

**Maharashtra University of Health Sciences, Nashik**  
**Inspection Committee Report for Academic Year 202----202---**

**Clinical Material in Hospital**

Name of College/Institute:- Ram Ratan B.sc Nursing College Bhokar Faculty:-Nursing

**HOSPITAL DETAILS**

| Sr. No.  | Particulars to be verified  | Particular | Adequate/ Inadequate |
|--|---|------------|----------------------|
| 1  | The Institute/Colleges shall execute a MoU with any institute for affiliation of hospital in addition to minimum 100 bedded own/parent Hospital (Affiliated hospital must be 50 bedded or more.)<br><b>To be made available on website</b>                                    |            | Adequate             |
| a.   | Whether Hospital is registered under any act under Local Authority such as Corporation, Municipality, Gram Panchayat etc.:<br><b>Copy to be made available on web site</b>  |            | Yes                  |
| b.   | Student Bed Ratio for UG & PG to be verified: (As per MSR)<br>Calculate at Actual .....   |            | Yes                  |
| c.   | Average Bed Occupancy in % : (Minimum 75%)<br>.....   |            | 75%                  |
| d.   | Clinical facilities for PG to be verified:-(As per MSR)   |            |                      |
|  | (i) Whether OPD is functioning to be verified<br>(ii) Total No of OPD (on the day of inspection)<br>(iii) Average Number of patients attending OPD (current year)<br>(iv) Average Number of Delivery (Current year)<br>(v) Average Number of abnormal Delivery (Current year) |            | Yes                  |
| <ul style="list-style-type: none"> <li>• As per Central Council Norms/University Norms, above Infrastructure must be available at College.</li> <li>• If Infrastructure is available, then mark "Adequate" &amp; do not attach any Documents it should be available on college website</li> <li>• In case of "Inadequate", it must be marked as "Inadequate" with evidence. To be submitted to university with report</li> </ul> |   |            |                      |

Herewith I declare all relevant documents uploaded are clear and visible on website & are true as per my knowledge & Belief  
 Any Other, Please Specify:-

Date:-

  
 Dean/Principal Stamp & Signature  
**PRINCIPAL**  
 Ramratan BSC Nursing College,  
 Bhokar Dist. Nanded.

Chairman of LIC

Member of LIC

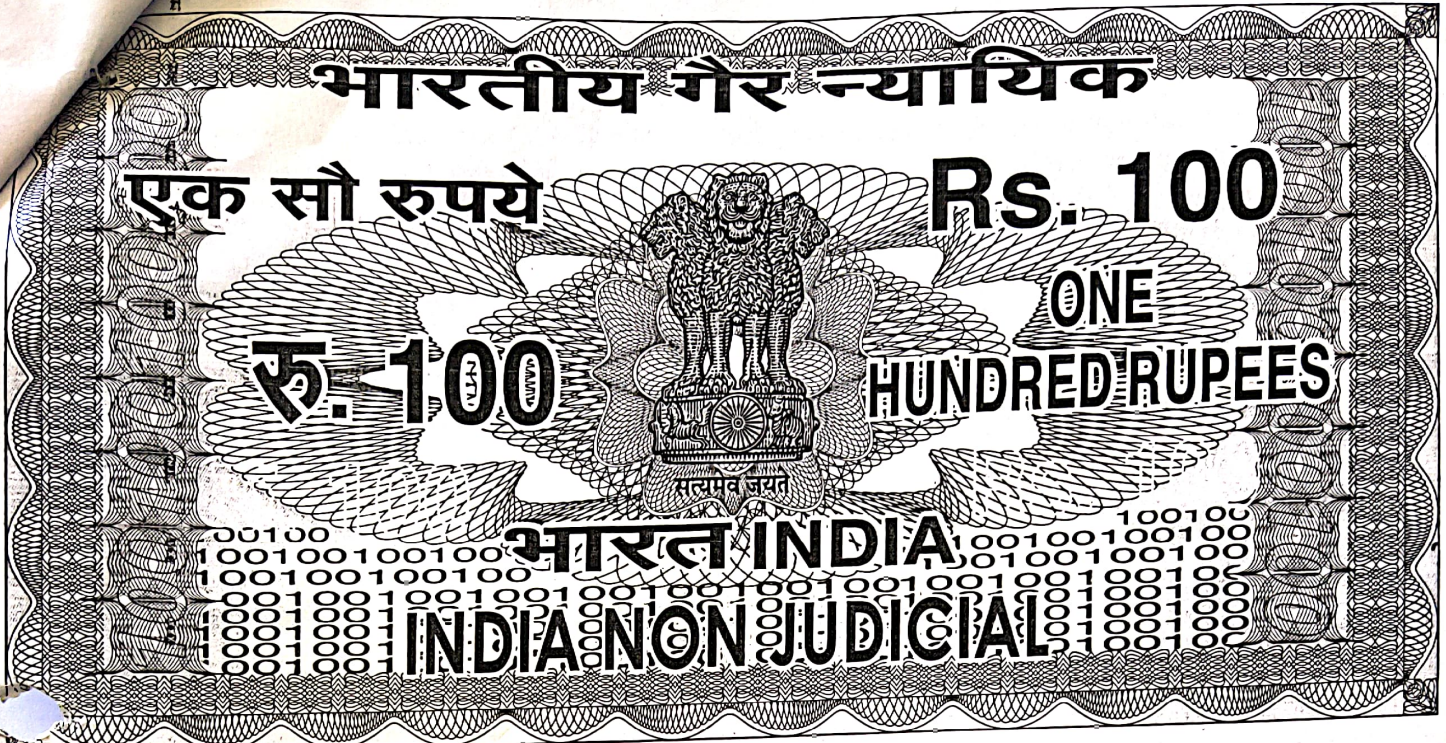
Member of LIC

**Spandhan Healthcare Hospital Bhokar**  
**Classification Beds**

| Beds       | No. of Sanction | Occupancy         |         |
|------------|-----------------|-------------------|---------|
|            |                 | Day of Inspection | Monthly |
| Medical    | 8               | 3                 | 80      |
| Surgical   | 5               | 2                 | 40      |
| O.B.G.Y    | 10              | 6                 | 120     |
| Casualty   | 3               | 2                 | 30      |
| Paediatric | 2               | 1                 | 20      |
| Skin       | 2               | 1                 | 20      |

*Si*  
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**Bhokar Dist. Nanded.**

*Spandhan*  
**SECRETARY**  
**Jeevanjyot Samajik Sanstha**  
**Ashti, Tq. Hadgaon Dist. Nanded**



महाराष्ट्र MAHARASHTRA

2025

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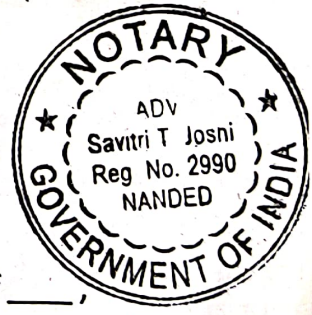
प्रतिज्ञापत्र

प्रतिज्ञापत्रासाठी / Only For Affidavit ...  
संक विक्री नोंदणी क्रमांक / .. दिनांक / ..

तेदीदाराचे नांव / ..  
ता व सही / ..

SUB TREASURY OFFICE  
18 JUN 2025  
SUB TREASURY OFFICER  
BHOKAR

ओ. एम्. कासारपेटकर  
मुद्रांक विक्रेता, परवाना क्र. ३४०२००४  
रवि झेरॉक्स सेंटर, भोकर जि. नांदेड  
**MEMORANDUM OF UNDERSTANDING (Affiliated Hospital)**  
(Between Affiliated Hospital and Nursing College)



This Memorandum of Understanding (MoU) is made and entered into on this \_\_\_\_\_ day of \_\_\_\_\_, by and between:

**Party No. 1**  
Spandhan Healthcare Hospita , Bhokar ,  
Through its President, Dr.Vijay Karanwad ,  
(Hereinafter referred to as "Party No.1"),  
AND

**Party No. 2**  
Jeevan Jyot Samajik Sanstha, Tq. Bhokar, Dist. Nanded,  
Through its President, . Ram Jadhav, Ram Ratan B.Sc. Nursing College, Bhokar,  
(Hereinafter referred to as "Party No.2").

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# स्पंदन

हेल्थ केअर हॉस्पिटल

शिवनेरी कॉम्प्लेक्स पंचायत समिती समोर, मेन रोड, भोकर - ४३१८०१

डॉ. विजय करणवाड  
MBBS. MD. (Medicine)  
Regd.No. 2010/05/1568

डॉ. श्रीकांत बोलेवार  
MBBS. MD. (Medicine)  
Regd.No. 2011/01/0048

date - 11/03/2021

## Affiliation Letter

This is to certify that I am willing to make our hospital facility available to the nurses training course in Jeevanjyot Samajik Sanstha Sanchalit Ramratan B.S.C Nursing College Bhokar Dist. Nanded. Hence I am providing permission to practice all the nursing training students.



