

UNIQUE DISABILITY ID

Government of India

STATE ID:

N/A

Aadhaar No.

*****7692



Address of the Card Issuing Authority State/District level

Cmo Office, P-block Sanjay Nagar Sector-23, Ghaziabad, Ghaziabad, Uttar Pradesh - 201001

UNIQUE DISABILITY ID

Government of India

नाम / Name

स्वति

Swati

UD ID

UP0910619940009911

Disability Type

Locomotor Disability

Year of Birth

1994

% of Disability

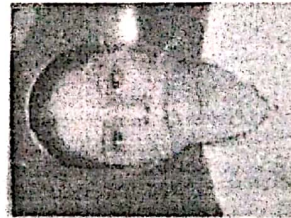
40% (Forty Percent)

Date of Issue

11/01/2019

Valid upto

Permanent



(P)

Issuing Authority Sign

Criterion - 2.2.3
Disabled Student - (4)

UID - (01)

Online Registration Detail
= (3)

OFFICE OF THE CHIEF MEDICAL OFFICER GHAZIABAD

NO. M-I/H/17/565

Dated... 25/5/17

HANDICAPE CERTIFICATE IN ACCORDANCE WITH
G.O.NO.7/42071 KARMIK-2 DATED MAY 20-1978

CHIEF MEDICAL OFFICER
GHAZIABAD.



We examined Sri/Smt. Km. Swati

Age About 24 year

S/o/D/o/W/o with of Sri Raj Paul Sharma

Resident of vill. Patla. Modli Nagar.
152 B. District Ghaziabad.

Whose signature LRTI is given below certificate that He/She is a case of

PTSD

The Percentage of disability is about 40% percentage.

We certified that He/She is permanently physically handicapped person.

[Signature]
ORTH SURGEON
(MEMBER)

[Signature]
PHYSICIAN
(MEMBER)

[Signature]
EYE SURGEON
(MEMBER)

[Signature]
E.N.T. SURGEON
(MEMBER)

[Signature]
Sig./LTI/RTI of the candidate

[Signature]
CHIEF MEDICAL OFFICER
CHIEF MEDICAL OFFICER
GHAZIABAD.



Department of Empowerment of Persons with Disabilities,
Ministry of Social Justice and Empowerment, Government of India
Acknowledgement / Resident Copy

Person with Disability Registration

Enrolment No: 0909/00000/1807/1852096

Enrolment Date: 27/07/2018

PERSONAL DETAILS

Name of Applicant	Swati	आवेदक का नाम	स्वाति
Applicant Father's Name	Raj Pal Sharma	आवेदक के पिता का नाम	राज pal शर्मा
Applicant Mother's Name	-----	आवेदक के माता का नाम	सरोज
Date of Birth	07/01/1994	Age	24 Year(s)
Gender	Female	E-Mail Id	-----
Mark of Identification	-----	Category	General
Mobile Number	-----	Blood Group	-----
Marital Status	Unmarried		
Relation with PwD (Person with Disability)	Self		
Name of Guardian / Caretaker / Attendant / Related	-----	Contact No. of Guardian / Caretaker / Attendant / Related	-----



Address of Correspondence

Address	Vpo Patla Distt Ghaziabad, Modinagar, Ghaziabad, Uttar Pradesh - 201204
पता	Vpo patla distt ग़ाज़िआबाद, मोदीनगर, ग़ाज़िआबाद, उत्तर प्रदेश - 201204
Nature of Document for Address Proof	Aadhaar Card

Permanent Address

Address	Vpo Patla Distt Ghaziabad, Modinagar, Ghaziabad, Uttar Pradesh - 201204
पता	Vpo patla distt ग़ाज़िआबाद, मोदीनगर, ग़ाज़िआबाद, उत्तर प्रदेश - 201204

Educational Details

Highest Qualification Post Graduate

DISABILITY DETAILS

Do you have disability
certificate?

