



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

Disability Certificate

Issuing Medical Authority, Baramulla, Jammu And Kashmir



Certificate No.: JK0810619920002500

Date: 17/04/2012

This is to certify that I/We have carefully examined Shri **Tufail Ahmad Dar** Son of Shri **Khazir Mohd Dar** Date of Birth **02/05/1992** Age **25 Year(s)** Male, Registration No. **0108/00000/1804/0050032** resident of House No. **Duroo, Dangarpore, Sopore - 193201** Sub District **Sopore** District **Baramulla** State / UTs **Jammu And Kashmir** 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 **locomotor**

(C) He has **70%**(in figure) **Seventy** 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): Aadhaar card

Signature / Thumb impression of the Person With Disability

Signatory of notified Medical Authority Member



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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.