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* **IN THE HIGH COURT OF DELHI AT NEW DELHI***Reserved on: 13th August, 2025**Pronounced on: 16th October, 2025*+ **W.P.(C) 4658/2019****PRAKASH SINGH**

.....Petitioner

Through: Mr. Rohit Kumar Singh, Mr. Abhimanue Shrishtha, Mr. Raj Lakshmi Singh and Ms. Vidushi Srivastava, Advocates.

versus

UNION OF INDIA AND ANR.

.....Respondents

Through: Mr. Rajesh Gogna, CGSC with Mr. Shivam Tiwari, Ms. Rebina and Ms. Priya Singh, Advocates.

CORAM:**HON'BLE MR. JUSTICE AMIT SHARMA****JUDGMENT****AMIT SHARMA, J.**

1. The present petition under Article 226 of the Constitution of India seeks the following prayers:-

“a) Issue an appropriate Writ or an order/direction to the Department of Health and Family Welfare to reimburse the Petitioner's claim of Rs. 10,03,636 (Rupees ten lakh three



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thousand six hundred and thirty six only) at the Dollar rate prevalent in 2011 only; and

b) pass any such other order/s as this Hon'ble Court may deem fit in the facts and circumstances of the case.”

2. The present petition has been filed by the petitioner, a retired Indian Police Service Officer, raising grievance that he has been denied reimbursement of medical expenses in USA under emergency condition. He challenges the stand of the respondent, who has denied his claim on the ground that retired government officials/personnel are not eligible to get treatment abroad either under Central Government Health Scheme (CGHS)¹ or under Central Services (Medical Attendance) Rules, 1944².

3. The case of the petitioner is as under: -

3.1. The Petitioner, an IPS Officer, superannuated on 31.01.1994 as Director General, BSF. He is also recipient of Padma Shri Award in year 1991 for his contribution to Civil Service. He has also been awarded Police Medal for Meritorious Service and Police Medal for Distinguished Services by the Government of India.

3.2. The Petitioner was visiting his son in Chicago, USA during 15th June, 2011 to 5th July, 2011. On 4th July, 2011, he had to be admitted in emergency at Rush University Medical Centre, Chicago, USA with

¹ For short, “CGHS”

² For short, “CS (MA) Rules”



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complaint of “slurred speech, altered mental status and fever”. He remained admitted in the said hospital from 5th July, 2011 to 8th July, 2011. He was diagnosed with “herpes simplex encephalitis”. During that period, he had to incur USD 20,449.00 (INR 10,03,636 (\$ 49.08)) on hospital bills and other medical expenses. (Emergency Medical Treatment Certificate @ Pg. 25 to 27)

3.3. After returning to India, he submitted his claim alongwith all the bills to the Director General, Medical & Health Services, Union of India, seeking reimbursement, but his claim was denied on the ground that “facility of treatment abroad is available under Rule 11 of CCS (MA) Rules for serving Central Government employees. However, pensioners are not eligible to get treatment abroad neither under CGHS nor under CS (MA) Rules”.

3.4. Therefore, even though it was admitted by the Respondents that the Government Servants are entitled to “treatment abroad”, but the Petitioner was denied the said entitlement on the ground that he is “retired”. Such a distinction, on the face of it, is violative of Articles 14 & 21 of the Constitution. As such, the rules do not draw any such distinction between “serving” and “retired” government servants.

3.5. There are various judgments in which it has been held that no distinction can be made between the “serving” and “retired” government servants, while considering their entitlement for medical



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treatment. In fact, in another set of judgments it has been held that no fetters of any kind be imposed in providing medical facility to the retired government servants.

3.6. In the Counter Affidavit filed on 02.07.2019, the Respondents have taken the same stand. They have also filed Additional Affidavit on 11.10.2019, placing on record the Guidelines and the Office Memorandum, pertaining to the entitlement of a pensioner CGHS but none of these Guidelines or Office Memorandum address the issue of medical treatment availed abroad, especially in an emergency situation.

