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IN THE HIGH COURT OF PUNJAB & HARYANA  
AT CHANDIGARH.

CWP-677-2024  
Reserved on: 25.09.2024  
Pronounced on: 23.10.2024

Union of India and Ors. ....Petitioners

Versus

No. 1518307 Ex Spr Chetan Malik .....Respondent

CORAM: HON'BLE MR. JUSTICE SURESHWAR THAKUR  
HON'BLE MRS. JUSTICE SUDEEPTI SHARMA

Argued by: Ms. Neha Jain, Advocate  
for the petitioners.

Mr. Navdeep Singh, Advocate with  
Mr. Ajay Sheoran, Advocate and  
Mr. Roopam Atwal, Advocate  
for the respondent.

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**SURESHWAR THAKUR, J.**

1. Through the instant writ petition, the petitioner herein-  
Union of India, prays for setting aside of the order dated 22.04.2022  
(Annexure P-5), as passed by the learned Armed Forces Tribunal  
concerned, whereby the claim of the respondent for the grant of  
disability pension was allowed.

**Factual Background**

2. The respondent was enrolled in the Army on 20.01.2003  
and was discharged from service on 31.10.2019 (AN), at his own  
request on compassionate ground before completion of terms of

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engagement under Army Rule 13(3) item III (iv) of Rules 1954 in medical category S2(P)H1A1P2(P)E1 due to the disabilities (i) Severe Depressive Episode and (ii) Type -2 Diabetes Mellitus. At the time of discharge from military service, his disabilities were compositely assessed @ 50% for life, however, the same were held to be neither attributable to nor being aggravated by military service. Accordingly, the claim of the respondent for grant of disability pension was rejected vide letter dated 04.11.2019 (Annexure P-1). The respondent filed first appeal before the Appellate Committee. However, the same was rejected vide letter dated 05.03.2020 (Annexure P-2). Thereafter, the respondent assailed order dated 05.03.2020 (Annexure P-2) before the Second Appellate Committee, wherein, the Second Appellate Committee vide order dated 15.03.2021 (Annexure P-3) accepted the first disability i.e. '*Severe Depressive Episode*' as aggravated to military service @ 40 % for life but rejected the second disability i.e. '*Diabetes Mellitus Type II*' as neither aggravated nor being attributable to military service.

3. Feeling aggrieved, the respondent filed O.A., before the learned Armed Forces Tribunal concerned, whereby he cast a challenge to the above passed rejection order. The said O.A., became allowed vide order dated 22.04.2022. The operative part of the said order is extracted hereinafter.

*“It is proved beyond all reasonable doubt that at the time of enrolment of the applicant in military service, this type of disease / disability did not exist. On the other hand*

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*the applicant incurred the disabilities during service.*

*Therefore, we are also not satisfied with the findings that the disability is neither attributable to nor aggravated by military service recorded by the Release Medical Board in its report for the reason that when enrolled in the Army, he was not suffering from any disease.*

*The present rather is a case which is squarely covered in favour of the applicant by the judgment of the Hon'ble Supreme Court in **Dharamvir Singh's case** cited supra. Considering the law laid down by the Hon'ble Supreme Court and also the attending circumstances, the rejection of the claim of the applicant for disability pension is neither legally nor factually sustainable. The applicant, therefore, is entitled to the grant of disability pension which includes disability element and service element both."*

4. Feeling aggrieved from the aforesaid order as passed upon the O.A. (supra), by the learned Armed Forces Tribunal concerned, the petitioner-Union of India has filed thereagainst the instant writ petition before this Court.

**Inferences of this Court.**

5. Before proceeding to make an effective adjudication upon the present writ petition, a useful assistance for determining whether the befallment of any disease vis-à-vis any member of the defence personnel, but post his being enrolled in the army, despite at the initial stage, upon his becoming enlisted, as a member of the combatant defence establishment, rather the same remaining undetected, yet the apposite eruption, thus post enlistment hence being construable to be

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either congenital or being construable to become aggravated or being attributable to military service, thus is acquired, from, the principles set forth in the judgment rendered by the Hon'ble Apex Court, in case titled as ***Dharamvir Singh Vs. Union of India***, reported in **(2013) 7 SCC 316**. The relevant paragraphs of the said verdict are extracted hereinafter.

