



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

Disability Certificate

Civil Surgeon, Sheohar
Sheohar, Bihar



Certificate No.: BR0310620000002532

Date: 25/05/2019

This is to certify that I/we have carefully examined Shri **Raja Kumar**, Son of Shri **Krishnandan Singh**, Date of Birth **20/04/2000**, Age **23**, M, Registration No. **1003/00000/2002/2376512**, resident of House No. **Sarwarpur Ward No-01, Sarwarpur, Tariyani - 843128**, Sub District **Tariyani Chowk**, District **Sheohar**, State / UT **Bihar**, whose photograph is affixed above, and I am/we are satisfied that:

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

(B) The diagnosis in his case is **NULL**

(C) He has **55%**(in figure) **Fifty Five** percent(in words) Permanent Disability in relation to his Right Leg, Right Arm 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

Signature / Thumb Impression of the Person with Disability

Signatory of notified Medical Authority Member(s)



Civil Surgeon, Sheohar
Sheohar, Bihar