

COURT No.2
ARMED FORCES TRIBUNAL
PRINCIPAL BENCH: NEW DELHI

2.

OA 1086/2019 with MA 1761/2019

Ex LD (TS) Prakash Singh Shekhawat Applicant
VERSUS
Union of India and Ors. Respondents

For Applicant : Mr Baljeet Singh, proxy for Mr. Virender
Singh Kadian, Advocate
For Respondents : Mr. D K Sabat, Advocate

CORAM

HON'BLE MS. JUSTICE ANU MALHOTRA, MEMBER (J)
HON'BLE REAR ADMIRAL DHIREN VIG, MEMBER (A)

ORDER
21.11.2023

Vide our detailed order of even date, we have allowed the OA 1086/2019. Learned counsel for the respondents makes an oral prayer for grant of leave to appeal in terms of Section 31(1) of the Armed Forces Tribunal Act, 2007 to assail the order before the Hon'ble Supreme Court. After hearing learned counsel for the respondents and on perusal of our order, in our considered view, there appears to be no point of law much less any point of law of general public importance involved in the order to grant leave to appeal. Therefore, prayer for grant of leave to appeal stands declined.

(JUSTICE ANU MALHOTRA)
MEMBER (J)

(REAR ADMIRAL DHIREN VIG)
MEMBER (A)

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Ex LD (TS) Prakash Singh Sekhawat

... Applicant

Versus

Union of India & Ors.

... Respondents

For Applicant : Mr. Pushpendra Kumar Dhaka, Advocate
For Respondents : Mr. Arvind Patel, Advocate

CORAM :

HON'BLE MS. JUSTICE ANU MALHOTRA, MEMBER (J)
HON'BLE REAR ADMIRAL DHIREN VIG, MEMBER (A)

ORDER

MA 1761/2019

This is an application filed under Section 22(2) of the Armed Forces Tribunal Act, 2007 seeking condonation of delay of **6580** days in filing the present OA. In view of the verdicts of the Hon'ble Supreme Court in the matter of **UoI & Ors Vs. Tarsem Singh 2009(1)AISLJ 371** and in **Ex Sep Chain Singh Vs. Union of India & Ors (Civil Appeal No. 30073/2017)** and the reasons mentioned in the application, the MA 1761/2019 is allowed despite opposition on behalf of the respondents and the delay of **6580** days in filing the OA 1086/2019 is thus condoned.

OA 1086/2019

The applicant vide the present OA makes the following prayers:-

- (a) *Quash and set aside impugned letter No 1085296P/DP/Appeal/Pen dated 27.04.2019. And/or*
- (b) *Direct respondents to treat the disability of the applicant as attributable to aggravated by military service and grant disability element of pension from the date of retirement of applicant along with benefit of broad banding. And/or*
- (c) *Direct respondents to pay the due arrears of disability element of pension with interest @12% p.a from the date of retirement with all the consequential benefits.*
- (d) *Any other relief which the Hon'ble Tribunal may deem fit and proper in the fact and circumstances of the case.*

2. The applicant Ex LD (TS) Prakash Singh Shekhawat No. 1085296P was enrolled in the Armoured Corps on 22.11.1984 and discharged from service on 30.05.2001 (AN) under item III (v) of table annexed to Rule 13(3) in conjunction with Rule 2(A) of Army Rules 1954, being placed in Medical Category Lower than AYE and not upto the prescribed military physical standard. The applicant had rendered 16 years, 06 months and 09 days of qualifying service in the Army. The applicant was granted service pension @ 1,426/- per month with effect from 01.06.2001 vide PCDA (P), Allahabad PPO No. S/027070/2001 (Army) dated 23.05.2001.

3. The applicant was downgraded to Permanent Low Medical Category CEE (P) with effect from 07.10.2000 for the diagnosis "Chronic Cyclitis with Complicated Cataract (RT) Eye (OPTD) (366)" but the applicant rendered his willingness to continue in service. However, the

applicant was not recommended for retention in service with effect from 07.10.2000 owing to the non-availability of sheltered appointment commensurate to his LMC in the unit, by the Commandant 20 Lancers. Accordingly, Armoured Corps Records issued his Release Order No. 003/2001 vide letter No. 508102/LMC/255/CA-1 dated 05.01.2001 and directed him to report to Armoured Corps Depot for release drill and finally he was struck of strength from the Arm on 31.05.2001 (AN).