3.7 The government servants (serving or retired) are entitled to receive medical treatment or the reimbursement under the provisions of CS (MA) Rules. Rule 11 of the CS (MA) Rules provides for the medical treatment abroad to the Government Servant, obviously, with prior permission, but Rule 11(7) of the Rules, also provides for the post facto approval, which would be applicable in case the treatment is received in an emergency. The Respondents having admitted that the government servant's entitlement to receive medical reimbursement is under the provisions of the CS (MA) Rules, and bare reading of the said Rules show that there can't be any distinction in serving or retired government servant. Therefore, the reliance on any scheme, guideline or office memorandums, making arbitrary classification between serving and retired government servants, is misconceived, including in



case of treatment abroad. It is settled that the scheme/guideline/OM cannot override/go beyond the statutory provisions. A similar argument of the Union of India has been rejected by the Hon'ble Supreme Court in **Shiva Kant Jha v. Union of India**³.

3.8. The provisions of Rule 11(7) of CS (MA) Rules do not make any distinction between the serving and retired government servant even in the case of reimbursement for medical treatment abroad, still the Respondents in their Written Submissions, without placing on record any material tried to justify their denial, by claiming that “the petitioner’s case does not meet these criteria” provided under Rule 11(7) of the CCS (MA) Rules.

3.9. In this regard, the attention of this Hon'ble Court was drawn to the Judgment of the Hon'ble Supreme Court in **Mohinder Singh Gill v. Chief Election Commr.**⁴, wherein the Hon'ble Supreme Court was pleased to hold as under:

“8. The second equally relevant matter is that when a statutory functionary makes an order based on certain grounds, its validity must be judged by the reasons so mentioned and cannot be supplemented by fresh reasons in the shape of affidavit or otherwise. Otherwise, an order bad in the beginning may, by the time it comes to court on account of a challenge, get validated by additional grounds later brought out. We may here draw attention

³ (2018) 16 SCC 187

⁴ (1978) 1 SCC 405



to the observations of **Bose, J. in Gordhandas Bhanji [Commr. of Police, Bombay v. Gordhandas Bhanji⁵** :

“Public orders, publicly made, in exercise of a statutory authority cannot be construed in the light of explanations subsequently given by the officer making the order of what he meant, or of what was in his mind, or what he intended to do. Public orders made by public authorities are meant to have public effect and are intended to affect the actings and conduct of those to whom they are addressed and must be construed objectively with reference to the language used in the order itself.”

Further reliance is placed on the following judgments: -

- (i) **Mohinder Singh Gill v. Chief Election Commr⁶,**
- (ii) **Surjit Singh v. State of Punjab⁷,**
- (iii) **Devindar Singh Shergil v. State of Punjab⁸,**
- (iv) **Shiva Kant Jha v. Union of India⁹,**
- (v) **Narendra Pal Singh v. Union of India¹⁰,**
- (vi) **V.K. Jagdhari v. Union of India¹¹,**
- (vii) **Shyama Malhotra v. Union of India¹²,**
- (viii) **Union of India v. R. Rangarajan¹³,**
- (ix) **Suraj Bhan v. Govt. of NCT of Delhi¹⁴.**

⁵ 1951 SCC 1088 : AIR 1952 SC 16]

⁶ (1978) 1 SCC 405 (para 8)

⁷ (1996) 2 SCC 336 (Paras 3-4, 11-12)

⁸ (1998) 8 SCC 552 (Para 3, 5-6)

⁹ (2018) 16 SCC 187 (paras 2-4, 16 to 19)

¹⁰ (1999) 79 DLT 358 (para 1-2, 5)

¹¹ (2005) 125 DLT 636 (paras 1-5, 12 -17)

¹² (2007) 138 DLT 210 (Paras 1-3, 6-9)

¹³ 2008 SCC OnLine Mad 709 1, 13-15, 29)

¹⁴ 2010 SCC OnLine Del 1109 (paras 2, 6-8)



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4. The case of the respondent Nos.1 and 2 is as under: -

4.1. That the petitioner has filed a petition seeking reimbursement of ₹10,03,636/- for medical expenses incurred during his overseas travel. The petitioner claims that these expenses were necessary for his medical treatment. However, the existing regulations explicitly prohibit such reimbursement for Central Government Health Scheme (CGHS) pensioners, which forms the crux of the respondents' argument.

4.2. That according to M.F. File No. 12/165/90-Co-Ord dated 21/01/1991, treatment outside India is not permissible for CGHS pensioners. This regulation has been communicated to the petitioner through letters dated 29/11/2011 and 31/07/2018 from the Ministry of Health & Family Welfare. The policy clearly states that pensioners holding valid CGHS cards are not allowed to seek medical treatment outside India.

