



भारत सरकार



आधार

भारतीय विशिष्ट ओळख प्राधिकरण

भारत सरकार

Unique Identification Authority of India
Government of India

नोंदणी क्रमांक/Enrolment No.: 2006/00450/04187

To: Onkar Devendra Vaidya
(ओंकार देवेंद्र वैद्य)
S/O Devendra Vaidya
PLOT NO. -39,NYAYALAYEEN HO.SOCIETY,N-8,CIDCO
Aurangabad
Aurangabad
Maharashtra - 431001

Date: 23/08/2011

Ref. No : 00006278-00066879-00068053-



UB 03913799 9 IN

आपला आधार क्रमांक / Your Aadhaar No. :

2183 6204 9699

आधार – सामान्य माणसाचा अधिकार



भारत सरकार

GOVERNMENT OF INDIA



ओंकार देवेंद्र वैद्य
Onkar Devendra Vaidya
जन्म वर्ष / Year of Birth : 1990
पुरुष / Male

2183 6204 9699



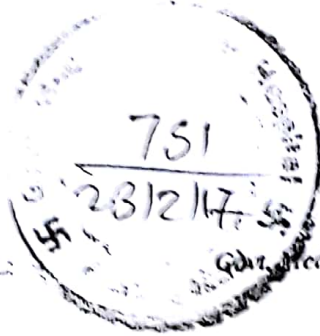
आधार – सामान्य माणसाचा अधिकार

O.D.V.

Government of Maharashtra
Form IV

Disability Certificate

(In cases other than those mentioned in Forms II and III) (See rule 4)



NAME OF THE HOSPITAL:

Govt. Medical College Hospital, Aurangabad
(Maharashtra, India)

Certificate Number: 381063

Date: 23/02/2017

This is to certify that I have carefully examined.

Person Identification Number: P151500526343

Aadhar Number: N/A

Shri/Smt./Kum: **VAIDYA ONKAR DEVENDRA ANJALI**

Father Name: Shri/Smt./Kum. **DEVENDRA**

Date of Birth (dd/mm/yyyy):

Age: 27 years

Gender: **Male**

Permanent Address:

House Address: **C/100 N-8**

Village: **Aurangabad**

District: **Aurangabad**

Taluka: **Aurangabad**

Pincode: **N/A**

whose photograph is affixed above, and am satisfied that he / she is a case of **Physical Impairment** disability. His / Her extent of percentage physical impairment / disability has been evaluated as per guidelines and is shown against the relevant disability in the table below :-

Disability	Affected part of Body	Diagnosis	Disability (in %)
Physical Impairment	Bil. U/L, Bil. L/L	Spastic Quadreparesis	79

1. The Above condition is **Permanent, non-progressive, not likely to improve**

2. Reassessment of disability

3. The applicant has submitted following documents as proof of residence: **Aadhar Card**

4. The applicant has submitted following documents as proof of Identity: **Aadhar Card**

(Signature and Seal of Authorised Signatory of notified Medical Authority)

Dr Kiran Uttamrao Nandedkar

Assistant Professor Medicine

Dept. of Medicine

Govt. Medical College & Hospital

Regn. No. : MMC-2009/05/2227

Dr Panpate Nikhil Pradeeprao

R.M.O.

Member Secretary

Regn. No. : MMC-2015/05/2427

Dr Sudhir Prabhakarrao Choudhari

Medical Superintendent / President

President

Regn. No. : MMC-62710

Signature/Thumb impression of the person whose favour disability certificate is issued **Medical Superintendent**
Govt. Medical College Hospital, Aurangabad.

Note: This is not valid for Medico Legal cases.

OD.V.

Date : 18/7/2006



PERMANENT HANDICAPPED CERTIFICATE

CERTIFICATE NOT TO BE USED For COURT/COMPENSATION CASES

This is to certify that Shri. / Smt.
Age 20 Years, H/O Chinchali Tal Mehkar, Dist Buldana
examined at this hospital under OPD No. 28530 Date- 18/7/2006
by Medical Board for handicapped. In our opinion, above person is
having following disability.

PPRP At U

He / She is physically handicapped. His / Her percentage of
permanent disability is 45 % (In words forty five percent)

- १) विशेष शक्यते जाण्यास पात्र
- २) विशेष शक्यते जाण्यास अपात्र

[Thumb Impression]

ABhate
Member
M. O.
G. H. Buldana
Medical Officer,
(General Hospital)
Buldana

Agarkar
Member
R. M. O.
G. H. Buldana
M. O. (C)
Gen. H. Buldana

Jul
President
CIVIL SURGEON
G. H. Buldana
Civil Surgeon, Buldana

Bhate



भारत सरकार
Government of India



अशोक सजाबराव वाठोरे
Ashok Sanjabrao Wathore
जन्म वर्ष / Year of Birth 1985
पुरुष / Male



2963 0528 8694

आधार - सामान्य माणसाचा अधिकार



भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India

पत्ता चिचोळी बोर, चिचोळी बोर, Address Chincholi Bore, Chincholi Bore,
बुलढाणा, मेहकर, महाराष्ट्र 443301 Buldhana Mehkar, Maharashtra, 443301

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www.uidai.gov.in

Wathore