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

Disability Certificate

King George Hospital Visakhapatnam
Maharanipeta, Opposite District Collector Office
Visakhapatnam, Andhra Pradesh, 530002

Certificate/UDID No. AP5290519750002523 **Date of Issue: 02/03/2026**

This is to certify that I/We have carefully examined **Abdul Hameed** Son of **Abdul Ghouse**, Date of Birth **23/06/1975**, Gender **Male**, Registration No. **2852/00000/0260/10003632**, Resident of **S/o Abdul Ghouse, 24-49-50, Ambusarang Street, Near Old Post Office, Kota Veedhi**, **Maharanipeta**, **Visakhapatnam**, **Andhra Pradesh** - **530001** 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: **Locomotor OH.**
(C) The diagnosis in his case is **POST POLIO RESIDUAL PARALYSIS.**
(D) **He** has **78%** (in figure) **seventy eight** 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:

King George Hospital Visakhapatnam
Maharanipeta, Opposite District Collector Office
Visakhapatnam, Andhra Pradesh, 530002

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