4.3. Further, Rule 11 of the Central Service (Medical Attendance) Rules, 1944 (CS(MA) Rules, 1944) outlines specific conditions under which “serving government employees” can avail medical treatment abroad. This rule requires prior approval from the competent authority and is applicable only under certain circumstances, such as treatments not available in India, complex



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high-risk medical procedures, and other specified medical conditions. Rule 11(2) and Rule 11(3) provide the framework for applying for such treatments, whereas Rule 11(7) allows for post facto approval under exceptional circumstances beyond the control of the government servant, provided all other conditions are met.

4.4. The petitioner's case does not meet these criteria. As a CGHS pensioner, the petitioner is not eligible for treatment abroad. Additionally, the petitioner did not seek prior approval before obtaining the treatment, nor did he demonstrate that the circumstances were beyond his control as required by Rule 11(7).

4.5. In response to the petition, the respondents acknowledge the petitioner's ailment but emphasize the established regulations that prohibit medical treatment outside India for CGHS pensioners. They maintain that the petitioner should have obtained travel insurance before his departure, which would have covered his medical expenses abroad. The CGHS rules are designed considering the resources available to the government, and current policies do not accommodate treatment abroad for pensioners.



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4.6. The petitioner has cited judgments, including **Shiva Kant Jha vs. UOI**¹⁵, and **Surjit Singh vs. State of Punjab & Ors**¹⁶, to support his case. However, the respondents argue that these judgments are not applicable. In **Shiva Kant Jha vs. UOI**, the petitioner received emergency treatment in a non-CGHS empaneled hospital within India. This situation differs significantly from the current case, where the petitioner sought treatment in the USA without prior approval. Similarly, in **Surjit Singh vs. State of Punjab**, the petitioner was a serving employee of the Punjab government, and the reimbursement was handled by his parent department, which is not relevant to the petitioner's status as a pensioner.

5. Heard learned counsel for the parties and perused the records.

6. During the course of the hearing of the present petition in pursuance of order dated 27.08.2019, status report dated 27.09.2019 was filed on behalf of respondents placing on record amendments/new policies governing the retired employees in so far as their medical facilities in India and abroad are concerned. In the status report, it was mentioned that insofar as the medical facilities for treatment in abroad by a pensioner are concerned, there has been no change in the rule position and such treatment in abroad by pensioners in foreign countries are covered under neither CGHS or CS (MA) Rules. The

¹⁵ (2018) 16 SCC 187

¹⁶ (1996) 2 SCC 336



relevant rules (CS(MA) Rules) on which the petitioner relies upon are as under: -

“Rule 11 TREATMENT OUTSIDE INDIA

Rule 11 (1) A Government Servant shall be eligible to obtain medical treatment outside India, as the case may be, to claim reimbursement of the cost of medical treatment obtained inside or outside India in accordance with the provisions of this rule.

Rule 11 (2) A Government Servant desirous of availing of medical treatment outside India may make an application through the Department/Ministry to which the Government servant is attached to the Standing Committee established under this rule in the form specified by the Standing Committee.

Rule 11(3)- A Government servant desiring to avail of medical treatment outside India for himself or for a member of his family for any treatment specified in the Table below shall, subject to the other provisions of this rule, be eligible for medical treatment outside India.

Table

- (1) Complex/high risk Cardio Vascular Surgery cases for treatment at Centres with extensive experience;
- (2) Bone marrow Transplant;
- (3) Complex Medical and Oncological Disorders, such as leukaemia and Neo-plastic conditions;
- (4) Complex high risk cases in Micro Vascular and Neuro Surgery for treatment at Centres with extensive experience;
- (5) Treatment of extremely complex ailments other than those mentioned above which in the opinion of Standing Committee can only be treated abroad and fall in the high risk category.

Rule 11(4) It shall be competent for the Central Government to review from time to time the list of treatment facilities as specified in the Table to sub-rule (3) and make such additions or deletions as it may deem fit by notification in, the Official Gazette.



Rule 11(5) The Central Government may for purposes of this rule, constitute a¹. Standing Committee consisting of:

- (a) the Director-General of Health Services in the Ministry of Health in the Central Government,
- (b) the Director-General of Armed Forces Medical Services.
- (c) the Director-General of the Indian Council of Medical Research, and
- (d) the Joint Secretary in the Ministry of Health and Family Welfare (Convener), for purposes of considering and recommending to the Central Government cases for medical treatment outside India.