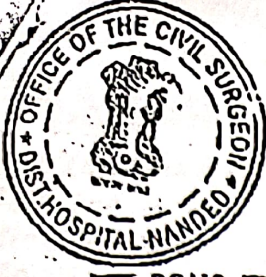
*Ju*

Dr. Vijay B. Karanwad  
M.B.B.S. M.D. Medicine  
(Reg. No. 2010/05/1568)

*Ju*  
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*Ju*  
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GOVT. OF MAHARASHTRA



सत्यमेव जयते

Public Health Department

सन १९४९ च्या दि वॉम्बे नर्सिंग होम्स रजिस्ट्रेशन अॅक्टच्या कलम ५ अन्वये दिलेलं

रजिस्ट्रेशन सर्टिफिकेट

Certificate of Registration Under Section 5 of the Bombay Nursing Home  
Registration Act, 1949

(नियम ५ अन्वये) (Under Rule 5)

क्रमांक No. ३४०

दि. वॉम्बे नर्सिंग होम्स रजिस्ट्रेशन अॅक्ट, १९४९ अन्वये श्री/श्रीमती डॉ. विजय भगवानराव  
करावड  
यांचे स्पंदन हेल्थकेअर हॉस्पिटल भोकर  
येथील नर्सिंग होम / मॅटर्निटी होम रजिस्टर केले असून सदरचे नर्सिंग होम व मॅटर्निटी होम चालविण्यास परवाना  
देण्यात येत आहे.

This is Certify that Shri/Shrimati Dr. Vijay Bhagwanrao Karavada  
Spandan Healthcare has been registered under the Bombay Nursing Home  
situated at Hospital Tr. Bhokar, Dist. Nanded and has been authorized to  
carry on the said nursing home.

रजिस्ट्रेशन क्र.: ३४०  
Registration No.:

प्रसूतीसाठी  
Maternity

कॉट्स ००  
Cots

रजिस्ट्रेशन दि.: २२/०३/२०१७  
Registration Date

इतर रुग्णांसाठी  
Other Nursing Patients

कॉट्स ३०  
Cots

Total = ३० Beds

Place: Nanded

सर्टिफिकेट दिल्याचा दिनांक: Date of issue of Certificate: ०१/०४/२०२३

सदरचे सर्टिफिकेट दिनांक ३१ मार्च २०२६ पर्यंत कार्यवाही राहिल.

This Certificate shall be valid up to 31st March 2026

Date: १५/०२/२०२४

Seal Govt.

Civil Surgeon  
Civil Hospital, Nanded  
DIST. HOSPITAL  
SECRETARY

# MAHARASHTRA POLLUTION CONTROL BOARD

Tel: 24010437/24020781  
Fax: 24024068/24023515  
Website: <http://mpcb.gov.in>  
Email: [ps0@mpcb.gov.in](mailto:ps0@mpcb.gov.in)



Kalpataru Point, 2nd, 3rd  
and 4th floor, Opp. Cine  
Planet Cinema, Near Slon  
Circle, Slon (E),  
Mumbai-400022

ORANGE/L.S.I

Date: 13/11/2024

No:- Format1.0/PSO/UAN No.0000214990/CO/2411000673

To,  
M/s. SHREE GANGA HOSPITAL.  
48 and 49, Wadiya Factory Area, Shivaji Nagar,  
Nanded, Dist. Nanded - 431601.  
Email: [nandedhospital2022@gmail.com](mailto:nandedhospital2022@gmail.com)  
Contact No.: 9049939731



Combined Consent to 1st Operate and BMW Authorization (CCA) for 100 Dental Chair under the provisions of Water (P & CP) Act, 1974, Air (P & CP) Act, 1981 and Bio-Medical Waste Management Rules, 2016 as amended and Hazardous Waste (M & TM) Rules, 2016.

- Ref: 1. Combine Consent to Establish and Bio-Medical Waste Authorization for 100 Dental Chair (Beds) granted by the Board vide no.Format1.0/PSO/UAN No.0000163620/CE/2308000888 dtd 11.08.2023
2. Your application for Combine Consent and Bio-Medical Waste Authorization dated 10/07/2024
  3. This office e-mail on 01/10/2024
  4. Documents uploaded on 09/10/2024, 11/10/2024 & 11/11/2024
  5. Penal charges paid on 11/10/2024

After examining the proposal, The Maharashtra Pollution Control Board hereby grant 1st operate Combined Consent and-BMW Authorization to HCE under Section 25/26 of the Water (P&CP) Act, 1974, Section 21 of the Air (P&CP) Act, 1981 and Bio-Medical Waste Management Rules, 2016, and Hazardous Wastes (Management & Transboundary Movement) Rules, 2016 respectively, under Environment (Protection) Act, 1986, subject to terms and conditions as specified below and in the Schedule(I-IV) and Annexure (I-II) enclosed in this order.

1. This CCA shall be in force for a period From 15/08/2024 To 15/08/2026
2. The capital investment of the HCF is ₹1664.01 Lakhs (As per C.A Certificate Submitted by HCF)
3. HCF Area: - Plot Area 670.39 M<sup>2</sup> with Built-up area 1631.12 M<sup>2</sup>.
4. Activities Included
  - a. Total Number of Beds : 0 Nos. Dental Chair - 100
5. Conditions under the Water (P&CP) Act, 1974:-

1. Quantity of total water consumption shall not exceed 35 M<sup>3</sup>/day. You shall not use the ground water without obtaining prior permission of Central Ground Water Authority

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2. The capital investment of the HCF is ₹23.37 Lakhs (As per C.A Certificate Submitted by HCF)
3. HCF Area: - Plot Area 167.00 M<sup>2</sup> with Built-up area 160.00 M<sup>2</sup>.
4. **Activities Included**
- a. Total Number of Beds : 30 Nos. (As per BNH certificate no. H00217 valid upto 03-11-2023)
- i. General Beds : 24 Nos
- ii. ICU/ICU Beds : 5 Nos
- iii. Operation Theatre : 1 Nos
5. **Conditions under the Water (P&CP) Act, 1974:-**
- Quantity of total water consumption shall not exceed 3 M<sup>3</sup>/day. You shall not use the ground water without obtaining prior permission of Central Ground Water Authority.
  - You shall provide adequate treatment & disposal facility for Sewage & Effluent generated as specified in Annexure-I
  - You shall provide water meter at water intake point & at sewage/Effluent disposal point and shall maintain monthly records thereof.
6. **Conditions under the Air (P&CP) Act, 1981:-**
- You shall use the fuel for DG set as specified in the Annexure-II.
  - You shall provide adequate emission control system to DG set as specified in Annexure-II.
  - You shall strictly observe noise standards applicable for DG set stack emission and ambient noise level as per Annexure-II.

7. **Conditions under Hazardous and Other Wastes (Management, Handling & Transboundary Movement) Rules, 2016** for treatment and disposal of hazardous waste:-

You shall have valid membership of CHWTSDF and shall dispose the Hazardous waste generated in strict compliance with said rules and maintain record thereof.

| Sr.No | Type of Waste | HW Category no. | Quantity | UOM | Disposal |
|-------|---------------|-----------------|----------|-----|----------|
|       |               | NA              |          |     |          |

9. **Conditions under Solid Waste Management rules 2016**
- You Shall Handover Solid waste (Other Than BMW) to Local bodies as per provisions of SWM Rules, 2016.
  - You shall Not mix general solid waste with Bio Medical Waste.
10. **Conditions under BMW Management rules, 2016 (As Amended):-**



*Manish Halku*

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7edf3253  
24c52a7f  
e0f597ea  
d9dbe597  
37ade938  
d3014e83  
7clac7cda

Signed by: Manish Halku  
Regional Officer  
For and on behalf of  
Maharashtra Pollution Control Board  
2024-06-11 11:01 IST

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*Jeevanjyot Samajik Sanstha*  
**SECRETARY**  
Jeevanjyot Samajik Sanstha  
Ashti, Tq. Hadgaon Dist. Nanded

Received Consent/Authorization fee of -

| Sr.No | Amount (Rs) | Transaction/DR No | Date       | Transaction Type |
|-------|-------------|-------------------|------------|------------------|
| 1     | 4500.00     | TXN2212004376     | 28/12/2022 | Online Payment   |
| 2     | 9148.00     | TXN2403004494     | 20/03/2024 | Online Payment   |

Copy to:

1. Regional Officer, MPCB, Aurangabad and Sub-Regional Officer, MPCB, Nanded
2. Chief Accounts Officer, MPCB, Slon, Mumbai
3. I/C EIC- for record & website updating purpose.



  
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**Terms & conditions for Incinerator(s) and D.G. Set(s) under Air (P & CP) Act, 1981 and Bio Medical waste management Rule, 2016: (Refer Condition No.6)**

**Annexure - II**

1. You shall observe following fuel pattern and erect following stack (s):

| Sr. No. | Stack Attached to | Fuel Type | Quantity | Stack Height (Mtr) |
|---------|-------------------|-----------|----------|--------------------|
|---------|-------------------|-----------|----------|--------------------|

2. The Applicant shall obtain prior permission of MPC board for providing additional control equipment with necessary specifications and operation thereof or replacement/alteration well before its life come to an end or erection of new pollution control equipment.

