



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

Disability Certificate

Issuing Medical Authority, Pune, Maharashtra



Certificate No.: MH2590819920435038

Date: 02/03/2022

This is to certify that I/we have carefully examined Shri **Vivek Suresh Dumbre**, Son of Shri **Suresh Shivram Dumbre**, Date of Birth **27/08/1992**, Age **29**, Male, Registration No. **2725/00000/2001/0664621**, resident of House No. **Sr No.36/2, Near Dutta Hotel ,kharadi Road, Chandan Nagar,near Old Sai Mandir,, Pune-411014 - 411014**, Sub District **Pune City**, District **Pune**, State / UT **Maharashtra**, whose photograph is affixed above, and I am/we are satisfied that:

(A) He is a case of **Mental Illness**

(B) The diagnosis in his case is **Schizo Obsessive disorder (MENTAL ILLNESS)**

(C) He has **50%**(in figure) **Fifty** percent(in words) Temporary Disability in relation to his Brain as per the guidelines (Guidelines for the purpose of assessing the extent of specified disability in a person included under RPwD Act, 2016 notified by Government of India vide S.O. 76(E) dated 04/01/2018).

This certificate recommended for **5 year(s)**, and therefore this certificate shall be valid till **02/03/2027**

The applicant has submitted the following document(s) as proof of residence:

Nature of Document(s): Aadhaar card



Signature / Thumb Impression of the Person with Disability

[Handwritten signatures]

Signatory of notified Medical Authority Member(s)



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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.