Rule 11(6) On receipt of an application for medical treatment outside India, the Standing Committee may, it after due consideration, satisfied that the ailment or treatment can be treated only outside India, issue a certificate to the concerned Department or Ministry to which the applicant Government servant is attached conveying its approval of the application and the concerned Department or Ministry shall, on the strength of that certificate incur necessary expenditure in getting the Government servant concerned or the member of his family treated outside India in accordance with the procedure laid down by the Standing Committee.

Rule 11 (7) It shall be competent for the Central Government to authorize reimbursement of expenditure on medical treatment obtained outside India, if it is satisfied that the prior approval could not be obtained by the Central Government servant due to circumstances beyond control;
Provided that the Government servant fulfils all other conditions relating to medical treatment outside India under this rule.

Rule 11 (8)- The Standing Committee may, if it is satisfied that in the interest of the Government servant or the member of his family obtaining treatment abroad it is essential so to do, recommend one attendant to accompany the Government servant or the member of his family, as the case may be, and the expenditure so incurred shall also be eligible for reimbursement.



Rule 11 (9)- Where the Standing Committee, on receipt of an application for medical treatment outside India consider that adequate facility for treatment of the ailment sought to be treatment is available in any medical institution within India, it shall record such a finding and authorize treatment of such ailment in such medical institution within India whereupon the cost of such treatment shall be reimbursed.

Rule 11 (10) For purposes of sub-rule(9), the Ministry of Health in consultation with the Standing Committee shall, from time to time, notify the names of such institutions along with the ailments and the types of treatment available in such institutions.

Rule 11 (11) The scale of expenditure and the eligibility for treatment for which a Government servant or a member of his family shall be entitled, shall be identical to the scale of expenditure and the eligibility of an official of the Indian Foreign Service of the corresponding grade in the Ministry of external Affairs under any Assisted Medical Attendance Scheme for the time being in force.”

7. It is pertinent to note that the applicability of the said Rules has been prescribed in the following manner: -

“1. Short title and extent of application. —(1) These rules may be called the Central Civil Services (Medical Attendance) Rules, 1944.

Note 1.—Persons in railway service are exclude from the purview of these Rules [x xx]. Railway employees on deputation to various other offices under the Central Government are, however, governed by these rules.

Note 2.—These rules do not apply to :

- (i) Defence Services personnel.
- (ii) Government servants who are on leave or deputation abroad.
- (iii) Non-Gazetted Government servants, including Group D, and gazetted Government servant (other than Central Services Group A



(drawing pay less than Rs. 750 p.m. stationed in or passing through Calcutta for whom special arrangements for medical attendance and/or treatment have been made.

(iv) Retired Government Officials.

(v) Non-officials sent on deputation abroad.

(vi) Government servants in Delhi/New Delhi who are governed by the Contributory Health Service Scheme while in New Delhi.

(vii) Officers of the All India Services and other person who are governed by the All India Services (Medical Attendance) Rules, 1934; and

(viii) India-based officers and staff serving in Mission abroad, who are governed by the Assisted Medical Attendance Scheme.

Note 3.—These rules apply to :

(i) All Central Government servants who are on leave preparatory to retirement, or on refused leave taken immediately after the date of compulsory retirement or on the expiry of an extension of service;

(ii) Officers of the General Administrative Reserve :

(iii) Government pensioners on their re-employment under the Central Government, irrespective of the service to which they belonged at the time of retirement ;

(iv) Defence Accounts Department personnel ;

(v) Civilians paid from Defence Service Estimates, except those mentioned in para 5 of the Ministry of Defence letter No. 9(4)54/8278/D (Civ-II), dated 18-7-1957, read with Ministry of Defence Letter No. 13 (53)/3177/D (Civ-II), dated 19-3-1963.

(vi) Central Government servants on terminal leave ;

(vii) A probationer;

(viii) Apprentices who are in the whole time service of Government;

(ix) [* ****]



(x) Police personnel (including personnel of the Assam Rifles) subject to the conditions specified in the Ministry of Health O.M. No. F. 13-10/53-LSG (M), dated the 18-3-1954; and

(xi) All State Government servants on deputation with the Central Government.