3. The Board reserves its rights to vary all or any of the condition in the consent, if due to any technological improvement or otherwise such variation (including the change of any control equipment, either in whole or in part as necessary).

**Conditions for D.G. Set:-**

- Noise from the D.G. Set should be controlled by providing an acoustic enclosure or by treating the room acoustically for control of noise.
- Acoustic enclosure/acoustic treatment of the room should be designed for minimum 25 dB (A) insertion loss or for meeting the ambient noise standards, whichever is on higher side. A suitable exhaust muffler with insertion loss of 25 dB(A) shall also be provided. The measurement of insertion loss will be done at different points at 0.5 meters from acoustic enclosure/room and then average.
- You shall make efforts to bring down noise level due to DG set, outside industrial premises, within ambient noise requirements by proper siting and control measures.
- Installation of DG Set must be strictly in compliance with recommendations of DG Set manufacturer.
- A proper routine and preventive maintenance procedure for DG set should be set and followed in consultation with the DG manufacturer which would help to prevent noise levels of DG set from deteriorating with use.
- D.G. Set shall be operated only in case of power failure.
- The applicant should not cause any nuisance in the surrounding area due to operation of D.G. Set.
- The applicant shall comply with the notification of MoEFCC dated 17.05.2002 regarding noise limit for generator sets run with diesel.

5. You shall take adequate measures for control of noise levels from its own sources within the premises so as to maintain ambient air quality standard in respect of noise to less than 75 dB (A) during day time and 70 dB (A) during night time. Day time is reckoned in between 6 a.m. and 10 p.m. and night time is reckoned between 10 p.m. and 6 a.m.

*[Signature]*  
**PRINCIPAL**

**Ramratan BSC Nursing College**

*[Signature]*  
**SECRETARY**

**Jeevanjyot Samajik Sanstha**

Ashti, P. G. Hadgaon Dist. Nanded

## Responsibilities of HCF

### SCHEDULE-II

1. You shall handover Bio Medical waste only to MPCB Authorized Common Bio medical waste treatment and Disposal facility **Superb Hygenic Disposal (India) Pvt Ltd - Nanded, Nanded** and maintain records thereof for 5 years.
2. You shall establish bar code for handling of bio-medical waste.
3. You shall ensure segregation of Bio-Medical Waste in colour coded bags as per BMW Management Rules, 2016
4. You shall not store Bio Medical waste beyond 48 hours from the generation.
5. You shall use only non-chlorinated plastic coloured bags.
6. You shall ensure use of colour coded bins and bags for segregation of BMW as required under BMW Management Rules 2016.
7. You shall not mix General/other Solid waste with Bio Medical Waste.
8. You shall ensure segregation, treatment and disposal of General / Other Municipal solid waste as per Solid Waste Management rules, 2016.
9. You shall pay the charges to authorized Common Bio Medical waste Treatment and Disposal facility for its services as agreed upon during the membership registration or as amended.
10. You shall comply and strictly abide with the conditions stipulated in BMW Management Rules, 2016 as amended time to time.
11. You shall handover Plastic / Metal waste (BMW) to Common Bio medical waste treatment and Disposal facility allocated to you for treatment & disposal or plastic/ metal recycler authorized by MPCB for BMW Handling and maintain records thereof & submit to MPCB in Annual report.
12. You shall provide training to all workers involved in handling of bio-medical waste at the time of induction and at least once a year thereafter and maintain record thereof.
13. You shall undertake appropriate medical examination of all BMW Waste handlers & staff at the time of induction and at least once in a year and immunize all involved in management of Bio Medical Waste for protection against diseases, including Hepatitis B and Tetanus, that are likely to be transmitted while handling bio medical waste and maintain the records for the same.
14. You shall ensure use of personal protective Equipment such as Heavy Duty Gloves (Workman's Gloves), Gum Boots or safety shoes for waste collectors, Face mask, Head Cap, Splash Proof Gowns or aprons etc., Disposal gloves by waste handlers.
15. You shall develop and operate own website. The website should be uploaded on monthly basis with all the information relating to Bio-Medical waste management including this CCA and other permission and report.
16. You shall maintain all record for Generation, for a period of five years and produce whenever asked by MPCB authorities.
17. The occupier and operator of a Health Care Establishment shall be liable for all the damages caused to the environment or the public due to improper handling of bio-medical wastes.
18. You shall ensure submission of Annual Report of BMW for the period Jan to Dec, including category and quantity of BMW Generated and Disposed in Form IV for preceding year before 30th June of every year to the Regional Office, MPCB, Aurangabad and uploading the same to MPCB Portal (<https://www.ecmpcb.in/>).


## General Conditions

## SCHEDULE-IV

The following general conditions shall apply:-

1. You shall provide facility for collection of environmental samples and samples of trade terminal or designated points and shall pay to the Board for the services rendered in this behalf.
2. Whenever due to any accident or other unforeseen act or event, such emissions occur or is apprehended to occur in excess of standards laid down, such information shall be forthwith reported to Board, concerned Police Station, Executive Engineer MIDC and Local Body. In case of fallure of pollution control equipment's, the process connected to it shall be stopped.
3. You shall provide an alternate electric power source sufficient to operate all pollution control facilities installed to maintain compliance with the terms and conditions of the consent. In the absence, the applicant shall stop, reduce or otherwise, control operation to abide by terms and conditions of this consent.
4. You shall submit to this office, the 30th day of September every year, the Environmental Statement Report for the financial year ending 31st March in the prescribed Form-V as per the provisions of rule 15 of the Environment (Protection) (Second Amendment) Rules, 1992.
5. You shall comply with the Hazardous Waste (M, H & TM) Rules, 2016 and submit the Annual Returns as per Rule 20(2) of Hazardous Waste (M, H & TM) Rules, 2016 for the preceding year April to March in Form-IV by 30th June of every year to Regional Office, Aurangabad.
6. You shall engage qualified staff/personnel/agency to see the day to day compliance of consent & authorization condition towards Environment Protection.
7. Separate drainage system shall be provided for collection of trade and sewage effluents. Terminal manholes shall be provided at the end of the collection system with arrangement for measuring the flow. No effluent shall be admitted in the pipes/sewers downstream of the Terminal manholes. No effluent shall find its way other than in designed and provided collection system.
8. Neither storm water nor discharge from other premises shall be allowed to mix with the effluents from the HCE.
9. You shall install a separate meter showing the consumption of energy for operation of domestic and industrial effluent treatment plants and air pollution control system. A register showing consumption of chemicals used for treatment shall be maintained.
10. You should not cause any nuisance in surrounding area. You shall maintain good housekeeping.
11. You shall bring minimum 33% of the available open land under green coverage/ plantation. The applicant shall submit a yearly statement by 30th September every year on available open plot area, number of trees surviving as on 31st March of the year and number of trees planted.
12. The non-hazardous solid waste arising in the HCE premises, sweepings, etc. be disposed of scientifically so as not to cause any nulsance / pollution. The applicant shall take necessary permissons from civic authorities for disposal of solid waste.
13. You shall achieve the National Ambient Air Quality standards prescribed vide Government of India, Notfication Dated, 16/11/2009 as amended.

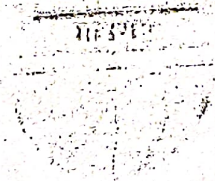
  
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14. You shall submit an official e-mail address and any change will be duly informed to the MPCB.
15. You shall observe provisions of E-waste (Management) Rules 2016 & as amended time to time and Batteries (Management and Handling) Amendment Rules, 2010.
16. An inspection book shall be opened and made available to the Board's officers during their visit to the HCE.
17. In case you use/ handle/ generate the cytotoxic waste you shall strictly adhere to the standards/ SOPs applicable and waste shall be labelled specifically as "Cytotoxic Waste" with symbol on waste containers/ bags and shall handover to BMW CTFs.
18. You shall obtain required permissions from competent authority for radio active material use/ handling/ disposal of waste before commencement of such activity.
19. The Energy source for lighting purpose shall preferably be LED based.
20. You shall harvest rainwater from roof tops of the buildings and storm water drains to recharge the ground water and utilize the same for different industrial applications within the plant
21. You shall provide personal protection equipment as per norms of Factory Act 1948
22. You are responsible to submit application for renewal of Combined Consent & Biomedical Waste authorization before 60 days of expiry.

This certificate is digitally & electronically signed.



