

DISABILITY CERTIFICATE

No. :- CMOB-Board.....35

Dated: 09-04-2013

1. Name Rifq. Ahmed. Chopan.....
2. S/o, W/o, D/o A.B. Rahman. Chopan.....
3. Sex & Age Male. 20 years.....
4. Address Temgram, (Gumana).....
5. Mark of Identification Photo - Affixed.....
6. Type of disability : Visual Disability/Hearing Impairment/
Locomotor Disability/Mental Retardation/Any
Other (Specified in the Act.)
7. Diagnosis Chronic osteomyelitis @ femur with
sinus @ knee (low 0-5°).
8. Degree of Disability (%age) Forty Five percent
Detailed in the Act/guide lines) (45%)
9. Validity Permanent.....



Member of the Board
Dr. *[Signature]*
Member of the Board
Doctor *[Signature]*

[Signature]
Member of the Board
Dr. *[Signature]*

[Signature]
Chairman of the Board
Chief Convener
Officer

Act menas J&K persons with disabilities (equal opportunities, protection of Right and full Participaion), Act, 1998.

Medical Board will give permahnent disability certificate in case of such permanent disabilities where there are no chance of various in the degree of disability, wherever there is any chance of variation in the degree of disability, the Medical Board will indicate period of validity in the certificate.

N.B. One of the Medical Officer should be specialist in the concerned disability.

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Government of Jammu and Kashmir
Office of District Medical Board/Chief Medical Officer Kupwara



Form-I-A
Disability Certificate

Certificate No: CMO/Kup/DMB/2015-16/ 994

Dated :- 23/09/2015



This is certified that we have carefully examined Mr./Miss/Mrs ABAS KHALIQ MIR Sp. AB. KHALIQ MIR who has applied for disability certificate vide application dated 03/09/2015 and whose photograph is affixed above, and are satisfied that:

1. He/ She is a case of Visual Disability. His /her extent of permanent Physical Impairment / Disability has been evaluated and is indicated hereunder:

S.No	Disability	Affected part of body	Diagnosis	Permanent/Temporary Disability in %age
1.	Blindness		<u>R.p both sides</u>	<u>85% Eighty five percent only</u>
2.	Low vision			
3.	Leprosy cured			
4.	Hearing impairment			
5.	Locomotive			
6.	Mental retardation			
7.	any other (Specified in Act)			

2. The above condition is progressive / non progressive / likely to improve / not likely to improve.
3. The certificate shall be valid for Life long /Life Time / _____ Years
4. Reasons for rejection of application for disability certificate. _____
5. Signature and seal of the Medical Authority .

 Consultant (Surgery) Seal & Signature Member District Medical Board Kupwara	 Consultant (Ortho) Seal & Signature Member District Medical Board Kupwara	 Consultant (Ortho) Seal & Signature Member District Medical Board Kupwara
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Signature Attested
 Chairman
 District Medical Board Kupwara

6. Signature / Thumb Impression of the person in whose favour disability certificate is issued

Government of Jammu and Kashmir
Office of District Medical Board/Chief Medical Officer



Form-1-A
Disability Certificate

Certificate No: CMO/Kup/DMBK/2017-18/ 519
Dated :- 18/15/2017



This is certified that we have carefully examined Mr./Ms/Mrs Rameez
Member D. M. B. Kupwara and

Who has applied for disability certificate vide application dated ___/___/___ and
whose photograph is affixed above, and are satisfied that : Disability. His / her

1. He/ She is a case of ___ extent of permanent Physical Impairment / Disability has been evaluated and is indicated hereunder

S.No	Disability	Diagnosis	Permanent Temporary Disability in %age
1.	Blindness	(R) Chnoretinal deg.	= 42%
2.	Low vision	(L) Pseudophakia c R.D	= Forty =
3.	Leprosy cured		= two =
4.	Hearing impairment		= percent =
5.	Locomotive		= only =
6.	Mental retardation		
7.	any other (Specified in Act)		

2. The above condition is progressive / non progressive / likely to improve / not likely to improve.
3. The certificate shall be valid for life long / Life Time / ___ Years

4. Reasons for rejection of application for disability certificate.
5. Signature and seal of the Medical Authority.

Seal & Signature
Member
District Medical Board Kupwara

Seal & Signature
Member
District Medical Board Kupwara

Seal & Signature
Member
District Medical Board Kupwara

Signature Attested
Chairman
District Medical Board Kupwara

OFFICE OF THE CHIEF MEDICAL OFFICER BUDGAN

Form No:

DISABILITY CERTIFICATE

No. - 956

Dated - 20/10/18



1. Name: SYED-KAYSER-AIT-SHAH
 2. Father's/Husband Name: SYED-AIT-SHAH
 3. Sex: MALE
 4. Address: ISKANDER PORA

5. Mark of Identification: MOLE ON (R) - ARM
 6. Type of disability: - Visual Disability/Hearing Impairment /Locomotors Disability / Mental Retardation/Any Other(Specified in the ACT)
 7. Diagnosis:-

B. Degree of Disability (%age)

50%
Fifty percent

- PPRP (R. Leg),
 - Corus valvulus (R. eye)
 - Snostomy (R. LL)
 - Combs. Scoliosis

Details in the Act/Guide Lines)

Validity: Permanent

Specialist - Surgeon
 Medical Board
 Budgam

Specialist - II
 20/10/18

Chairman
 Medical Board

1. Act means J&K person with disabilities (equal opportunities, protection of right and full part JACT1988)
2. Medical Board will give permanent disability certificate in case of such permanent disability there will indicate Period of validity in the certificate.
3. N.B one of the Medical Officer should be specialist in the concern disability.

