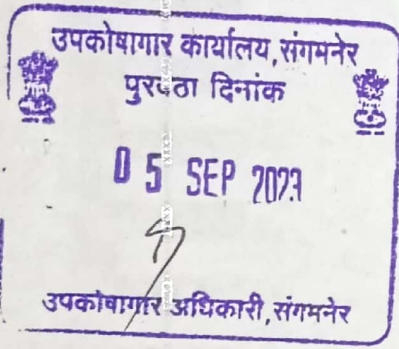


महाराष्ट्र MAHARASHTRA

2023

60AA 345595



मुद्रांक विक्री बाबतची नोंद वही अनुक्रमांक 99308 दिनांक 21/9/2023

प्रतिज्ञापत्रासाठीचे कारण

मुद्रांक विकत घेणाऱ्याचे नांव व रहिवासी पत्ता

हस्ते असल्यास नाव व पत्ता

मुद्रांक विकत घेणाऱ्याची सही

परवानाधारक मुद्रांक विक्रेत्याची सही

व परवानाधारक तसेच मुद्रांक विक्रीचे ठिकाण/पत्ता-

Principal

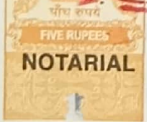
Surya College of Nursing
Machhi Hill, Ashvi BK, Tal. Sangamner
Dist. Ahmednagar (MS) Pin-413714

Dr. मंगेश कातोरे

श्री. नितीन धिवाजी कुमठेकर

(मु.वि.प.क्र. 90809/२८)

9634, विश्वास झेरॉक्स, संगमनेर



MEMORANDUM OF UNDERSTANDING (MOU)

This Memorandum of understanding is made between following parties:

1. Jagruti Psychiatric Center

A/p Manjari farm, Pune Solapur highway Hadapsar.

Through its Director,

Dr. Amar Hanumanant Shinde (MBBS.DPM.FITS)

Age :- 41 years, Occupation :- Psychiatrist

(Hereinafter called as party No.1)

2. Surya College of Nursing, Manchi Hill, Ashwi Bk.,

Tal. Sangamner, Dist. A.Nagar 413714

Through its Director,

Vijay Kushaba Pise

Age: 50 Years, Occupation: Service

A/P Manchi Hill, Ashwi Bk,

Tal. Sangamner, Dist- Ahmednagar

(Hereinafter called as party No.2)





(2.)

WHEREAS the party no.1, is running a 30 bedded hospital under the name and title as **Jagruti Psychiatric Center** which covers the **Psychiatric Hospital**. This said hospital is being register under **State Mental Health Authority** vide **Government Notification PHD No. MIS-1088/CR-188/PH-3Dt- 29th March 1995** under **Section 8 of Mental Health Act 1987**.

WHEREAS the party no.2, is an educational Society and is running school of **B.Sc. Nursing** programme, affiliated to **Maharashtra University of Health Sciences, Nashik**. The party no. 2 is already provided **Psychiatric Hospital** and requested party no.1, for affiliation of their hospital for next 5 consecutive academic years for said College of **B.Sc. Nursing** courses for practical purpose.

WHEREAS the party no.1, has agreed to provided its Affiliated hospital for the purpose of clinical field experience for students in said **Surya College of Nursing, Manchi Hill, Ashwi Bk., Tal. Sangamner** conducting **B.Sc. Nursing** courses at Manchi Hill, Ashwi Bk., Tal-Sangamner, Dist. Ahmednagar. for the **academic year 2023-24** and for next 5 consecutive years.

Therefore this agreement of above Memorandum of understanding held and for which both the parties have made their signatures below with best of their knowledge and belief on this day of

Date: 18.9.2023

Place:

Sangamner

IDENTIFIED BY

Jagruti Psychiatric Center
Dr. Amar Hanumant Shinde
(MBBS.DPM.FITS)
(Party No.2)

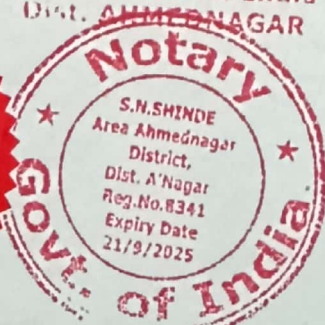
EXECUTANT

President
E.A.B.V.J.J. & M.S.Sanstha
Manchi Hill, Ashwi Bk, Tal. Sangamner
Dist. Ahmednagar (M.S.)
Surya College of Nursing,
Through its Director
Vijay Kushaba Pise
(Party no.1)



BEFORE ME

SUBHASH N. SHINDE
Notary Govt. of India
Dist. AHMEDNAGAR



NOTED & REGISTERED

AT SERIAL NO 207/2023

Date : 18/9/2023

THIS DOCUMENT
CONTAINS 2 PAGES

Section 8
See Rule 16

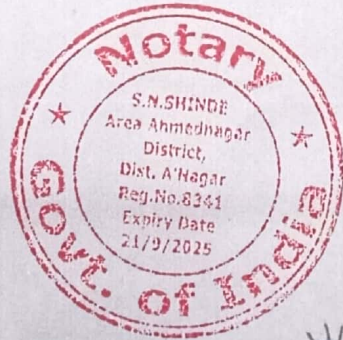


48-A
Annexure II

New Licence For Establishment Of Psychiatric Hospital / Nursing Home

I Dr. Sadhana Tayade Director of Health Services, Maharashtra State Mumbai by the authority vested in by the State Mental Health Authority vide Government Notification *PHD No.MIS-1088/CR-188/PH-3* Dt. 29th March 1995 under section 8 of *Mental Health Act 1987* hereby declare that I am satisfied after inspection of Jagruti Rehabilitation Centre.

I hereby grant *new license* to Psychiatric Hospital/Nursing Home by Dr. HIMANSHU UDAY PENDSE.
At 29/2 B/1 Zhagde Wasti Manjari Budruk
Pune - 412307 Tel No. _____
From 16/07/2019 till 15/07/2024.
License No. 220/2019.



SEAL

Place : MUMBAI
Date :

W. 11/11/19
Licensing Authority
Government of Maharashtra
DIRECTOR OF HEALTH SERVICES
MAHARASHTRA STATE



भारत सरकार
Government of India



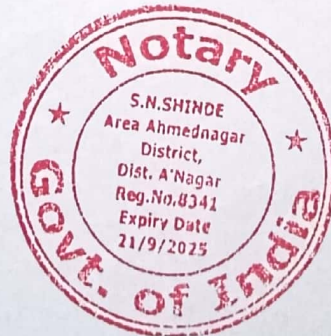
विजय कुशाबा पिसे
Vijay Kushaba Pise
जन्म तारीख /DOB: 01/01/1975
पुरुष/MALE



5769 8011 3159



माझे आधार, माझी ओळख



Scanned with CamScanner



Scanned with OKEN Scanner



भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India

पत्ता:

गावठाण, मु/पो-आश्वी बु, ता-संगमनेर, अहमदनगर,
महाराष्ट्र - 413714

Address:

,,, AT/PO-A SHWI BK, TEL-SANGMNER, Ashwi
Bk. , Ahmed Nagar, Maharashtra - 413714



5769 8011 3159

1947



help@uidai.gov.in

WWW

www.uidai.gov.in



Scanned with CamScanner



Scanned with OKEN Scanner