*29. 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)].*

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*(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.*

30. We, accordingly, answer both the questions in affirmative in favour of the appellant and against the respondents.

6. An incisive reading(s) of the above extracted principles, though pointedly declare, that when a disability becomes entailed upon any member of the combatant defence establishment, and which is to the extent of 20 % or over, thereupon, though any such disabled member is required to be invalided from the Army, but yet he is required to be assigned the benefit of disability pension.

7. Nonetheless, the assignment of disability pension to any member of the combatant defence establishment, who becomes entailed with a disability in a quantum of 20 % or more, but imperatively requires a declaration from the Medical Board, rather candidly pronouncing that the said attained disability being attributable to or becoming aggravated by military service. The said declaration becomes

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enjoined by the “*Entitlement Rules for Casualty Pensionary Awards, 1982*” of Appendix-II (Regulation 173).

8. Furthermore, though thereins a presumption is assigned vis-à-vis the sound physical and mental health of any member of the defence establishment concerned, especially when at the stage of his becoming enrolled, there is no note or record about his becoming beset with any disease. Moreover, though thereins there is also a further presumption, that when any deterioration theretos, thus occurs subsequently, thereby the said happening of deterioration(s) or onsettings of any disease, rather is to be presumed to be a sequel of his rendering service as a member of the defence establishment. Imperatively, the onus for proving the non endowments qua benefits (supra) vis-à-vis the concerned, but is rested on the employer, and in case, the said onus remains un-discharged, thereupon, the claimant becomes entitled to receive disability pension. Moreover, all the facts and circumstances attendant to the rendition of service by the concerned, are to be closely scrutinized, thus for declaring whether the onset of any disease vis-à-vis the concerned, is a sequel qua renditions of military service and/or the same being aggravated by or being attributable to military service.

9. Be that as it may, thereins becomes also set forth a further principle(s) that yet there can be denial of disability pension to the concerned, but only upon :

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a) At the time of acceptance of the concerned in military service, some notings becoming recorded by the Medical Board vis-a-vis his being beset with a disease which however, becomes concluded to be yet not rendering him unfit to become enlisted.

b) Any further deterioration thereof, may also subsequently become concluded by the Medical Board, to not arise from rendition of military service nor being attributable to military service, rather the same being a congenital disease.

10. Further, if the medical opinion holds that the disease could not have been detected on medical examination of the concerned being made, thus prior to his becoming enlisted in service, thereupon, the same will not be deemed to have arisen during service, yet in the situation (supra), the Medical Board is required to state the reasons for so concluding.

11. Moreover, it is also declared in supra, that 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".

12. Therefore, it has to be now determined whether in terms of the above principles, whether at the time of enlistment of the present respondent in the Army, thus after a preliminary medical examination being made vis-a-vis his health, thus a note became recorded about

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some disease besetting him and/or whether some note became appended that the said disease was in a dormant stage. Moreover, it is also required to be determined, from the facts at hand, whether there is a causal nexus inter-se the eruption of the disease, and/or the onsettings thereof, on to his person, thus post the enrollment of the present respondent taking place, vis-a-vis the active renditions by him of military service, wherebys, this Court may conclude that the onset of the disease but rather was a sequel of his rendering service in the Army and as such was attributable or became aggravated by his rendering military service.

13. In addition, it is also required to be gathered from the records, whether the Medical Board, did initially proceed to make a detailed incisive antecedental check, particularly appertaining to the advent of the disease, through employments of State of Art medical techniques, thus unveiling the block chain genetic connection, wherefroms, rather the disease became sourced. Moreover, if the said employment fails. Resultantly, therebys it may become concluded qua eruptions thereof, thus subsequent to the apposite enlistment taking place, rather was not congenital but owed its origin to rendition of military service besides it being attributable to or becoming aggravated by performance of military service. Contrarily, if the supra employed techniques at the stage of apposite enlistment taking place, thus by the Medical Board concerned, leads to a conclusion, that there are rather dormant incidences of any disease, but yet the said dormant disease not

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prohibiting the enlistment of any personnel in the army, navy or air force. Resultantly the subsequent active detection/eruption thereof, during the course of rendition of military service, but would naturally lead to a well conclusion by the Medical Board, that its active eruption but became sourced from an effective causal genetic connection whereby there would be denial of disability pension.

14. However, now in the said endeavour, this Court is required to be extracting the contents of the opinion, as became recorded by the release medical board.