Kashmir

907051

OFFICE OF THE CHIEF MEDICAL OFFICER BUDGAM

DISABILITY CERTIFICATE

NO:- 570

Dated:- 23/09/2017



1. Name: IMTIYAZ AHMAD DAB
 2. Father's/Husband Name: MOHAMMAD ASHRAF DAB
 3. Sex & Age: MALE - 17-02-1997
 4. Address: CHATTABUGAM BUDGAM
 5. Mark of Identification: Mole on Neck

6. Type of Disability:- visual Disability / Hearing Impairment / Locomotors Disability / Mental Retardation / Any other (Specified in the ACT)

7. Diagnosis:-

8. Degree of Disability (%age)

9. (Details in the Act/Guide Lines)

Validity:-

Handwritten notes:
 1. 75%
 2. 75%
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 98. 75%
 99. 75%
 100. 75%

Specialist (1)

Specialist (2)

Chief Medical Officer

OP THALMOLOGIST
DIST. HOSPITAL
BUDGAM

Surgeon
Medical Board
BUDGAM

Budgam
CHAIRMAN
DISTRICT MEDICAL BOARD
BUDGAM

1. Act means J&K persons with disabilities (equal opportunities protection of right and full Participation) ACT 1988.
2. Medical Board will give permanent disability certificate in case of such permanent disability where there will indicate period of validity in the certificate.
3. N.B. one of the Medical Officer should be specialist in the concern disability.

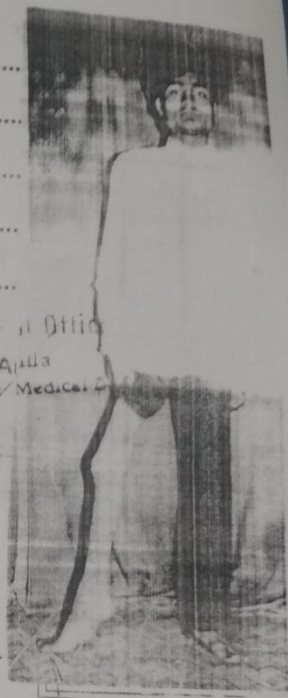
DHC 59-1

DISABILITY CERTIFICATE

No. - CMOB-Board. 1250

Dated: 02/08/66

1. Name Tasim Ahmad Rather
2. S/o, W/o, D/o Mr. Arshad Ali Rather
3. Sex & Age Male / 35
4. Address Warabara, Saffar
5. Mark of Identification None
6. Type of disability : Visual Disability/Hearing Impairment/Chief Medical Officer
Locomotor Disability/Mental Retardation/Chairman Distt. Medical Board
Other (Specified in the Act.)
7. Diagnosis DADA Rheu
8. Degree of Disability (%age)
Detailed in the Act/guide lines) 65% (Surgery)
9. Validity Permanent



<p>Member of the Board Dr. <u>[Signature]</u> Member of the Board Doctor <u>[Signature]</u></p>	<p>Member of the Board Dr. <u>[Signature]</u> Member of the Board Doctor <u>[Signature]</u></p>	<p>Chief Medical Officer Chairman of the Board Chairman Distt. Medical Board Convener</p>
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Act menas J&K persons with disabilities (equal opportunities, protection of Right and full Participaion), Act, 1998.

Medical Board will give permalinent disability certificate in case of such permanent disabilities where there are no chance of various in the degree of disability, wherever there is any chance of variation in the degree of disability, the Medical Board will indicate period of validity in the certificate.

N.B. One of the Medical Officer should be specialist in the concerned disability.

DISABILITY CERTIFICATE

No. CMOB-Board-132

Dated: 02/06/2004

- Name: Anis Rashi
- S/o, W/o, D/o: Anis Ahmad Rashi
- Sex & Age: Male, 08 years
- Address: Lundgahangar, Sundar, Bk.
- Mark of Identification: Photograph
- Type of disability: Visual Disability/Hearing Impairment/ (Locomotor Disability/Mental Retardation/ Other (Specified in the Act))



7. Diagnosis: PPRP @ Lower limb

8. Degree of Disability (%age) Detailed in the Act/guide lines: 50% (78%)

9. Validity: Permanent

Member of the Board

Member of the Board

Chairman of the Board

Dr. [Signature]

Dr. [Signature]

Chairman of the Board

Member Of the Board
Doctor
[Signature]
02/06/04

Member Of the Board
Doctor
[Signature]
02/06/04

Chairman
Convener Board
District Medical Board
Baramulla
[Signature]
02/06/04

Act means persons with disabilities (equal opportunities, protection of Right and full Participation) Act 1998.

Medical Board will give permanent disability certificate in case of such permanent disabilities where there are no chance of various in the degree of disability, wherever there is any chance of variation in the degree of disability, the Medical Board will indicate period of validity in the certificate.

N.B. One of the Medical Officer should be specialist in the concerned disability.