4. The Release Medical Board of the applicant was held at Base Hospital, Delhi Cantt. On 07.03.2001 wherein his disability viz. "Chronic Cyclitis with Complicated Cataract (RT) Eye (OPTD) (366)" was regarded as "Aggravated by Military Service" and assessed the same @30% for five years. The RMB proceedings (AFMSF-16) were approved by DDMS, Base Hospital, Delhi Cantt on 31.03.2001.

4. The disability element claim of the applicant was processed to PCDA (P), Allahabad for their adjudication by the Armoured Corps Records via letter No. 1085296P/DP/04/Pen dated 15.11.2001. PCDA(P), Allahabad rejected the disability element claim of the applicant and regarded his disability viz. "Chronic Cyclitis with Complicated Cataract (RT) Eye (OPTD) (366)" as "neither attributable to nor aggravated by military service" as the disability is constitutional in nature and not

related to service vide their letter no. G-3/51/554/11-2001 dated 15.02.2002.

5. The applicant had also submitted an application dated 05.12.2018 under the RTI Act, 2005 seeking therein information/documents which were provided to the applicant by the Armoured Corps Records vide letter no. 1085296P/RTI/SR/2019/NER dated 22.01.2019. Thereafter, the applicant forwarded an application No. VSK/183/03/2019 dated 18.03.2019 through his counsel for grant of the disability element with rounding off benefits which was replied by the Armoured Corps Records vide letter no. 1085296P/DP/Appeal/Pen dated 27.04.2019 which is the impugned letter in the present OA.

6. Vide the said letter dated 27.04.2019, it was stated as under:-

"2. On scrutiny of your service/medical documents, it is notice that disability "Chronic Cyclitis with Complicated Cataract (RT) Eye (OPTD)" was regarded as "Aggravated by Military Service" and degree of disablement net assessed 30% for five years by the Release Medical Board dated 07.03.2001.

3. Claim for disability element was rejected by PCDA(P), Allahabad vide their letter G-3/51/554/11-2001 dated 15 Feb 2002. However, you did not prefer any appeal within given time frame. Now, your case has become time barred and more than five years.

4. As per IHQ of MoD (Army) letter no. B-40502/Appeals/2014/AG/PS-4 (Imp-II) dated 26 May 2014 and Ministry of Defence letter No. 1(3)/2008/D(Pen/Pol) dated 17 May 2018 obtaining time barred sanction for your appeal is not feasible at this belated stage."

7. In the interest of justice, we consider it appropriate to take up the OA for consideration in Section 21(1) of the AFT Act, 2007.

CONTENTIONS OF THE PARTIES

8. The applicant submits that he joined the Indian Army in a fit medical condition with no note of any disability recorded in his service records at the time of entry into service and there being no note also recorded on the records of the respondents as to why the existence of the disability could not be ascertained at the time of induction of the applicant into military service. It is thus submitted on behalf of the applicant placing reliance on the verdict of the Hon'ble Supreme Court in ***Dharamvir Singh vs. Union of India & Ors.*** in (2013) 7SCC 316 with specific observations in para 28 thereof which reads to the effect:-

"28. A conjoint reading of various provisions, reproduced above, makes it clear that:

(i) Disability pension to be granted to an individual who is invalidated from service on account of a disability which is attributable to or aggravated by military service in non-battle casualty and is assessed at 20% or over. The question whether a disability is attributable or aggravated by military service to be determined under "Entitlement Rules for Casualty Pensionary Awards, 1982" of Appendix-II (Regulation 173).

(ii) A member is to be presumed in sound physical and mental condition upon entering service if there is no note or record at the time of entrance. In the event of his subsequently being discharged from service on medical grounds any deterioration in his health is to be presumed due to service. [Rule 5 r/w Rule 14(b)].

(iii) Onus of proof is not on the claimant (employee), the corollary is that onus of proof that the condition for non-entitlement is with the employer. A claimant has a right to

derive benefit of any reasonable doubt and is entitled for pensionary benefit more liberally. (Rule 9).

(iv) If a disease is accepted to have been as having arisen in service, it must also be established that the conditions of military service determined or contributed to the onset of the disease and that the conditions were due to the circumstances of duty in military service. [Rule 14(c)].