  
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|       |      |      |  |
|-------|------|------|--|
| Total | 8.00 | 6.00 |  |
|-------|------|------|--|

d) Waste Water Treatment

Have you installed STP or ETP

No

e) Other waste generation details:

1) Municipal Solid Waste

a) Biodegradable Waste(kg/day)

10.00

b) Recyclable Waste(kg/day)

0

c) Domestic Hazardous Waste(kg/day)

0

Air Pollution

Whether D.G. Set Installed

Yes

| Capacity(KVA) | Make        | Fuel Used | Fuel QTY | Unit  | Stack Height in meter | Acoustic Enclosure for noise control |
|---------------|-------------|-----------|----------|-------|-----------------------|--------------------------------------|
| 6             | KALA GENSET | Diesel    | 5.00     | Ltr/H | 3.00                  | NO                                   |

Do you have Boiler Installed

No

Do you have adequate facility for collection of samples of emissions in the form of port holes, platform, ladder etc. As per Central Board Publication "Emission regulations Part-III" (December, 1985)

Port hole

No

Platform

No

Ladder

No

| Parameter                | Permissible Limiting concentration                  | Latest 3 Sampling Dates |          |          |
|--------------------------|---|-------------------------|----------|----------|
|                          |   | 1st Date                | 2nd Date | 3rd Date |
|                          |   | NA                      | NA       | NA       |
| Particulate matter       | 50 mg/Nm <sup>3</sup>                               | 0                       | 0        | 0        |
| Nitrogen oxides          | 400 mg/Nm <sup>3</sup>                              | 0                       | 0        | 0        |
| H <sub>2</sub> S         | 50 mg/Nm <sup>3</sup>                               | 0                       | 0        | 0        |
| Total Dioxins and Furans | 0.1 ng TEQ/Nm <sup>3</sup> (at 11% O <sub>2</sub> ) | 0                       | 0        | 0        |
| Hg and its compounds     | 0.05 mg/Nm <sup>3</sup>                             | 0                       | 0        | 0        |

Whether you have provided Online Continuous Emission Monitoring Systems (OCEMS)

No

Quantity of ash generated from Boiler (Tonnes/ month):

Mode of Disposal of Boiler ash

Provision Of Alternate Electric Supply

No

Separate Electricity Meter Provided to Pollution control Devices

No

Hazardous Waste

CHWSTDF Details

CHWSTDF Facility Name

NA

CHWSTDF Membership Number

0

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*Jeevanjot*

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Jeevanjot Samajik Sanstha  
Ashti, Tq Hadgaon-Dist. Nanded

| Description      | Waste Category | Quantity in MT/Month |
|------------------|----------------|----------------------|
| Incineration Ash | 37.3           | 0                    |
| STP/ETP          | 35.3           | 0                    |
| Used Oil         |                | 0                    |

**Non-Hazardous Waste aspect**

| Description | Quantity | UOM | Treatment | Treatment | Remarks |
|-------------|----------|-----|-----------|-----------|---------|
|-------------|----------|-----|-----------|-----------|---------|

**5. Additional Information**

Do you have Bio Medical Waste Management Committee Constituted

No

Average Cost (O & M) for ETP/STP

Average Cost of APCD Rs/Year

Details of tree plantation/green belt development within applicant's premises

| Space Availability | Plantation Done On | Number of Trees Planted |
|--------------------|--------------------|-------------------------|
| 10                 | 10                 | 10                      |

Whether Environmental Statement submitted

No

Environmental Statement submitted Date

1-01-1970

Any other additional information that the applicants desires to give

Do you have Infection Control Committee Constituted

No

**6. Financial Details**

Are there any Bank Gurantee Impose on you during previous Consent/Authorization period.


No

| Bank Gurantee Number | Date | Valid Up To | Ambunt | Bank Name | Branch |
|----------------------|------|-------------|--------|-----------|--------|
|----------------------|------|-------------|--------|-----------|--------|

Additional Bank Gurantee Details, If Any

| Bank Gurantee Number | Date | Valid Up To | Amount | Bank Name | Branch |
|----------------------|------|-------------|--------|-----------|--------|
|----------------------|------|-------------|--------|-----------|--------|

**PRINCIPAL**  
 Ramratan BSC Nursing College  
 Bhokar Dist. Nanded.

  
**SECRETARY**  
 Jeevanjyot Samajik Sanst  
 Ashti, Tq. Hadgaon Dist. Nand

# UMANG HOSPITAL

Dr. Ravindra Bhumanna Narod  
M.B.B.S., M.D. Psychiatry (BJMC Pune)  
Consultant Psychiatrist  
Regi.No. 2011/06/1976



# उमंग हॉस्पिटल

डॉ. रविंद्र भुमन्ना नरोड  
M.B.B.S., M.D. Psychiatry (BJMC)  
मानसोपचार, व्यसनमुक्ती व मनोवैज्ञानिक समस्ये  
Regi.No. 2011/06/1976

Name :

C/o

Date :

Age :

Sex :

Past History :

## AFFILIATION LETTER

This is certify that I am willing to make our Hospital Facility available to the Nurses Training Course in Jivanjyot Samajik Sanstha Sanchlit Ramratan RANM, RGNM & B.Sc. Nurseing Institute, Bhokar Dist.Nanded.

O/E

Hence I am providing permission to practice all the Nurseing Training Students.

*Ravind*

उमंग हॉस्पिटल  
डॉ. रविंद्र नरोड  
M.B.B.S., M.D. Psychiatry  
नवि. ३०, बसस्टॅण्ड जवळ, डॉक्टर्स लेन, नांदेड.  
डॉ. चिन्मय कायनाड, डॉ. अश्विनी नांदेड  
नांदेड, फोन-8208019881



*Jeevan*

**PRINCIPAL**  
Ramratan BSC Nursing College  
Bhokar Dist. Nanded.

*Jeevan*

**SECRETARY**  
Jeevanjyot Samajik Sanstha  
Ashti, Ta. Hadgaon Dist. Nanded

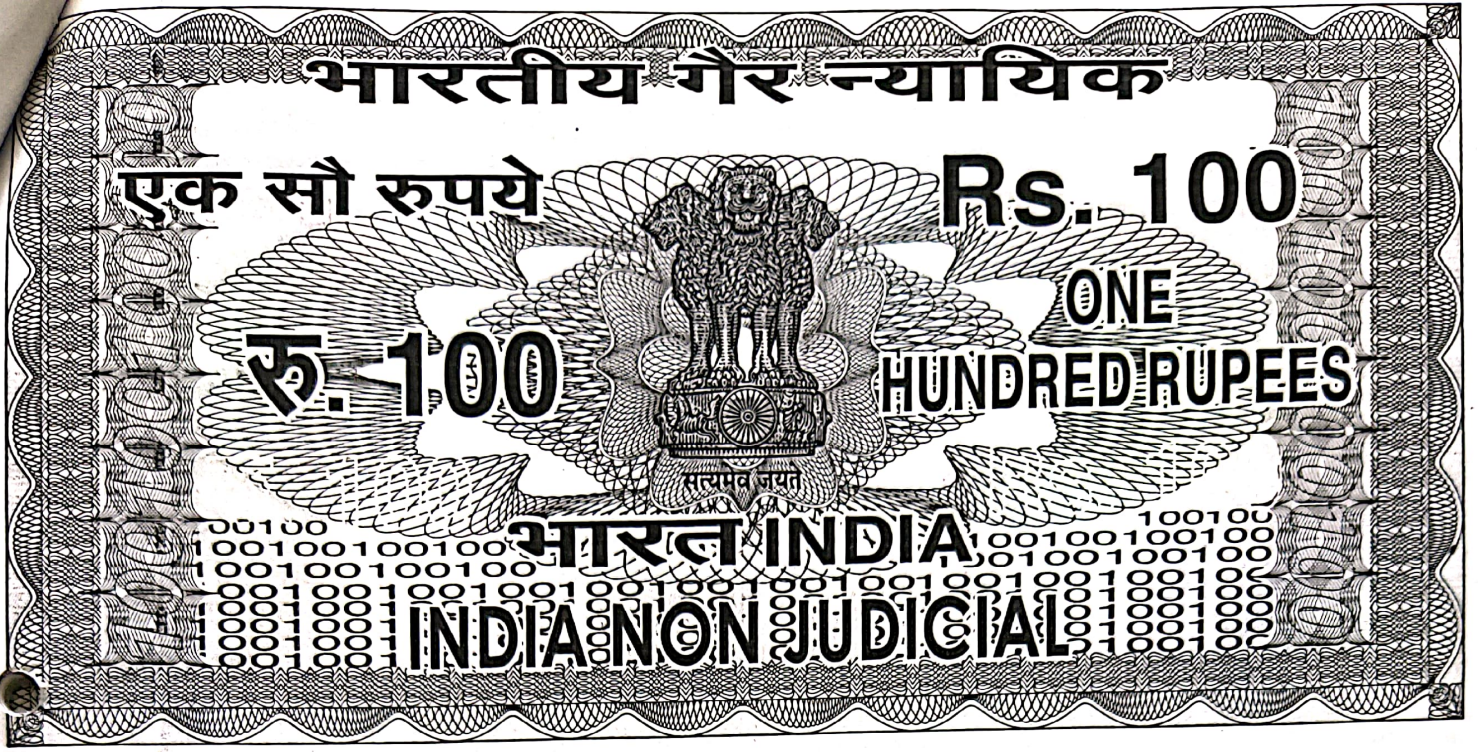
## Umang Hospital Nanded Classification Beds

| Beds       | No. of Sanction | Occupancy         |         |
|------------|-----------------|-------------------|---------|
|            |                 | Day of Inspection | Monthly |
| Psychiatry | 5               | 3                 | 50      |

*Jay*  
**PRINCIPAL**  
Ramratan BSC Nursing College  
Phokar Dist. Nanded.

