



# UNIQUE DISABILITY ID

Government of India



भारत सरकार  
GOVERNMENT OF INDIA

नाम / Name

जय शर्मा

**Jay Sharma**

UD ID

**DL0810020050041127**

Disability Type

**Hearing Impairment**

Year of Birth

**2005**

% of Disability

**100% (One hundred  
Percent)**

Date of Issue

**02/12/2022**

Valid upto

**Permanent**



Issuing Authority Sign

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STATE ID:

N/A

Aadhaar No.

\*\*\*\*\*1802



Address of the Card Issuing Authority State/District level

**Deen Dayal Upadhye Hospital, Shaheed Mangal  
Pandey Marg, Nanak Pura, Hari Nagar, New Delhi,  
Delhi 110064, West, Delhi - 110064**