Note 4: In regard to medical concessions, the Central Government servants, while on deputation to a State Government will be governed by the rules of the State Government concerned. The State Government may, however, if they so desire, apply the Central Government Rules to such deputationists.

Note 5: The concessions granted under these rules to Government servants are applicable to their families as well subject to such conditions, or exceptions, as specified in these rules or Section 4 of the Compilation.”

(emphasis supplied)

8. Learned counsel appearing on behalf of the petitioner has vehemently placed reliance on the judgment of learned Division Bench of Madras High Court in **Union of India v. R. Rangarajan & Another**¹⁷, and in particular, on the following paragraphs: -

“29. What then is the upshot of the above discussion ?

Keeping in view the relevant Rules and Orders issued from time to time and also the overwhelming sentiments expressed in various pronouncements of the Supreme Court and different High Courts, our conclusions are as follows :

(1) Though the recommendation of the 5th Pay Commission for extending the benefits available to the employees under CS (MA) Rules, 1944, appears to have been accepted on principle, the modalities have not been worked out and CS (MA) Rules have not been formally made applicable to the retired employees.

¹⁷ 2008 SCC OnLine Mad 709



(2) Technically speaking, the benefit of CGHS for reimbursement of expenses incurred as indoor patient can be availed by a retired employee only if he becomes or continues as a member by making contribution.

(3) Denial of CGHS Card to a retired employee on the ground that he has retired from a place not covered under CGHS is improper.

(4) Though theoretically a retired employee can opt for treatment as indoor patient in a distant place covered by CGHS, for all practical purposes such a possibility is extremely remote. In other words, for all practical purposes, retired employees residing in remote areas are deprived of the opportunity of availing benefits of CGHS as indoor patient.

(5) The payment of monthly allowance of Rs.100/- to retired employees is only to provide for day-to-day treatment, where outdoor facilities are not available. However, payment of such allowance cannot be a ground to deny the benefit of reimbursement for medical expenses incurred as indoor patient.

(6) Though right to live or lead the life, particularly after retirement, can be considered as a Part of Article 21 of the Constitution, the content and extent of such right would depend upon various factors.

(7) Denial of benefits contemplated under CS (MA) Rules or CGHS to retired employees on the ground that such Rules are not applicable or on the ground that the retired employees are residents of areas not covered by CGHS, is prima facie contrary to the spirit of Articles 14 and 21 of the Constitution.

(8) The recommendations of the 5th Pay Commission and the subsequent policy decision of the Ministry of Health as in the Office Memorandum dated 5.6.1998 are reasonable, deserving acceptance and implementation unless there are any insurmountable hurdle.

(9) The various retired employees had undergone the expensive treatment as indoor patients at a time when the normal understanding was the applicability of CS (MA) Rules to retired employees as per Office Memorandum dated 5.6.1998 and thus all such persons had at least a legitimate expectation of being reimbursed. All efforts should be



made to fulfill such legitimate expectation, if not as a matter of absolute legal right, at least as a matter of grace.

31. It has to be remembered that keeping in view such difficulty on the part of the retired Government employees, 5th Pay Commission had rightly recommended that the facilities available similar to CS (MA) Rules, can be made available to such persons. **It is no doubt true that such Rules are yet to be amended and Note-2 excludes the applicability of such Rules to the retired employees. We are conscious of the legal position that the High Court in exercise of jurisdiction under Article 226 of the Constitution, cannot direct that a particular Statute or particular statutory Rule should be enforced. However, since such recommendations had been made at a very distant point of time by 5th Pay Commission and since as a matter of policy the Ministry of Health and the Department of Pension and Pensioner's Welfare had no objection, or rather had agreed to the extension of such facility to the retired Government employees, a direction can be issued to the Central Government to consider the said aspect and to extend the facilities available either under CGHS or CS (MA) Rules, to the unfortunate group of pensioners who per force have to live in an area coming outside the purview of CGHS so that in case of hospitalisation and treatment as an indoor patient in respect of serious diseases contemplated in CS (MA) Rules or CGHS, a reasonable reimbursement at par with CGHS or CS (MA) Rules, as the case may be, can be made available.**

32. We have thought it fit to issue the aforesaid direction keeping in view the observation of the Supreme Court and other Courts in several cases that right to health care is a fundamental right recognised under Article 21 and also with a view to ensure equality between the retired employees, who are residing in and around the CGHS covered areas and those who are residing in places which are far-off from CGHS covered areas. Such appropriate decision should be taken as expeditiously as possible, preferably within a period of six months from the date of the present di-rection.