(v) If no note of any disability or disease was made at the time of individual's acceptance for military service, a disease which has led to an individual's discharge or death will be deemed to have arisen in service. [14(b)].

(vi) If medical opinion holds that the disease could not have been detected on medical examination prior to the acceptance for service and that disease will not be deemed to have arisen during service, the Medical Board is required to state the reasons. [14(b)]; and

(vii) It is mandatory for the Medical Board to follow the guidelines laid down in Chapter-II of the "Guide to Medical (Military Pension), 2002 – "Entitlement : General Principles", including paragraph 7,8 and 9 as referred to above."

to contend to the effect that the disability that the applicant suffers from has to be held to attributable to and aggravated by military service.

9. Reliance was also placed on behalf of the applicant on the Govt. of India, Ministry of Defence letter no. 4(17)/2015/D(Pen/Legal) dated 29.06.2017 which incorporates therein to the effect that the conditions as observed by the Hon'ble Supreme Court in **Dharamvir Singh** (Supra) which are as under :-

"(a) The question whether a disability is attributable or aggravated by military service is to be determined under "Entitlement Rules for Casualty Pensionary Awards 1982.

(b) A member is to be presumed in sound physical and mental condition upon entering service if there is no note or record at the time of entrance. In the event of his subsequently

being discharged from service on medical grounds any deterioration in his health is to be presumed due to service.

(c) If no note of any disability or disease was made at the time of individual's acceptance for military service a disease which has laid to an individual's discharge or death will be deemed to have arisen in the service.

(d) If medical opinion holds that the disease could not have been detected on medical examination prior to the acceptance for service and that disease will not be deemed to have arisen during service, the medical board is required to state the reasons." ,-

the Armed Forces Personnel would be entitled to the grant of the disability element on pension if discharged in medical category lower than that from which he had been inducted into service and specifically where the respondents through their medical examinations have not given any reason for having not detected the medical ailment before induction of the applicant into service.

10. Reliance was likewise placed on behalf of the applicant on the Entitlement Rules for Casualty Pensionary Awards 1982, the specific reliance on Rules 5, 14(b), 19 and 20 (a) thereof to submit to the effect that there being no note of the disease on the record and the presumption of the entitlement in favour of the applicant having not been rebutted, the attributability of the disability being due to military service has to be conceded. Reliance was likewise placed on behalf of the applicant on the verdict of the Hon'ble Supreme Court in *Sukhvinder Singh vs. UOI 2014*, SCC 364, *Union of India & Ors. vs. Rajbir Singh* (2015) 12 SCC

264, and *UOI & Ors. Vs. Manjeet Singh* dated 12.05.2015, Civil Appeal no. 4357-4358 of 2015 to contend to similar effect.

11. Furthermore, the applicant submits that the rejection of the representation made by the applicant wholly on the ground that the appeal cum representation was made by the applicant on 18.03.2019 after rejection of the disability element claim by the PCDA(P), Allahabad vide letter dated 15.02.2002 beyond a period of five years, is also wholly untenable, in as much as the claim made by the applicant was for the grant of the disability element of pension which relates to a continuing wrong. Furthermore, on behalf of the applicant it was submitted that as indicated by the impugned letter dated 27.04.2019 No, 1085296P/DP/Appeal/Pen it was categorically brought forth the RMB dated 07.03.2001 had opined the disability of the applicant to be aggravated by military service as detailed therein in Part III of the RMB in the opinion of the Medical Board as under:-

“

The Board should state fully the reasons in regard to each disability on which is based.

Disability	A	B	C
Chronic Cyclitis with Complicated Cataract (RT) Eye (OPTD) (366)	NO	YES	NO

The Board also observed in the said RMB as under:-

“

(c) In respect of each disability shown as aggravated under B, the Board should state fully: (i) The specific condition and period in service which aggravated the disability. Yes, due to 15 stress and strain of service vide AFMSF-15 dated 07.10.1991 (ii) Whether the effects of such aggravation still persist. YES
(iii) If the answer (ii) is the affirmative, whether effect of aggravation will persist for a material period. YES

”

and has opined to the effect :-

12. The applicant has thus submitted that in the absence of any further medical examination conducted by a higher authority, the assessment made by the RMB dated 07.03.2001 that the disability that the applicant suffers from of Chronic Cyclitis with Complicated Cataract (RT) Eye (OPTD) (366) which was aggravated by military service due to stress and strain of service vide AFMSF-15 dated 07.10.1991 could not have been obliterated by the PCDA(P) Allahabad by holding that the disability was constitutional in nature and not related to service.

