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

Disability Certificate

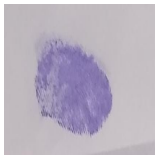
Guru Gobind Singh Govt. Hospital, West, Delhi

Certificate No.: DL0740619870020147 **Date: 29/06/2021**

This is to certify that I/We have carefully examined Shri **Kailash Tiwari** Son of Shri **Jamuna Dutt Tiwari**, Date of Birth **08/07/1987**, Male, Registration No. **0707/00000/2106/1360076**, resident of **C-28a 3rd Floor, Sudershan Park, Moti Nagar** - **110015**, Sub District **Patel Nagar**, District **West**, State / UT **Delhi**
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 **Flexor tendons and median nerve injury right forearm**
(C) He has **76%** (in figure) **Seventy Six** percent(in words) Permanent Disability in relation to his Right upper limb 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

Guru Gobind Singh Govt. Hospital
West, Delhi

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