

प्रति

मंडल रेल प्रबंधक (वःपिज्ज)  
पश्चिम मध्य रेल जबलपुर

विषय- निःशक्त जन स्मार्ट कार्ड जारी करने बाबत आवेदन पत्र।

महोदय जी

सविनय निवेदन है कि निम्न विवरण अनुसार प्रार्थी को निःशक्त जन स्मार्ट कार्ड जारी करने की कृपा करें।

- नाम Name : \_\_\_\_\_
- जन्म तिथि Date of Birth : \_\_\_\_\_ लिंग Gender \_\_\_\_\_
- रेल रियायत प्रमाण पत्र जारी करने वाले डॉक्टर का नाम  
Name of Doctor's who issued the Rail concession certificate \_\_\_\_\_
- प्रमाण पत्र जारी करने वाले सरकारी डॉक्टर/आर.एम.पी./व्यक्ति का पंजीकरण संख्या  
Registration Number of Govt. Doctor /RMP/ Person issuing certificate \_\_\_\_\_
- विकलांगता की प्रकृति Nature of Handicap \_\_\_\_\_
- रियायती प्रमाण पत्र जारी करने की तिथि Date of issue of concession certificate \_\_\_\_\_
- रियायती प्रमाण पत्र की वैधता Validity of concession certificate \_\_\_\_\_

यह कि मैं एक निःशक्त जन हूँ। मैं अपने समस्त आवश्यक प्रमाण पत्रों की दो दो छायाप्रति जो कि स्वहस्ताक्षरित हैं के साथ अपना आवेदन की दो प्रति आपके समक्ष प्रस्तुत कर रहा/रही हूँ।

अतः महोदय जी से अपेक्षा है कि उक्त स्मार्ट कार्ड जारी करने की कृपा करें।

धन्यवाद

संलग्न:- निम्न सभी दस्तावेजों की स्वहस्ताक्षरित दो प्रति में।

1. निःशक्त जन चिकित्सा प्रमाण पत्र एवं शासकीय अस्पताल से जारी रेलवे रियायत प्रमाण पत्र की वैध प्रति।
2. जन्मतिथि से संबंधित प्रमाण पत्र।
3. मूलनिवासी/पहचान पत्र से संबंधित प्रमाण पत्र।
4. दो पासपोर्ट साईज फोटो

दिनांक : \_\_\_\_\_

भवदीय

पोस्टाईल नं. : \_\_\_\_\_

(पूरा नाम पता व हस्ताक्षर)

Appendex 1/45  
(See Rule 101, SI, No. 25,28, 29(1))  
(Concession (Certificate for Physically handicaped)

Concession certificate from for orthopaedically handicapped/paraplegic person/patients/mentally retarded person/completely blind person/totally deaf and dumb person.

Paste passport Size  
photograph duly  
signed and stamped  
by the  
issuing doctor

This is to certify that KM/Shri/Smt....., whose particulars are furnished below, is bonafide ORTHOPAEDICALLY HANDICAPPED/PARAPLEGIC PERSON/PATIENTS WHO CANNOT TRAVEL WITHOUT THE ASSISTANCE OF AN ESCORT/MENTALLY RETARDED PERSON WHO CANNOT TRAVEL WITHOUT AN ESCORT /COMPLETELY BLIND PESON / TOTALLY DEAF AND DUMB PERSON.

Particulars

- a) Address :.....
- b) Father's /Husband Name :.....
- c) Age :.....
- d) Sex :.....
- e) Nature of Handicap: ( To be written by the doctor whether the disability is temporary or permanent)
- f) Signature or thumb impression  
of the person seeking concession (not necessary for those with  
Both hands missing or non-functional):.....

.....  
(Signature of Government Doctor)

Place.....  
Date.....

.....  
Clear seal of Government

.....  
Seal containing full name and Hospital#  
Regn. No. of the Doctor#

\*\* Strike out where not applicable.

# For blind persons RMP/head of institution for the blind recognized can also issue certificate for blind.

- Note:-**
1. This Certificate should be issued only to those ORTHOPAEDICALLY HANDICAPPED/PARAPLEGIC PERSON/PATIENTS WHO CANNOT TRAVE WITHOUT THE ASSISTANCE OR AN ESCORT/ MENTALLY RETARDED PESON WHO CANNOT TRAVEL WITHOUT AN ESCORT /COMPLETELY BLIND PERSON/TOTALLY DEAF & DUMB PERSON. The photo must be signed and stamped in such a way that doctor's signature and stamp appears partley on the photo and partly on the certificate.
  2. For Mentally retarded person/ Completely blind person/ Deaf and dumb person (both affictions together), the certificate will be valid for fice years form the date of issue. For temporary disability in the case of orthopedically/paraplegic persons the certificate will be vaild for 5 year and in case of permanent disability, the cerficate will remain valid for (i) five years, in case of person upto the age of 25 years, (2) ten years, in case of persons in the age group of 26 to 35 years and (3) in case of persons above the age of 35 years, the certificate will remain valid for whole life of the conceredned persons. After expiry of the period vaildity of the certificate, the person is required to obtain a fresh certificate.
  3. Photocopy of this certificate is acceptable for the purpose of grant of concession. The original certificate will have to produced for inspection at the time of purchase of concessional ticket and during journey, if demand.
  4. No. alteration in the form is permitted.