Singh** Son of **Suresh Singh**, Date of Birth **04/01/2002**, Gender **Male**, Registration No. **0914/20000/0250/20024329**, Resident of **Vill Mohnapur Post Jahangir Nagar, Khaga, Fatehpur, Khaga, Fatehpur, Uttar Pradesh - 212656** whose photograph is affixed above, and I am/we are satisfied that:

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

(B) Name of affected body part: **Both Leg (BL).**

(C) The diagnosis in his case is **Traumatic Radiculopathy in Both Lower Limb.**

(D) **He** has **45%** (in figure) **forty five** percent(in words) disability and the nature of certificate is **Permanent** as per the guidelines for the purpose of assessing the extent of specified disability in a person included under the Rights of Persons with Disabilities Act, 2016 notified by Government of India vide **S.O.1338(E)** dated **12/03/2024.**

Signature / Thumb impression of the Person with Disability:

Dr. Vishvesh Tripathi

(Dr. Nitin Kumar Singh)

(RINKI LAKRA)

Chief Medical Officer
Office of the Chief Medical Officer Turab Ali Ka Purwa
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Signature of notified Medical Authority Members:



This Card/Certificate is meant to certify the disability of the person and is not an instrument for ID/Address Proof for any purpose.