13. It was also submitted on behalf of the applicant that the onset of the disability as reflected in the RMB was as under:-

“

PART-II

STATEMENT OF CASE

Disabilities	Date of origin	Place and unit where serving at the time
Chronic Cyclitis with Complicated Cataract (RT) Eye	25.06.1997	HQ Rqn 39 Army Bde Bhajraj range

(OPTD) (366)		
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14. The applicant has further placed reliance on his posting profile which reads to the effect :-

Field/Operational/Overseas service : Giving dates and places

From	To	Place	From	To	Place
23.01.87	31.05.87	OP Trident			
07.09.92	06.05.93	OP Rakshak			
09.07.93	Till Date	Modified fd			

15. The applicant has thus submitted that the postings of the applicant as depicted hereinabove in OP Trident, OP Rakshak and in the Modified Field area clearly depict that the onset of the disability which was on 04.07.97 after a period of more than 10 years of military service has to be held to be attributable to and aggravated by military service.

16. *Inter alia* it was submitted on behalf of the applicant that though the RMB had assessed the percentage of disablement as under :-

“

Disability (as numbered in question I, part II)	Percentage of disablement	Probable duration of this degree of disablement	Composite assessment (all disabilities)
Chronic Cyclitis with Complicated Cataract (RT) Eye (OPTD) (366)	30%	05 years	Thirty Percent

”

assessing the probable duration of disablement at 30% for five years, in terms of the verdict of the Hon'ble Supreme Court in **Cmdr Rakesh**

Pande vs. Union of India & Ors. in Civil Appeal No. 5970/2019 which takes into account the Para 7 of the Govt. of India, Ministry of Defence letter No. 1(2)/97/D/(Pen-c) dated 07.02.2001 which is as under :-

“7. Re-assessment of Disability:- There will be no periodical reviews by the Resurvey Medical Boards for re-assessment of disabilities. In cases of disabilities adjudicated as being of a permanent nature, the decision once arrived at will be final and for life unless the individual himself requests for a in cases of disabilities which are not of a permanent nature. There will be only one review of the percentage by a Reassessment Medical board to be carried out later, within a specified time frame. The percentage of disability assessed/recommended by the Reassessment Medical Board will be final and for life unless the individual himself ass for a review. The review will be carried out by Review Medical constituted by DGAFMS. The percentage of disability assessed by the Review Medical Board will be final.”,-

the percentage of disablement has to assessed as being 30% for life.

17. On behalf of the respondents, it was submitted to the effect that merely because the applicant did not suffer from any disability at the time of induction into military service, the same cannot make the disability that he suffers from be treated as being attributable to or aggravated by military service with it having been stated in Paragraph 4, 4.3 and 4.4 of the counter affidavit that it was obligatory on the part of the applicant to reveal his history and diseases which cannot be detected clinically and diseases of a constitutional nature may erupt after some time when exposed to certain tough situation and climatic conditions and that the

disability cannot be treated as attributable to or aggravated by military service, unless it has been so opined by the Medical Authorities.

18. It has thus been submitted by the respondents that the PCDA (P) Allahabad vide the letter dated 15.02.2002 having opined that the disability that the applicant suffers from was constitutional in nature and not related to military service, there is no infirmity in the non-grant of the disability element of pension to the applicant for the disability that he suffers from Chronic Cyclitis with Complicated Cataract (RT) Eye (OPTD) (366).

19. The applicant in the instant case having been discharged on 31.05.2001, it is the Entitlement Rules for Casualty Pensionary Awards for Armed Forces Personnel 1982 that are applicable to the facts and circumstances of the instant case and the relevant GMO applicable is the Guide to Medical Officers (Military Pensions) 2002.

20. The disease of the applicant falls within the Para 24 of Chapter-VI the GMO (MP) 2002 which is as under :-

“24. Diseases of Retina All retinal diseases are associated with reduction of acuity of vision, contraction of field of vision, colour blindness and sometimes progress to blindness.