*Phokar*

*nshta*  
*ted*



महाराष्ट्र MAHARASHTRA

2025

49AB 832320

प्रतिज्ञापत्र

प्रतिज्ञापत्रासाठी For Affidavit ..  
मुद्रांक विक्री नोंद क्र. १५५९ दिनांक ०१/०९/२०२५

वरेदीदाराचे नांव उमंगेश केशव जाधव  
सही उमंगेश केशव जाधव

जिवम ज्योत सामाजिक संस्था, भोकर  
ओ.एम.कासारपेठकर

मुद्रांक विक्री, परवाना क्र. ३४०२००४

रवि चोरोल्ले सेंटर (Affiliated Hospital)

MEMORANDUM OF UNDERSTANDING (Affiliated Hospital)

(Between Affiliated Hospital and Nursing College)

SUB TREASURY OFFICE  
18/09/2025  
SUB TREASURY OFFICER  
BHOKAR

NOTARY  
ADV  
Savitri T Joshi  
Reg No. 2990  
NANDED  
GOVERNMENT OF INDIA

This Memorandum of Understanding (MoU) is made and entered into on this \_\_\_\_\_ day of \_\_\_\_\_, by and between:

**Party No. 1**  
Umang Hospital, Bhokar Road Nanded,  
Through its President, Dr.Narode Ravindra Bhumanna,  
(Hereinafter referred to as "Party No.1"),

**AND**  
**Party No. 2**  
Jeevan Jyot Samajik Sanstha, Tq. Bhokar, Dist. Nanded,  
Through its President, .Ram Jadhav, Ram Ratan B.Sc. Nursing College, Bhokar,  
(Hereinafter referred to as "Party No.2").

PRINCIPAL  
Ramratan BSC Nursing College  
Bhokar Dist. Nanded

WHEREAS

1 **Umang Hospital** is a registered healthcare institution under the Bombay Nursing Home Registration Act, 1949. It operates with specialized departments in Gynaecology, Obstetrics, Surgery, Paediatrics, and Vaccination, and is compliant with DMER/MSBPEN/MUHS norms. The hospital is equipped with well-trained and certified staff and qualified medical professionals.

2. **Ram Ratan B.Sc. Nursing College**, operated by **Jeevan Jyot Samajik Sanstha**, is a recognized educational institution offering nursing education.

3. Party No.1 willingly agrees to provide clinical field experience and hospital-based training for the students of Party No.2 at **Umang Hospital** as part of their nursing education and internship programs.

NOW, THEREFORE,

Both parties mutually agree to the terms of this understanding and shall work together in good faith to facilitate the clinical exposure of students from Party No.2 at the premises of Party No.1.

IN WITNESS WHEREOF,

The parties have executed this Memorandum of Understanding on the date and place mentioned below:

Date: \_ / \_ /

Place: Bhokar

EXECUTANTS

For Party No.1

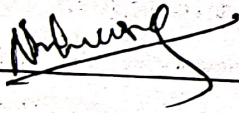
**Umang Hospital**

Through its President:

**Dr. Narode Ravindra Bhumanna**

(Signature & Seal)

Witnesses:

1. :-  2. :- \_\_\_\_\_

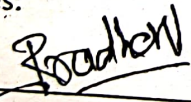
For Party No.2

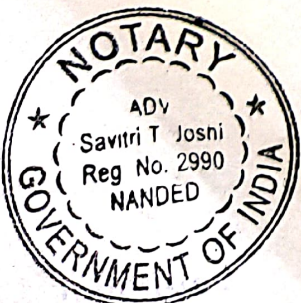
**Jeevan Jyot Samajik Sanstha / Ram Ratan B.Sc. Nursing College, Bhokar**

Through its President: **Dr. Ram Jadhav**

(Signature & Seal)

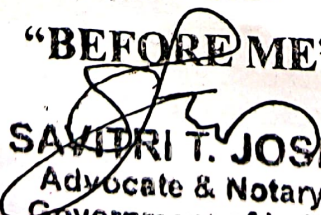
Witnesses:

1. :-  2. :- \_\_\_\_\_



8 AUG 2025

"BEFORE ME"

  
**SAVITRI T. JOSHI**  
Advocate & Notary  
Government of India  
CELL 9421761898



नांदेड वाघाळा शहर महानगरपालिका, नांदेड.  
NANDED WAGHALA CITY  
MUNICIPAL CORPORATION, NANDED.



सन १९४९च्या मुंबई प्रसुती गृह कायद्याच्या कलम ५ अन्वये दिलेले नोंदणी प्रमाणपत्र  
Certificate of Registration under Section 5 of the  
Bombay Nursing Homes Registration Act, 1949  
(नियम ५ अन्वये) (Under Rule 5)

मुंबई सुश्रुषा गृह नोंदणी कायदा, १९४९ अन्वये श्री / श्रीमती \_\_\_\_\_

यांचे \_\_\_\_\_

येथील सुश्रुषा गृह / प्रसुती गृह नोंदणी केले असून सदरचे सुश्रुषा गृह व प्रसुतीगृह  
चालविण्यास परवाना देण्यात येत आहे.

This is to Certify that Shri / Shri/mati Dr. Narrod Ravindra  
Bhumanna has been registered under  
Bombay Nursing Homes Registration Act, 1949 in respect of Umang  
Hospital situated at Near, Bannalika and has been  
authorised to carry on the said Nursing Home. Hospital, Dr. Lane Nanded

नोंदणी क्रमांक :

Registration No.

420

प्रसुती खाटांची संख्या :

Maternity No. of Coats

- 0 -

नोंदणी दिनांक :

Date of Registration

03/07/2020

इतर रुग्णांसाठी खाटांची संख्या :

Other Nursing Patients No. of Coats - 05 -

ठिकाण : Place :

NANDED

प्रमाणपत्र दिल्याचा दिनांक :

Date of Issure of Certificate

15/05/23

सदरच्या प्रमाणपत्राची वैधता दिनांक ३१ मार्च.....पर्यंत राहिल.

This Certificate shall be valid up to 31 March.....2026



वैद्यकिय आरोग्य अधिकारी,

नांदेड वाघाळा शहर महानगरपालिका, नांदेड.  
Medical Health Officer,  
Nanded Waghala City Municipal  
Corporation, Nanded

SECRETARY

Jeevanjyot Samajik-Sanstha  
Ramrajan BSC Nursing Collage, Tq. Hadgaon Dist. Nanded  
Bhokar Dist. Nanded



# नांदेड वाघाळा शहर महानगरपालिका, नांदेड.

अग्निशमन व आणीबाणी सेवा

श्री गुरु गावदासघजा स्टाडियम, नांदेड, दुरध्वनी क्र. 101/02462- 255555, फॅक्स क्र. 02462-232071

www.nwcmchnanded.gov.in. / email:-nwmccorporation.yahoo.in

जा.क्र.नांवाशमनपा/अवअसे/ 0624778 ,

दिनांक 18-06-2024

Umang Hospital

द्वारा, DR.RAVINDRA BHUMANNA NAROD

1-24-71 & 1-24-72 VIP ROAD VISHNU NAGAR NANDED DIST NANDED

विषय:- तात्पुरते नाहरकत प्रमाणपत्रा बाबत..

सदभ संबधीताचा दिलेला अर्ज दिनांक 21-05-2024

उपरोक्त विषयाचे अनुषंगाने या विभागाच्या अधिका-याने Umang Hospital, DR.RAVINDRA BHUMANNA NAROD , 1-24-71 & 1-24-72 VIP ROAD VISHNU NAGAR NANDED DIST NANDED, नांदेड: या इमारतीचे मालक/विकास/भोगवटदार यांनी दाखल केलेल्या मॅक्सिम फायर सर्फिस, औरंगाबाद, या शासनमान्य अनुज्ञापती धारकाने अग्निशमन यंत्रणा ही दुरुस्त व कार्यक्षम असल्या बाबतचे प्रमाण पत्र 'ब' सोबत जोडलेल्या यादी नुसार दिनांक 11-06-2024 रोजी आग प्रतिबंधकात्मक साहित्याची तपासणी केली ती समाधानकारक आहे.

