

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, Latur
(Maharashtra, India)

Certificate Number: 407598

Date: 17/05/2017

This is to certify that I have carefully examined.

Person Identification Number: PI52400558010

Aadhar Number: N/A

Shri/Smt./Kum: KSIRSAGAR GOVIND KHANDU SUNITA

Father Name: Shri/Smt./Kum. KHANDU

Date of Birth (dd/mm/yyyy): 05/06/1994

Gender: Male

Permanent Address:

House Address: Near Granpanchayat

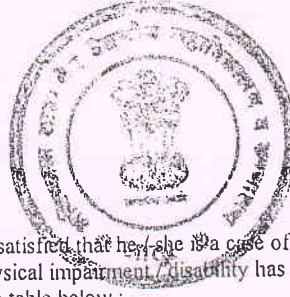
Village: Kanadi

District: Latur

Age: 22 years

Taluka: Latur

Pincode: 413511



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 %)
<i>Physical Impairment</i>	<i>Rt. U/L, Rt. L/L</i>	<i>rt sided hemiparesis</i>	<i>48</i>

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, Ration 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. Manisha Bolke

Assistant Professor Medicine

Member

Regn. No. : 2010/08/2734

Dr. Mahadev Bansude

Dy. Medical Superintendent /
Member Secretary

Member Secretary

Regn. No. : 2003/03/0969

Dr. S.D. Chauhan

Medical Superintendent

President

Regn. No. : 087557

Signature/Thumb impression of the person whose favour disability certificate is issued

Note: This is not valid for Medico Legal cases.