33. We further direct that purely as a matter of legitimate expectation or even grace, if not as a matter of right, the claim for reimbursement made by various applicants should be allowed in the manner indicated by the



Tribunal, as we feel the Tribunal by giving such directions has rendered substantial justice and, in exercise of jurisdiction under Article 226 of the Constitution, we are not inclined to interfere with such orders which have the effect of advancing the cause of substantial justice and which have the effect of abjuring the vice of discrimination between the retired Central Government employees who are covered under CGHS by fortunately and fortuitously residing in areas covered under CGHS and their less fortunate brethren who after retirement have settled down in places far away from the areas covered under the CGH Scheme. Such reimbursement should be effected within a period of sixty days from the date of receipt of the present order. The question of any deduction required to be made towards contribution for availing the facility of CGHS., is left to the discretion of the concerned Department.”

(emphasis supplied)

9. Attention of this Court was also drawn to the following paragraphs wherein analysis was made by the learned Division Bench with regard to the reading of the CS(MA) Rules, which read as under: -

“13. On a careful reading of the CS (MA) Rules and the CGHS and the various Office Memorandums issued by various Ministries from time to time, the following picture emerges :-

(1) A person in employment under the Central Government has the benefit of CS (MA) Rules, 1944, and can have the benefit of CGHS and similar benefits given by any other Department depending upon the place of posting. There is no difficulty relating to any Central Government employee relating to treatment as indoor or outdoor patient.

(2) The CS (MA) Rules, 1944 are not applicable to the retired employees by virtue of Note No.2(iv) of Rule 1 of CS (MA) Rules.

(3) Even though V Pay Commission had made a strong recommendation for extending the medical facilities contemplated under the CS(MA) Rules, 1944 to the retired employees and even though in principle the Ministry of Health and Family Welfare and



even the Department of Pension and Pensioners' Welfare seem to have accepted such recommendation, the modalities, as suggested by the Health Ministry, are yet to be worked out and no final decision appears to have been taken.

(4) A person belonging to the Posts and Telegraphs Department is entitled to medical facilities contemplated by the Department; a retired employee can avail of indoor and outdoor facilities available under CGHS, provided he becomes a member and makes the contribution.

(5) Where there is no CGHS facility available for outdoor treatment, a retired employee can avail monthly allowance of Rs.100/- in order to meet day-to-day medical expenses. Similarly he can avail of treatment as indoor patient at the nearest CGHS approved hospital, provided he opts for it and makes some contribution.”

(emphasis supplied)

10. The aforesaid observations of learned Division Bench notes that although recommendations have been given with respect to the applicability of the CS (MA) Rules to the pensioners, however, till date the same have not been made applicable to them. It is pertinent to note that the issue before this Court is in respect of applicability of Rule 11(7) of the CS (MA) Rules for reimbursement of expenses incurred outside India in availing medical facilities for treatment. In this regard, it is already noted hereinabove, that various OMs have been placed on record by the respondent, including CGHS Rules wherein it is clearly stated that such reimbursements are neither covered under the CGHS nor the CS(MA) Rules. The judgments relied upon by the petitioner relate to cases where there have been certain anomalies with respect to the retired pensioners on the ground that they retired from a place not covered under CGHS. There is no doubt with respect to legal principle that the State has a Constitutional obligation to bear the medical expenses of



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the Government employees while in service and also after the retirement. However, certain policy decisions have been taken by the Government creating a distinction between serving Government employees and retired Government employees with respect to aspect of reimbursing medical expenses incurred abroad. It is pertinent to note that the petitioner has not challenged the aforesaid policy in the present petition and the prayer is only with respect to reimbursement of his expenses incurred by him in availing medical facilities for treatment abroad. Needless to state that the same would be reimbursed as per the extant policy under the CGHS.

11. In these circumstances, this Court is of the considered opinion that the relief sought for in the present petition cannot be granted.

12. In view of the above, the present petition is dismissed and disposed of accordingly.

13. Pending application(s), if any, also stand disposed of.

14. Judgment be uploaded on the website of this Court *forthwith*.

AMIT SHARMA
JUDGE

OCTOBER 16, 2025/kr/ns