सदरचे नाहरकत प्रमाणपत्र हे जारी केलेल्या दिनांकापासुन एका वर्षापर्यंत वैध राहिल्या नंतर अग्निशमन नाहरकत प्रमाणपत्र घेण्याची सर्वस्वी जबाबदारी आपल्यावर राहिल. तसेच तपासणी दरम्यान आढळून आलेली आग प्रतिबंधात्मक व जीव संरक्षक उपायोजना ही भविष्यात तशीच राहिल याची दक्षता घ्यावी.

- स्वयंचलीत तपास व भय सुचना यंत्रणा (Automatic Detection And Alarm System) O.T मध्ये व ICU मध्ये बसविण्यात यावे.
- पॅनल बोर्डच्या ठिकाणी Co2 चे Fire Extinguisher बसविण्यात यावे.

महाराष्ट्र आग प्रतिबंधक व जीवसंरक्षक उपायोजना अधिनियम 2006 नुसार खालील दिलेल्या अटी व शर्तीचे पालन करणे बंधनकारक राहिल:

- महाराष्ट्र आग प्रतिबंधक व जीवसंरक्षक उपाययोजना अधिनियमातील नियम क्र. 3 नुसार अर्जदाराने (विकासक, मालक, भोगवटदार किंवा ज्या अभिनामाने बोध करण्यात येईल तो) आग प्रतिबंधक व जीवसंरक्षक उपाययोजना 2006 व भारतीय राष्ट्रीय इमारत संहिता 2016 आणी त्या मध्ये वेळो- वेळी केलेल्या सुधारनेनुसार अमलबजावणी करणे बंधनकारक राहिल. या कायद्याचे उल्लंघन होणार नाही याची दक्षता संबंधीताने घ्यावी.
- सदर अधिनियमातील कलम क्र. 3 मधील पोट कलम 3 नुसार अर्जदाराने आग प्रतिबंधक जीवसंरक्षक उपाययोजनांची तरतुद केली आहे या बाबतचे लायसन्स प्राप्त अभिकरणा कडुन दिलेले विहित नमुण्यातील प्रमाणपत्र व पोट कलम (1) मध्ये विनिर्दिष्ट केल्याप्रमाणे दुरुस्त आणी कार्यक्षम स्थितीत ठेवल्याबाबतचे विहित नमुण्यातील प्रमाणपत्र " ब " मुख्य अग्निशमन अधिकारी यांचे कडे वर्षातुन दोन वेळा (जानेवारी व जुलै या महिन्यामध्ये) सादर करावा.
- कोणतीही व्यक्ती आपल्या इमारतीत किंवा तिच्या भागात बसविलेले आग प्रतिबंधक उपकरण बिघडविणार नाही, त्यामध्ये फेरबदल करणार नाही, ते काढुन टाकणार नाही किंवा त्याला कोणतेही हाणी व नुकसान पोहचविणार नाही किंवा कोणत्याही व्यक्तीला तसे करणे बाबत चिथावणी देणार नाही.
- सदर इमारतीत अग्निशमन प्रतिबंधात्मक उपाययोजना सुस्थितीत असल्यानंतर तसेच या पूर्वी यंत्रणात काही त्रुटी आढळल्या बाबत आपणास नोटीस मिळाली नसेल किंवा त्या ठिकाणी आगी पासुन कुठलीही घडती नसेल तरच हे प्रमाणपत्र ग्राह्य धरण्यात येईल.

PRINCIPAL

Ramratan BSC Nursing College, Tq. Hadgaon Dist. Nanded

Bhekar Dist. Nanded.

SECRETARY

Jeevanjyot Samajik Sanstha

Tq. Hadgaon Dist. Nanded

# MAHARASHTRA POLLUTION CONTROL BOARD

Tel: 02462 - 242492  
Fax: 02462 - 242492  
Website: <http://mpcb.gov.in>  
Email: [sronanded@mpcb.gov.in](mailto:sronanded@mpcb.gov.in)



Lahoti Complex, 2nd Floor,  
Near Shivaji Statue,  
Vajirabad, Nanded - 431601

ORANGE/S.S.I

Date: 28/10/2024

No:- Format1.0/SRO/UAN No.0000219549/CO/2410002726

To,  
UMANG HOSPITAL  
Property No. 1-24-72,  
VIP Road, Vishnu Nagar Nanded  
-431605  
Email: [ravIndranarod@gmail.com](mailto:ravIndranarod@gmail.com)  
Contact No.: 8208019881



Your Service is Our Duty

Combined Consent to 1st Operate and BMW Authorization (CCA) under the provisions of Water (P & CP) Act, 1974, Air (P & CP) Act, 1981 and Bio-Medical Waste Management Rules, 2016 as amended and Hazardous Waste (M & TM) Rules, 2016.

Ref: Your application for Combine Consent and Bio-Medical Waste Authorization dated 27/08/2024

After examining the proposal, The Maharashtra Pollution Control Board hereby grant 1st operate Combined Consent and BMW Authorization to HCE under Section 25/26 of the Water (P&CP) Act, 1974, Section 21 of the Air (P&CP) Act, 1981 and Bio-Medical Waste Management Rules, 2016, and Hazardous Wastes (Management & Transboundary Movement) Rules, 2016 respectively, under Environment (Protection) Act, 1986, subject to terms and conditions as specified below and in the **Schedule(I-IV) and Annexure (I-II)** enclosed in this order.

1. The CCA is granted for a period up to 31.12.2025

2. The capital investment of the HCF is ₹93.23 Lakhs (As per C.A Certificate Submitted by HCF)
3. HCF Area: - Plot Area 428.00 M<sup>2</sup> with Built-up area 673.00 M<sup>2</sup>.
4. **Activities Included**
  - a. Total Number of Beds : 5 Nos. (As per BNH certificate no. 420 valid upto 31-03-2026)
    - i. General Beds : 5 Nos

5. **Conditions under the Water (P&CP) Act, 1974:-**

1. Quantity of total water consumption shall not exceed 1.5 M<sup>3</sup>/day. You shall not use the ground water without obtaining prior permission of Central Ground Water Authority.
2. You shall provide adequate treatment & disposal facility for Sewage & Effluent generated as specified in **Annexure-I**
3. You shall provide water meter at water intake point & at sewage/Effluent disposal point and shall maintain monthly records thereof.

6. **Conditions under the Air (P&CP) Act, 1981:-**

1. You shall use the fuel for DG set as specified in the **Annexure-II**.
2. You shall provide adequate emission control system to DG set as specified in **Annexure-II**.
3. You shall strictly observe noise standards applicable for DG set stack emission and ambient noise level as per **Annexure-II**.

7. **Conditions under Hazardous and Other Wastes(Management, Handling & Transboundary Movement) Rules, 2016 for treatment and disposal of hazardous waste:-**

You shall have valid membership of CHWISDE and shall dispose the Hazardous waste generated in strict compliance with said rules and maintain record thereof.

| Sr No | Type of Waste | HW Category no. | Quantity | UOM | Disposal |
|-------|---------------|-----------------|----------|-----|----------|
|       |               | NA              |          |     |          |

8. **Conditions under Solid Waste Management rules 2016**

1. You Shall Handover Solid waste (Other Than BMW) to Local bodies as per provisions of SWM Rules, 2016.
2. You shall Not mix general solid waste with Bio Medical Waste.

9. **Conditions under BMW Management rules, 2016 (As Amended):-**

*[Signature]*

SECRETARY

1. You shall adhere to the BMW Generation quantity and storage conditions as specified in Schedule-I of BMW Management Rules, 2016, as amended.
  2. You shall segregate and handover BMW to BMW T&D CTF **Superb Hygenic Disposal (India) Pvt Ltd - Nanded, Nanded** Strictly complying with the Provisions of Schedule-I and Maintain record of the same.
  3. **Cytotoxic Drugs/ Waste:** You shall have separate storage, marked with the symbol of Bio Hazard & Cytotoxic Hazard for outdated, discarded, unused cytotoxic drugs/waste and submit details of Management and Handling of outdated, discarded, unused Cytotoxic drugs in the format prescribed by CPCB which is available on [www.cpcb.nic.in](http://www.cpcb.nic.in) along with Annual Report to MPCB with a copy to CPCB before 30th June of every year.
  4. **Mercury Waste:** You shall manage the Mercury Waste in HCE in environmentally sound manner (including storage, spilled collection, transportation and disposal) as per guidelines published by CPCB as detailed in document entitled "Environmentally Sound Management of Mercury Waste in Health Care Facilities" ([www.cpcb.nic.in](http://www.cpcb.nic.in)).
10. You shall not undertake Modifications/ Upgradation in existing facility without obtaining prior Environment Clearance under the Provision of EIA notification, 2006 Or Consent to Establish from the MPC Board as applicable.
  11. Any unauthorized change in Location, Name, personnel, equipment or working conditions as mentioned in the application by you shall constitute a breach of this CCA. In case of any change you shall apply fresh for CCA or amendment as applicable.
  12. You shall not Rent, Lend, Sell, Transfer or Close Down the facility or otherwise transport / Handover the Bio-Medical waste generated for any other purpose without obtaining prior written permission of the MPC Board.
  13. This Board reserves the right to review, amend, suspend, revoke, or change any of the conditions applicable under this CCA and the same shall be binding on the HCE.
  14. You shall maintain records of MPC board Officers visit and shall obey all the lawful instructions issued by the Board Officers from time to time.
  15. Any violation of provisions of BMW Management Rules, 2016 as amended shall attract the penal provisions of Environment (Protection) Act, 1986 and Violations under the provisions of Water (P&CP) Act 1974, Air (P&CP) act 1981 shall attract provisions of respective act including closure of the facility and prosecution.
  16. This CCA shall not be construed as exemption from obtaining necessary NOC/permission from any other Government agencies as applicable.