Yes

Disability Type

Locomotor Disability

Disability certificate
uploaded? Yes
Date of Issuance of
Certificate 25/05/2017
Disability Percentage 40%
Disability Area Left Leg
Pension Card Number -----
Hospital Treating
Disability -----

S. No. / Registration No. M-1/1017/565
Certificate
Details of Issuing
Authority Chief Medical Office
Disability Since 1994
Disability Due To -----

EMPLOYMENT DETAILS

Employed or Unemployed Unemployed
Unemployed Since -----
BPL / APL BPL
Personal Income (Annual) -----

IDENTITY DETAILS

Identity Proof Aadhaar Card
Aadhaar No. 247837867692

TIN (NPR)

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Department of Empowerment of Persons with Disabilities,
Ministry of Social Justice and Empowerment, Government of India
Acknowledgement / Resident Copy

Person with Disability Registration

Enrolment No: 0910/00000/1901/1181269

Enrolment Date: 21/01/2019

PERSONAL DETAILS

Name of Applicant	Asha Gautam	आवेदक का नाम	आशा गौतम
Applicant Father's Name	Keshram	आवेदक के पिता का नाम	केशराम
Applicant Mother's Name	Krishana Devi	आवेदक के माता का नाम	कृष्णा देवी
Date of Birth	12/08/1996	Age	22 Year(s)
Gender	Female	E-Mail Id	ashoknagar195@gmail.com
Mark of Identification	_____	Category	Sc
Mobile Number	7042771370	Blood Group	_____
Marital Status	_____		
Relation with PwD (Person with Disability)	_____		
Name of Guardian / Caretaker / Attendant / Related	_____	Contact No. of Guardian / Caretaker / Attendant / Related	_____



Asha Gautam

Address of Correspondence

Address	Village Duriyai, Post Kachera Versabad, Tehsil Dadri, Dadri, Gautam Buddha Nagar, Uttar Pradesh - 203207
पता	विलेज दुरियाई, पोस्ट कचेरा वेरसाबाद, तहसील दादरी, Dadri, Gautam Buddha Nagar, Uttar Pradesh - 203207
Nature of Document for Address Proof	Aadhaar Card

Permanent Address

Address	Village Duriyai, Post Kachera Versabad, Tehsil Dadri, Dadri, Gautam Buddha Nagar, Uttar Pradesh - 203207
पता	विलेज दुरियाई, पोस्ट कचेरा वेरसाबाद, तहसील दादरी, Dadri, Gautam Buddha Nagar, Uttar Pradesh - 203207

Educational Details

Highest Qualification Higher Secondary

DISABILITY DETAILS

Do you have disability
certificate?

Yes

Disability Type

Leprosy cured, Locomotor
Disability

Disability certificate uploaded?	Yes	Sr. No. / Registration No. of Certificate	2016/374
Date of Issuance of Certificate	14/07/2016	Details of Issuing Authority	Chief Medical Office
Disability Percentage	50%		
Disability Area	-----	Disability Since	1996
Pension Card Number	-----		
Hospital Treating Disability	-----	Disability Due To	-----

EMPLOYMENT DETAILS

Employed or Unemployed	Unemployed
Unemployed Since	-----
BPL / APL	-----
Personal Income (Annual)	-----

IDENTITY DETAILS

Identity Proof	Aadhaar Card	TIN (NPR)	-----
Aadhaar No.	880291216778		

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Department of Empowerment of Persons with Disabilities,
Ministry of Social Justice and Empowerment, Government of India
Acknowledgement / Resident Copy

Enrolment No : 0910/00000/1901/1181269

Date : 21/01/2019 12:33:33

Name, Address and other details

Asha Gautam (Female)
Keshram (Father)

Village Duriyai, Post Kachera Versabad, Tehsil Dadri,
Dadri, Gautam Buddha Nagar, Uttar Pradesh - 203207

नाम, पता और अन्य विवरण
आशा गौतम (स्त्री)
केशराम (पिता)

बिन्दूज दुरियाई, पोस्ट कचेरा वेरसाबाद, तहसील दादरी, Dadri,
Gautam Buddha Nagar, Uttar Pradesh - 203207



