



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

Disability Certificate

Chief Medical Officer, Jhansi, Jhansi, Uttar Pradesh



Certificate No.: UP3520219930016383

Date: 18/01/2020

This is to certify that I/We have carefully examined Shri **Akash Jha** Son of Shri **Ramodar Jha**, Date of Birth **16/07/1993**, Male, Registration No. **0935/00000/1810/1002881**, resident of **805 Out Said Bada Gaon Gate Sattayam Collany Jhansi - 284002**, Sub District **Jhansi**, District **Jhansi**, State / UT **Uttar Pradesh**

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

(A) He is a case of **Blindness**

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

(C) He has **40%** (in figure) **Forty** percent(in words) Permanent Disability in relation to his Left Eye, Right Eye 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, Jhansi
Jhansi, Uttar Pradesh



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