This consent is issued on the basis of information/documents submitted by the Applicant/Project Proponent, if it has been observed that the information submitted by the Applicant/Project Proponent is false, misleading or fraudulent, the Board reserves its right to revoke the consent & further legal action will be initiated against the Applicant/Project Proponent.



*[Handwritten Signature]*

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Signed by: Shri. Shankar S. Kendule  
Sub Regional Officer  
For and on behalf of  
Maharashtra Pollution Control Board  
sronanded@mpcb.gov.in  
2024-10-28 04:13:43 IST

Received Consent/Authorization fee of -

UMANG HOSPITAL/CO/UAN No. MPCB-CONSENT-0000219549/Indus-Id.141318

/QMS.P06\_F02/00

PRINCIPAL  
Ramratan BSC Nursing College  
Bhokar Dist. Nanded.

*[Handwritten Signature]*


SECRETARY of 11  
Jeevanjyot Samajik Sanstha  
Ashti, Tq. Hadgaon Dist. Nanded

28-10-2024 04:13:23 pm


| Sr.No | Amount(Rs.) | Transaction/DR.No. | Date       | Transaction Type |
|-------|-------------|--------------------|------------|------------------|
| 1     | 5000.00     | TXN2408004614      | 27/08/2024 | Online Payment   |
| 2     | 10000.00    | TXN2410000032      | 01/10/2024 | Online Payment   |
| 3     | 6644.00     | TXN2410000037      | 01/10/2024 | Online Payment   |

**Copy to:**

1. Regional Officer, MPCB, Chhatrapati Sambhajnagar for information.
2. Cheif Accounts Officer, MPCB, Sion, Mumbai
3. I/C EIC- for record & website updating purpose.

  
**PRINCIPAL**  
Ramratan BSC Nursing College  
Bhakar Dist. Manded.



  
**SECRETARY**  
Jeevanjyot Samajik Sanstha  
Ashti, Tq. Hadgaon Dist. Nanded  
Page 4 of 11

## Conditions under Water (P &amp; CP), 1974 Act: (Refer Condition No. 5)

## A. Water Consumption Details:-

| Sr. No. | Purpose for water consumed   | Water consumption quantity (CMD) |
|---------|--|----------------------------------|
| 1.      | Industrial Cooling, spraying in mine pits or boiler feed                                       | 0.00                             |
| 2.      | Domestic purpose   | 1.50                             |
| 3.      | Processing whereby water gets polluted & pollutants are easily biodegradable                   | 0.00                             |
| 4.      | Processing whereby water gets polluted & pollutants are not easily biodegradable and are toxic | 0.00                             |
| 5.      | Other such as agriculture, gardening, etc.   | 0.00                             |

## B. Conditions for Sewage &amp; Effluent Generation, Treatment and Disposal:-

| Sr. No. | Description     | Permitted quantity of discharge (CMD) | Standards to be achieved | Disposal      |
|---------|-----------------|---------------------------------------|--------------------------|---------------|
| 1       | Domestic Sewage | 1.0                                   | As per clause 'C'        | Public sewers |
| 2       | Trade effluent  | 0                                     | As per clause 'C'        | Public sewers |

- C. You shall operate the combined waste water treatment plant of adequate design and capacity to treat the domestic sewage and trade effluent so as to achieve the following standards as prescribed below under E (P) Act, 1986 and Rules made there under and recycle treated effluent after achieving standard prescribed below.

| Sr. No. | Parameters           | Standards for discharge in Public sewers               |
|---------|----------------------|--|
| 1       | pH Value             | 5.5-9.0  |
| 2       | Suspended Solid mg/l | 600  |
| 3       | Oil and Grease mg/l  | 20   |
| 4       | BOD mg/l             | 350  |
| 5       | COD mg/l             | Not applicable   |
| 6       | Bio-Assay Test       | 90 % survival of fish after 96 hours in 100 % effluent |

- D. You shall ensure replacement of pollution control system or its parts after expiry of its expected life as defined by manufacturer so as to ensure the compliance of standards and safety of the operation thereof.
- E. You shall provide Primary/ Secondary/ tertiary treatment system and disinfection facility.
- F. The Applicant shall obtain prior consent of the Board to take steps for Expansion/Modification of any treatment and disposal system or an extension or addition thereto.
- G. You shall provide Specific Water Pollution control system as per above conditions and conditions of Environmental Clearance, if applicable.
- H. All Health Care Facilities irrespective of the bed capacity shall install scientifically designed disinfection facilities before discharging the effluent into sewer line or reuse in the premises as stipulated under Schedule II (6) of Biomedical waste Management Rules, 2016.

*Jm*  
**PRINCIPAL**  
 Ramratan BSC Nursing College  
 Bhokar Dist. Na.

*Padhane*

**SECRETARY**

Jeevanjyot Samajik Sanstha  
 Dist. Nanded

Terms & conditions for Incinerator(s) and D.G. Set(s) under Air (P & CP) Act, 1981 and Bio Medical waste management Rule, 2016: (Refer Condition No.6)

1. You shall observe following fuel pattern and erect following stack (s):

| Sr. No. | Stack Attached to | Fuel Type | Quantity | Stack Height (Mtr) |
|---------|-------------------|-----------|----------|--------------------|
|---------|-------------------|-----------|----------|--------------------|

2. The Applicant shall obtain prior permission of MPC board for providing additional control equipment with necessary specifications and operation thereof or replacement/alteration well before its life come to an end or erection of new pollution control equipment.
3. The Board reserves its rights to vary all or any of the condition in the consent, if due to any technological improvement or otherwise such variation (including the change of any control equipment, either in whole or in part as necessary).
4. Conditions for D.G. Set:-
- Noise from the D.G. Set should be controlled by providing an acoustic enclosure or by treating the room acoustically for control of noise.
  - Acoustic enclosure/acoustic treatment of the room should be designed for minimum 25 dB (A) insertion loss or for meeting the ambient noise standards, whichever is on higher side. A suitable exhaust muffier with insertion loss of 25 dB(A) shall also be provided. The measurement of insertion loss will be done at different points at 0.5 meters from acoustic enclosure/room and then average.
  - You shall make efforts to bring down noise level due to DG set, outside industrial premises, within ambient noise requirements by proper siting and control measures.
  - Installation of DG Set must be strictly in compliance with recommendations of DG Set manufacturer.
  - A proper routine and preventive maintenance procedure for DG set should be set and followed in consultation with the DG manufacturer which would help to prevent noise levels of DG set from deteriorating with use.
  - D.G. Set shall be operated only in case of power failure.
  - The applicant should not cause any nuisance in the surrounding area due to operation of D.G. Set.
  - The applicant shall comply with the notification of MoEFCC dated 17.05.2002 regarding noise limit for generator sets run with diesel.
5. You shall take adequate measures for control of noise levels from its own sources within the premises so as to maintain ambient air quality standard in respect of noise to less than 75 dB (A) during day time and 70 dB (A) during night time. Day time is reckoned in between 6 a.m. and 10 p.m. and night time is reckoned between 10 p.m. and 6 a.m.

