

महाराष्ट्र MAHARASHTRA

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03 NOV 2023

NOTARIAL REG.
ENTRY NO. <u>1228</u>
DATE <u>28/02/2024</u>



DECLARATION

I, Dr. Dhiraj Gajananrao Mahajan the Dean / Director/ Principal of the **Indutai Gaikwad-Patil** **urvedic Hospital & Research Center (MS) College / Institute** solemnly states on affirmation, that the information provided by me in Inspection Format as well as uploaded on College Website along with all Annexures is true and correct to the best of my knowledge. The said information is provided to me by the concerned teachers and duly verified by me.

It is further submitted the teacher's information attached in respective Annexure-VII & VIII are not working in/at any other College/Institute or presented themselves at any inspection for the Academic Year 2023-2024, as per my knowledge and information provided by the concerned teachers. The teachers in the Annexure- VII & VIII are staying in the same city / town / village where the College / Institute is situated or adjacent to the city / town / village, where the College/Institute is situated and having the valid proof of residence of the said city / town / village. The teachers in the AnnexureVII & VIII are not practicing in College working hours or out-side the City where the College /Institute is situated.

१) मुद्रांक विक्री नोंद करी अनुक्रमांक	३३९९६ / दिनांक = 8 NOV 2023
२) दस्तावेज प्रकार	एमपीए
३) दस्त नोंदणी करणार आहेत का ?	होय/नाही
४) मिळकतीचे थोडक्यात वर्णन	
५) मुद्रांक विक्रेता	सेनापती विद्या व वनिकेत सूर्यशिराम मुंडे
६) हस्ते असल्यास त्यांनी	अशोक गुंडे
७) दुसऱ्या पक्षकाराचे नाव	
८) मुद्रांक शुल्क रक्कम	१००५
विजय खोकले	मुद्रांक विक्रेता, ला.क्र१७/८६ कोड क्र. ४६०१००६ जिल्हाधिकारी परिसर, त. कार्यालय, नागपूर (शहर)
<p>अशा कारणासाठी त्यांनी मुद्रांक खरेदी केला त्यांनी त्याच कारणासाठी मुद्रांक खरेदी केल्यापाराने द. महिल्यात बाणारणे बंधनकारक आहे.</p>	

NOTARY

I am further hereby declare that every information or contents in this Inspection Format is based on the information provided by the concerned teachers and endorsed by me after due verification and the same is/are absolutely true and correct. If at any stage it is revealed that any information or content given in this declaration is not true and correct, in such event the undersigned/ the concerned teacher as the case may be, shall be liable for disciplinary action or penal action or Affiliation of the College shall be withdrawn, as the case may be.

This declaration is voluntarily signed by me on day of 20..... at Nagpur

Date: 22.02.2024

Place: Nagpur

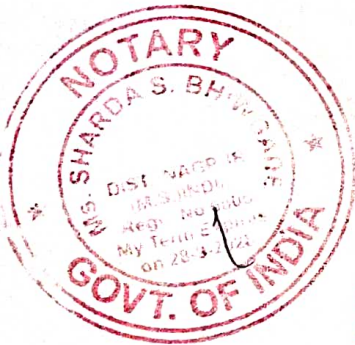
Signature of Dean/Principal

Name of the Signatory - Dr. Dhiraj Gajanan Mahajan

(with Seal of the College/Institute)

प्राचार्य

ःदुताई ायकयाड-पाटील आयुर्वेद रुग्णालय
व संशोधन केंद्र नागपुर (महाराष्ट्र)



ATTESTED

S.S. BHIWGAODE
ADVOCATE / NOTARY
DIST NAGPUR (M.S.)
28/02/2024