Retinal diseases are divided into broad categories as under :

(a) Retinal Perivasculitis

Primary retinal perivasculitis is known as Eale's disease. It is primary autoimmune disease. In small percentage of cases it is associated with tuberculosis, choroiditis and septic focus in the body when it can be called attributable to service. Exposure to

cold or systemic infection can adversely affect the course of disease where aggravation can be considered.

(b) Optic Neuropathy: Optic neuritis encompasses morphological variants such as retrobulbar neuritis, papillitis, neuro retinitis and optic atrophy. It is a degenerative disease with multiple sclerosis accounting for majority of cases. However, choroiditis, sinus infection, head injury, penetrating injury eye, certain drugs (ethambutal, chloramphenicol), tobacco, alcohol, atherosclerotic embolism of artery concerned, Cerebral malaria can cause this. Optic neuropathy may be a 91 complication to SLE and temporal arteritis. When optic neuropathy develops due to trauma related to service, infection and drug therapy, attributability is conceded. The disability could be aggravated by hardship privations and exposure to exceptional stress and strain of service. Smoke, stress of reading or writing cannot affect the onset or course of the disease.

(c) Retinal Detachment: Retinal detachment is a degenerative disease. Degeneration is either due to lattice degeneration or myopic degeneration. Trivial trauma can produce retinal detachment in both these conditions. Physical stress of service e.g. organised games, sports activity, training, PT parade, boxing can precipitate an attack.

(d) Degeneration and Dystrophy of Fundus

(i) Serous Central Retinopathy: It is common condition characterized by unilateral localized detachment of sensory retina at macula. If florescent angiography shows multiple leak, the particular condition may be due to tubercular disease. Hence attributability can be conceded. About 80% of Central Serous retinopathy undergo spontaneous recovery and visual acuity is restored within six months.

(ii) Retinal Vascular Diseases: Generally associated with Diabetes and Hypertension. Retinal artery occlusion may be due to vegetation from heart as in subacute bacterial endocarditis and thrombus in myocardial infarction. Central retinal vein occlusion is associated with hypertension and hyperviscosity syndrome in leukaemia and polycythaemia vera.

(iii) Retinitis Pigmentosa: It is a generic name for a group of hereditary disorders characterized by progressive loss of photo receptor retinal pigment i.e. rods and cones. Night blindness is the main complaint with loss of acuity of vision. Disability is rejectable.

(iv) Maculopathies: These are seen in myopics and certain toxic maculopathies due to drugs (chloroquin, quinine, chlorpromazine)."

21. In the instant case the RMB dated 07.03.2001 had categorically opined to the effect that the disability that the applicant suffered from was aggravated due to stress and strain of service. The Medical Case Sheet annexed to the RMB as issued by the Base Hospital does not mention any contributory causative factors from the side of the applicant for the causation of the said disability. In these circumstances as thus the applicant did not suffer from the disability in question before induction of the applicant into military service and the disability had its onset on 25.06.1997 after a period of 10 years of induction into the military service and in as much as there is nothing known for the cause of the disability, as rightly opined by the RMB the presumption that the disability was aggravated was military service cannot be repelled by the Administrative Authority PCDA(P) Allahabad by opining to the effect that the disability was constitutional in nature without even conducting any further medical examination of the applicant. As held by the Hon'ble Supreme Court in *Ex Sapper Mohinder Singh vs. Union of India & Ors.* and *Secr., Ministry Of Defence & Ors vs Damodaran A.V.(D) Thr.Lrs. & Ors on 20 August, 2009*, the opinion of the Medical Board is to be given due credence and weightage and cannot be undermined by the

Administrative Authority without a further medical examination by the Higher Medical Authority. 23. As has been observed by the Hon'ble Supreme Court vide Para 15 of *Union of India & Anr. Vs. Rajbir Singh* is as under :-