Date of Birth : 12/08/1996

Age : 22 Year(s)

Mobile : 7042771370

Email : ashoknagar195@gmail.com

Address Proof Document : Aadhaar card
ID Proof Document : Aadhaar Card

For enquiry, please contact :

<http://www.swavlambancard.gov.in> 1) - cmogbnr@gmail.com MO Address: 1) - CMO, Gautam Buddh Nagar

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Department of Empowerment of Persons with Disabilities,
Ministry of Social Justice and Empowerment, Government of India
Acknowledgement / Resident Copy

Person with Disability Registration

Enrolment No: 0910/00000/1902/0538909

Enrolment Date: 08/02/2019

PERSONAL DETAILS

Name of Applicant	Priya Kumari	आवेदक का नाम	प्रिया कुमारी
Applicant Father's Name	Sunder Pal	आवेदक के पिता का नाम	सुन्दर पाल
Applicant Mother's Name	Birjesh Devi	आवेदक के माता का नाम	बिर्जेश देवी
Date of Birth	08/07/1998	Age	20 Year(s)
Gender	Female	E-Mail Id	jassigautam693@gmail.com
Mark of Identification	-----	Category	Sc
Mobile Number	9818944903	Blood Group	O+
Marital Status	Unmarried		
Relation with PWD (Person with Disability)	Self		
Name of Guardian / Caretaker / Attendant / Related	-----	Contact No. of Guardian / Caretaker / Attendant / Related	-----



Priya

Address of Correspondence

Address Village-datawali, post-dadri, dist-gautam Buddh Naga, Dadri, Gautam Buddha Nagar, Uttar Pradesh - 203207
पता गांव-दतावली, डाकघर-दादरी, जिला गौतम बुद्ध नगर, Dadri, Gautam Buddha Nagar, Uttar Pradesh - 203207
Nature of Document for Address Proof Aadhaar Card

Permanent Address

Address Village-datawali, post-dadri, dist-gautam Buddh Naga, Dadri, Gautam Buddha Nagar, Uttar Pradesh - 203207
पता गांव-दतावली, डाकघर-दादरी, जिला गौतम बुद्ध नगर, Dadri, Gautam Buddha Nagar, Uttar Pradesh - 203207

Educational Details

Highest Qualification Graduate

DISABILITY DETAILS

Do you have disability certificate?	Yes	Disability Type	Muscular Dystrophy
Disability certificate uploaded?	Yes	Sr. No. / Registration No. of Certificate	Cap/2011/02

Date of Issuance of Certificate	17/10/2011	Details of Issuing Authority	Chief Medical Office
Disability Percentage	45%		
Disability Area	Foot	Disability Since	2000
Pension Card Number	_____		
Hospital Treating Disability	_____	Disability Due To	Medicine

EMPLOYMENT DETAILS

Employed or Unemployed Unemployed
Unemployed Since _____
BPL / APL BPL
Personal Income (Annual) Below 10000

IDENTITY DETAILS

Identity Proof	Aadhaar Card	TIN (NPR)	_____
Aadhaar No.	752838264186		

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Department of Empowerment of Persons with Disabilities,
Ministry of Social Justice and Empowerment, Government of India
Acknowledgement / Resident Copy

Date : 08/02/2019 19:17:14

Enrolment No : 0910/00000/1902/0538909

Name, Address and other details

Priya Kumari (Female)
Sunder Pal (Father)

Village-datawali, post-dadri, dist-gautam Buddh Naga,
Dadri, Gautam Buddha Nagar, Uttar Pradesh - 203207

Date of Birth : 08/07/1998
Age : 20 Year(s)

Address Proof Document : Aadhaar card
ID Proof Document : Aadhaar Card

For enquiry, please contact :

<http://www.swavlambancard.gov.in> 1) - cmogbnr@gmail.com MO Address: 1) - CMO , Gautam Buddh Nagar

