



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

Disability Certificate

Chief Medical Officer , Bulandshahr, Bulandshahr, Uttar Pradesh



Certificate No.: UP1110720020246058

Date: 12/09/2023

This is to certify that I/We have carefully examined Shri **Govind Ram Sharma** Son of Shri **Neel Mani Sharma**, Date of Birth **10/01/2002**, Male, Registration No. **0911/00000/2307/0799130**, resident of **Mohalla Bramhanpuri Narora Dibai Bulandshahr - 202389**, Sub District **Debai**, District **Bulandshahr**, State / UT **Uttar Pradesh**

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

(A) He is a case of **Low Vision**

(B) The diagnosis in his case is **Right eye optic neuritis & left eye optic atrophy**

(C) He has **40%** (in figure) **Forty** percent(in words) Permanent Disability in relation to his Both eyes 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

Signature of notified Medical Authority Member

Chief Medical Officer , Bulandshahr
Bulandshahr, Uttar Pradesh