"15. The legal position as stated in Dharamvir Singh's case (supra) is, in our opinion, in tune with the Pension Regulations, the Entitlement Rules and the Guidelines issued to the Medical Officers. The essence of the rules, as seen earlier, is that a member of the armed forces is presumed to be in sound physical and mental condition at the time of his entry into service if there is no note or record to the contrary made at the time of such entry. More importantly, in the event of his subsequent discharge from service on medical ground, any deterioration in his health is presumed to be due to military service. This necessarily implies that no sooner a member of the force is discharged on medical ground his entitlement to claim disability pension will arise unless of course the employer is in a position to rebut the presumption that the disability which he suffered was neither attributable to nor aggravated by military service. From Rule 14(b) of the Entitlement Rules it is further clear that if the medical opinion were to hold that the disease suffered by the member of the armed forces could not have been detected prior to acceptance for service, the Medical Board must state the reasons for saying so. Last but not the least is the fact that the provision for payment of disability pension is a beneficial provision which ought to be interpreted liberally so as to benefit those who have been sent home with a disability at times even before they completed their tenure in the armed forces. There may indeed be cases, where the disease was wholly unrelated to military service, but, in order that denial of disability pension can be justified on that ground, it must be affirmatively proved that the disease had nothing to do with such service. The burden to establish such a disconnect would lie heavily upon the employer for otherwise the rules raise a presumption that the deterioration in the health of

the member of the service is on account of military service or aggravated by it. A soldier cannot be asked to prove that the disease was contracted by him on account of military service or was aggravated by the same. The very fact that he was upon proper physical and other tests found fit to serve in the army should rise as indeed the rules do provide for a presumption that he was disease-free at the time of his entry into service. That presumption continues till it is proved by the employer that the disease was neither attributable to nor aggravated by military service. For the employer to say so, the least that is required is a statement of reasons supporting that view. That we feel is the true essence of the rules which ought to be kept in view all the time while dealing with cases of disability pension."

23. The observations of the Hon'ble Supreme Court in *Ex Sapper Mohinder Singh vs. Union of India & Ors.* Civil Appeal No. 164 of 1993 dated 14.01.1993 in Para 4 thereof are to the effect :-

"4. We have examined the relevant materials and we do not feel satisfied with the plea taken in the counter affidavit. No details of the consultation has been disclosed by the respondent nor it is claimed that the appellant has been re-examined by any higher medical authority. We are not prepared to act on the vague allegations in the counter affidavit referred to above. In view of all the relevant circumstances of the case we are of the opinion that the disability pension assessed at the rate of 40% by the Medical Board, which had examined the appellant, should be respected until a fresh Medical Board examines the appellant again and comes to a different conclusion. Accordingly we direct that for the period 1.8.1989 to 31.1.1993 the appellant shall be paid the Disability Pension at the rate of 40% and it will be open to the authority concerned to have the appellant re-examined by a proper constituted Medical Board for re-assessment of the disability with effect from 1.2.1993."

24. In view thereof, the opinion of the PCDA (P) Allahabad opining that the disability was constitutional in nature and neither attributable to nor aggravated by military service, without giving any reasons for so described in the disability cannot be accepted and thus the impugned letter and given details there are liable to be set aside.

CONCLUSION

25. The applicant is thus held entitled to the grant of the disability element of pension in relation to the disability of "Chronic Cyclitis with Complicated Cataract (RT) Eye (OPTD) (366)" which is assessed @30% which in terms of the verdict of the Hon'ble Supreme Court in ***Cmdr Rakesh Pande vs. Union of India & Ors.*** in Civil Appeal No. 5970/2019 being of a permanent nature and in terms of para 7.2 of Govt. of India, Ministry of Defence letter no. 1(2)/97/I/D(Pen-C) dated 31.01.2001 of duration for life. The applicant is thus held entitled to the grant of the disability element of pension in relation to the disability of "Chronic Cyclitis with Complicated Cataract (RT) Eye (OPTD) (366)" assessed at 30% for life with effect from the date of discharge which is directed to be broadbanded to 50% for life in terms of the verdict of the Hon'ble Supreme Court in ***UOI & Ors. vs Ramavtar*** in Civil Appeal No. 418/2012 and in ***Union of India & Ors. vs. Tarsem Singh 2009(1)***

AISLJ 371, in relation to the arrears shall be confined to a period of three years from the date to institution of the present OA.

26. The respondents are thus directed to calculate, sanction and issue the necessary PPO to the applicant within a period of three months from the date of receipt of copy of this order and the amount of arrears shall be paid by the respondents, failing which the applicant will be entitled for interest @6% p.a. from the date of receipt of copy of the order by the respondents.

Pronounced in the open Court on the ^{21st}..... day of November, 2023.

[REAR ADMIRAL DHIREN VIG]
MEMBER (A)

[JUSTICE ANU MALHOTRA]
MEMBER (J)

/yogita/