### **Part VI**

#### **Statement of Case**

##### ***1. Chronological list of the diseases/disabilities***

*Individual is not entitled for disability pension for the disability (i) SEVERE DEPRESSIVE EPISODE and (ii) TYPE-2 DIABETES MELLITUS. Opinion of assessment by the Board is recommendatory in nature and is subject to acceptance by Pension sanctioning authority.*

#### **JUSTIFICATION**

*(i) SEVERE DEPRESSIVE EPISODE- As per service details in para 1 of part 1 of AFMSF-16 and para 54 of Chapter VI of GMO 2008 disability is neither attributable nor aggravated due to the service as the disease was detected while individual was serving in Peace – Roorke (UK).*

*(ii) TYPE - 2 DIABETES MELLITUS :- As per para 26*

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*attributability nor awarded aggravation as it is a life style disease which depends upon interplay of multiple factors like the dietary habits of the individual, physical activities pertained to the individual and genetic/familial predisposition. Also the onset of disease occurred while service in peace Amritsar (Pb.).*

15. A reading of the records reveals that at the time of the apposite enlistment taking place rather no note became made in terms of the principles (supra) declared by the Hon'ble Apex Court in case titled as ***Dharamvir Singh Vs. Union of India (supra)*** by the Medical Board, that some disease which however, did not forbid the present respondent, to become enlisted in the Army, did make its preliminary onsettings. If so, the declaration of law in judgment (supra) that therebys there is a presumption that the incurring of the said disease was a sequel of rendition of service, is required to be favourably endowed vis-a-vis the respondent. Though the said presumption is rebuttable but the onus to lead evidence to rebut the said presumption became cast upon the petitioner. However, the said cast evidence adducing discharging onus vis-a-vis the respondent, rather for cogently rebutting the said presumption, but naturally also did cast an onerous duty also upon the Medical Board, to engage itself in the endeavour of unearthing, through employments of the State of Art block chain genetic causal connection technique(s), wherebys it may became unraveled that the onsetting of the disease onto the army personnel, became sourced from antecedental genetic family history. Moreover,

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therebys it was also required to be stated in the medical opinion, that the disease but for a well formed reason rather was a congenital disease and became neither aggravated by nor became attributable to military service.

16. However, the opinion (supra) though assigns culpability to the present respondent vis-a-vis the generation of '*Type II Diabetes Militus*' inasmuch as, fixes the cause of the disease to his ill dietary habits, and lack of physical activities. However, unless evidence became adduced that he consumed prohibited food or was never engaged in physical activities, thereupon, the said eruption/causes cannot be fixed onto the present respondent. Since the said evidence is not stated to be adduced nor is discussed, therebys the fixing of the said causes onto the present respondent rather by the medical board, thus appears to be made most surmisingly. In addition, though it is stated that the onset of the disease arose from genetic/familial predisposition. However, when as stated (supra), no evidence to rebut the presumption (supra) has been led by the petitioner, therebys, this Court is constrained to give no weightage to the supra opinion of the medical board. Conspicuously, no credence can be assigned to the supra ill informed reason, besides therebys the onsetting of the disease cannot be said to be a sequel of antecedental genetic family history. Contrarily, it is required to be declared to arise from rendition of military service. In addition, it is required to be declared to be attributable or becoming aggravated by rendition of military service by the present respondent.

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17. Lastly, though it is stated therein that the disease occurred while service became performed by the defence personnel rather in a peace area, but since there is no express mandate in the relevant regulations, which makes the onsettings of the disease in a peace area, to not beget a further sequel that as such, it's onsettings did not arise from the rendition of military service nor it became aggravated by rendition of the military service. In consequence, the lack of the said express mandate in the regulations, does constrain this Court to conclude, that even if the onsettings of the said disease upon the present respondent occurred in a peace area, thereby, the said onsettings are to be declared to become aggravated by or being attributable to rendition of military service.

**Final Order of this Court.**

18. In aftermath, this Court finds no merit in the writ petition and with observations above, the same is dismissed.
19. The impugned order, as passed by the learned Tribunal concerned, is maintained and affirmed.
20. Disposed of alongwith all pending application(s), if any.

**(SURESHWAR THAKUR)**  
**JUDGE**

**(SUDEEPTI SHARMA)**  
**JUDGE**

**23.10.2024**  
kavneet singh

KAVNEET SINGH  
2024.10.29 17:23  
I attest to the accuracy and  
integrity of this document

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| Whether speaking/reasoned | : | Yes/No |
| Whether reportable        | : | Yes/No |