



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

Disability Certificate

Chhatrapati Shivaji Maharaj Hospital
Belapur Road, Kalawa
Thane, Maharashtra, 400605



Certificate/UDID No. MH4990519970017551

Date of Issue: 16/04/2025

This is to certify that I/We have carefully examined **Pratap Limbaji Dambre** Son of **Limbaji Dambre**, Date of Birth **03/05/1997**, Gender **Male**, Registration No. **2748/30000/0240/70011238**, Resident of **Room No 110, Kiyara Heights Bldg. No 04, Near Star English School, Sabe Gaon Diva East, Thane, Thane, Maharashtra - 400612** 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: **RIGHT LOWER LIMB.**

(C) The diagnosis in his case is **RIGHT TRANSFEMORAL AMPUTATION.**

(D) **He** has **85%** (in figure) **eighty 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:

Signature of notified Medical Authority Members:

Chhatrapati Shivaji Maharaj Hospital
Belapur Road, Kalawa
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This Card/Certificate is meant to certify the disability of the person and is not an instrument for ID/Address Proof for any purpose.