



Government of Rajasthan

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

Disability Certificate

Issuing Medical Authority, Jhunjhunu, Rajasthan



Certificate No.: RJ0510619970024912

Date: 19/12/2017

This is to certify that I/We have carefully examined Shri **Naresh Kumar Kudal** Son of Shri **Choth Mal** Date of Birth **08/08/1997** Age **21 Year(s)** Male, Registration No. **0805/00000/1801/0279076** resident of House No. **Gudha Gorji Kudalo Ka Mohalla** - Sub District **Udaipurwati** District **Jhunjhunu** State / UTs **Rajasthan** Whose photograph is affixed above, and I/We satisfied that:

(A) He is a case of Locomotor Disability
(B) The diagnosis in his case is **YES**

(C) He has **40%**(in figure) **Forty** percent(in words) Permanent in relation to his (part of body) as per guidelines (to be specified).

The applicant have been submitted the following document(s) as proof of residence

Nature of Document(s): -

Signature / Thumb impression of the Person With Disability

Signatory of notified Medical Authority Member



Issuing Medical Authority, Jhunjhunu, Rajasthan

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