नाम, पता और अन्य विवरण
प्रिया कुमारी (स्त्री)
सुन्दर पाल (पिता)

गांव-दतावली, डाकखाना-ददरी, जिला-गौतम बुद्ध नगर, ददरी,
Gautam Buddha Nagar, Uttar Pradesh - 203207

Mobile : 9818944903
Email : jassigautam693@gmail.com



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Handicap Camp Dabhi

OFFICE OF THE CHIEF MEDICAL OFFICER, GAUTAM BUDH NAGAR

No. GBN/CMO/H-Cap/2011/02

Date :- 17/10/2011

Not For Court Case

HANDICAP CERTIFICATE IN ACCORDANCE WITH THE
G.O. No. 7/4/1971-KARMIK-2, DATED 29TH MAY 1977

We have examined Sri/Smt./Km. Prinza

Aged about 12 yrs., son/daughter/wife of Shree Sunder pal

Resident of Village: Datowali Post Office- Dabhi Gautam Budh Nagar

Whose signature/thumb impression is given below. He / She is a case of F. P. D. P.

Rt Side Lower limb

We certify that he/she is permanently physically handicapped with Forty five H/o

Identification Mark a Black mole Under Right eye Side



Signature/Thumb Impression
of the Candidate

Attested

Chief Medical Officer

Physician

Orthopaedic Surgeon
(Member)

Eye Surgeon
(Member)

ENT Surgeon
(Member)



Department of Empowerment of Persons with Disabilities,
Ministry of Social Justice and Empowerment, Government of India
Acknowledgement / Resident Copy

Person with Disability Registration

Enrolment Date: 02/04/2019

Enrolment No: 0910/00000/1904/0082175

PERSONAL DETAILS

Name of Applicant	Km Parul	आवेदक का नाम	कु पारुल
Applicant Father's Name	Bhanwar Singh	आवेदक के पिता का नाम	भनवर सिंह
Applicant Mother's Name	Rajesh Devi	आवेदक के माता का नाम	राजेश देवी
Date of Birth	26/10/1999	Age	19 Year(s)
Gender	Female	E-Mail Id	_____
Mark of Identification	_____	Category	Obc
Mobile Number	9999364635	Blood Group	_____
Marital Status	Unmarried		
Relation with PwD (Person with Disability)	Self		
Name of Guardian / Caretaker / Attendant / Related	_____	Contact No. of Guardian / Caretaker / Attendant / Related	_____



Parul

Address of Correspondence

Address Vill Kheri, Post Kheri, Suraj Pur, Dadri, Gautam Buddha Nagar, Uttar Pradesh - 203207
पता ग्राम खेड़ी, पोस्ट खेड़ी, Suraj Pur, Dadri, Gautam Buddha Nagar, Uttar Pradesh - 203207
Nature of Document for Address Proof Cast And Domicile Certificate With Address And Photo Issued By State G

Permanent Address

Address Vill Kheri, Post Kheri, Suraj Pur, Dadri, Gautam Buddha Nagar, Uttar Pradesh - 203207
पता ग्राम खेड़ी, Suraj Pur, Dadri, Gautam Buddha Nagar, Uttar Pradesh - 203207

Educational Details

Highest Qualification Senior Secondary

DISABILITY DETAILS

Do you have disability
certificate?

Yes

Disability Type

Locomotor Disability

Disability certificate uploaded?	Yes	Sr. No. / Registration No. of Certificate	280
Date of Issuance of Certificate	02/06/2016	Details of Issuing Authority	Chief Medical Office
Disability Percentage	40%		
Disability Area	Left Leg	Disability Since	1999
Pension Card Number	-----		
Hospital Treating Disability	-----	Disability Due To	Diseases

EMPLOYMENT DETAILS

Employed or Unemployed	Unemployed
Unemployed Since	-----
BPL / APL	NA
Personal Income (Annual)	-----

IDENTITY DETAILS

Identity Proof	Cast And Domicile Certificate With Photo Issued By	TIN (NPR)	-----
Aadhaar No.	292548050152		

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