



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

## Disability Certificate

Issuing Medical Authority, Pulwama, Jammu And Kashmir



Certificate No.: JK1210619980069463

Date: 20/02/2023

This is to certify that I/we have carefully examined Shri **Suhail Ahmad Malik**, Son of Shri **Mohd Shafi Malik**, Date of Birth **05/01/1998**, Age **25**, Male, Registration No. **0112/00000/2203/0060944**, resident of House No. **Chandgam - 192301**, Sub District **Pulwama**, District **Pulwama**, State / UT **Jammu And Kashmir**, whose photograph is affixed above, and I am/we are satisfied that:

- (A) He is a case of **Locomotor Disability**  
(B) The diagnosis in his case is **A case of firearm injury head with right side hemiparesis .**  
(C) He has **45%**(in figure) **Forty Five** percent(in words) Permanent Disability in relation to his Right Arm Right Leg 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

Signatory of notified Medical Authority Member(s)



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