*Ju*  
**PRINCIPAL**  
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 Bhokar Dist. Nanded

*Jadhav*  
**SECRETARY**  
 Jeevanjyot Samajik Sanstha  
 Ashti, Tq. Hadgaon Dist. Nanded

**SCHEDULE-I**

**Authorization for Management of Bio-Medical Waste (Category and Quantity)**

The authorization is granted for Generation and Segregation of BioMedical Waste (BMW) in waste categories and quantities listed here in below:


| Sr. No | Category            | Type of Waste   | Quantity not to exceed (Kg/Month) | Segregation Colour coding  | Treatment & Disposal   |
|--------|---------------------|---|-----------------------------------|--|--|
| 1      | Yellow              | a) Human Anatomical waste   | 1.00                              | Yellow coloured non- chlorinated plastic bags.                               | Bio medical Waste shall be sent to MPCB authorized BMW-CTF Superb Hygenic Disposal (India) Pvt Ltd - Nanded, Nanded Nanded |
|        |                     | b) Animal Anatomical Waste  | 0.00                              |  |  |
|        |                     | c) Soiled Waste   | 10.00                             |  |  |
|        |                     | d) Expired or Discarded Medicines   | 0.00                              |  |  |
|        |                     | e) Chemical Waste   | 0.00                              | Separate collection system leading to effluent treatment system.             |  |
|        |                     | f) Chemical Liquid Waste  | 0.00                              |  |  |
|        |                     | g) Discarded linen, mattresses, beddings contaminated with blood or body fluid. | 0.00                              | Yellow coloured non - chlorinated plastic bags or suitable packing material. |  |
|        |                     | h) Microbiology Biotechnology and other clinical laboratory waste               | 0.00                              | Autoclave safe plastic bags or containers.                                   |  |
| 2      | Red                 | Contaminated waste (Recyclable)   | 10.00                             | Red coloured non chlorinated plastic bags or containers.                     | Bio medical Waste shall be sent to MPCB authorized BMW-CTF Superb Hygenic Disposal (India) Pvt Ltd - Nanded, Nanded Nanded |
| 3      | White (Translucent) | Waste sharps including Metals   | 1.00                              | Puncture proof, Leak proof, tamper proof container.                          | Bio medical Waste shall be sent to MPCB authorized BMW-CTF Superb Hygenic Disposal (India) Pvt Ltd - Nanded, Nanded Nanded |
| 4      | Blue                | a) Glassware  | 0.00                              | Puncture proof, Leak proof with Blue coloured marking.                       | Bio medical Waste shall be sent to MPCB authorized BMW-CTF Superb Hygenic Disposal (India) Pvt Ltd - Nanded, Nanded Nanded |
|        |                     | b) Metallic body implants   | 0.00                              |  |  |


*[Signature]*  
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*[Signature]*  
**SECRETARY**

**Responsibilities of HCF**

1. You shall handover Bio Medical waste only to MPCB Authorized Common Bio medical waste treatment and Disposal facility **Superb Hygenic Disposal (India) Pvt Ltd - Nanded, Nanded** and maintain records thereof for 5 years.
2. You shall establish bar code for handling of bio-medical waste.
3. You shall ensure segregation of Bio-Medical Waste in colour coded bags as per BMW Management Rules, 2016
4. You shall not store Bio Medical waste beyond 48 hours from the generation.
5. You shall use only non-chlorinated plastic coloured bags.
6. You shall ensure use of colour coded bins and bags for segregation of BMW as required under BMW Management Rules 2016.
7. You shall not mix General/other Solid waste with Bio Medical Waste.
8. You shall ensure segregation, treatment and disposal of General / Other Municipal solid waste as per Solid Waste Management rules, 2016.
9. You shall pay the charges to authorized Common Bio Medical waste Treatment and Disposal facility for its services as agreed upon during the membership registration or as amended.
10. You shall comply and strictly abide with the conditions stipulated in BMW Management Rules, 2016 as amended time to time.
11. You shall handover Plastic / Metal waste (BMW) to Common Bio medical waste treatment and Disposal facility allocated to you for treatment & disposal or plastic/metal recycler authorized by MPCB for BMW Handling and maintain records thereof & submit to MPCB in Annual report.
12. You shall provide training to all workers involved in handling of bio-medical waste at the time of induction and at least once a year thereafter and maintain record thereof.
13. You shall undertake appropriate medical examination of all BMW Waste handlers & staff at the time of induction and at least once in a year and immunize all involved in management of Bio Medical Waste for protection against diseases, including Hepatitis B and Tetanus, that are likely to be transmitted while handling bio medical waste and maintain the records for the same.
14. You shall ensure use of personal protective Equipment such as Heavy Duty Gloves (Workman's Gloves), Gum Boots or safety shoes for waste collectors, Face mask, Head Cap, Splash Proof Gowns or aprons etc., Disposal gloves by waste handlers.
15. You shall develop and operate own website. The website should be uploaded on monthly basis with all the information relating to Bio-Medical waste management including this CCA and other permission and report.
16. You shall maintain all record for Generation, for a period of five years and produce whenever asked by MPCB authorities.
17. The occupier and operator of a Health Care Establishment shall be liable for all the damages caused to the environment or the public due to improper handling of bio-medical wastes.
18. You shall ensure submission of Annual Report of BMW for the period Jan to Dec, including category and quantity of BMW Generated and Disposed in Form IV for preceding year before 30th June of every year to the Regional Office, MPCB, Chhatrapati Sambhajinagar and uploading the same to MPCB Portal (<https://www.ecmpcb.in/>).

  
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**SECRETARY**  
Jeevanjyot Samajik Sanstha,  
Ashti, Tq. Hadgaon, Dist. Nanded

**Bank Guarantees**

1. Bank Guarantee imposed to ensure timely compliance, to be observed by operator.

| Sr.No        | Activity / Condition to be Complied  | Compliance Timeline (Months) | Bank Guarantee Amount |
|--------------|--|------------------------------|-----------------------|
| <b>1A</b>    | <b>Operation and Maintenance</b>   |                              |                       |
| 1            | To Segregate and Handle BMW as per Schedule I  | Continuous                   | 25,000.00             |
| <b>1B</b>    | <b>Records</b>   |                              |                       |
| 1            | To Maintain records of BMW and submission of Annual Report for preceding calendar year in Form -IV before 30th June every year | Continuous                   | 15,000.00             |
| <b>2</b>     | <b>Performance</b>   |                              |                       |
| 1            | To provide BMW separate storage facility as per guidelines of CPCB   | Continuous                   | 25,000.00             |
| <b>Total</b> |  |                              | <b>65,000.00</b>      |

**Note:** You shall extend the existing submitted Bank Guarantee for the Activity / Condition to be Complied mentioned in the above table valid upto the validity of this CCA + 4 months additional. Submit a fresh Bank Guarantee for the newly added Activity / Condition to be Complied mentioned in the above table valid upto the validity of this CCA + 4 months additional.

The above Bank Guarantee(s) shall be submitted by the applicant in favour of Regional Officer at the respective Regional Office within 15 days from the date of issue of Consent.

If the above Bank Guarantee is not submitted within stipulated period, then 12% interest will be levied as a penalty as per circular dtd 29/02/2024 No. BO/MPCB/AS(T)/Circular/B-240229FTS0122

  
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**SECRETARY**  
 Ganeshwari Samajik Sanstha  
 Ashli, Tq. Hadgaon Dist. Nanded

**General Conditions**

The following general conditions shall apply:-

1. You shall provide facility for collection of environmental samples and samples of trade and sewage effluents, air emissions and hazardous waste to the Board staff at the terminal or designated points and shall pay to the Board for the services rendered in this behalf.
2. Whenever due to any accident or other unforeseen act or event, such emissions occur or is apprehended to occur in excess of standards laid down, such information shall be forthwith reported to Board, concerned Police Station, Executive Engineer MIDC and Local Body. In case of failure of pollution control equipment's, the process connected to it shall be stopped.
3. You shall provide an alternate electric power source sufficient to operate all pollution control facilities installed to maintain compliance with the terms and conditions of the consent. In the absence, the applicant shall stop, reduce or otherwise, control operation to abide by terms and conditions of this consent.
4. You shall submit to this office, the 30th day of September every year, the Environmental Statement Report for the financial year ending 31st March in the prescribed Form-V as per the provisions of rule 15 of the Environment (Protection) (Second Amendment) Rules, 1992.
5. You shall comply with the Hazardous Waste (M, H & TM) Rules, 2016 and submit the Annual Returns as per Rule 20(2) of Hazardous Waste (M, H & TM) Rules, 2016 for the preceding year April to March in Form-IV by 30th June of every year to Regional Office, Chhatrapati Sambhajnagar.
6. You shall engage qualified staff/personnel/agency to see the day to day compliance of consent & authorization condition towards Environment Protection.
7. Separate drainage system shall be provided for collection of trade and sewage effluents. Terminal manholes shall be provided at the end of the collection system with arrangement for measuring the flow. No effluent shall be admitted in the pipes/sewers downstream of the Terminal manholes. No effluent shall find its way other than in designed and provided collection system.
8. Neither storm water nor discharge from other premises shall be allowed to mix with the effluents from the HCE.
9. You shall install a separate meter showing the consumption of energy for operation of domestic and industrial effluent treatment plants and air pollution control system. A register showing consumption of chemicals used for treatment shall be maintained.
10. You should not cause any nuisance in surrounding area. You shall maintain good housekeeping.
11. You shall bring minimum 33% of the available open land under green coverage/ plantation. The applicant shall submit a yearly statement by 30th September every year on available open plot area, number of trees surviving as on 31st March of the year and number of trees planted.
12. The non-hazardous solid waste arising in the HCE premises, sweepings, etc. be disposed of scientifically so as not to cause any nuisance / pollution. The applicant shall take necessary permissions from civic authorities for disposal of solid waste.
13. You shall achieve the National Ambient Air Quality standards prescribed vide Government of India, Notification Dated. 16/11/2009 as amended.

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Tq. Hadgaon Dist. Nanded

14. You shall submit an official e-mail address and any change will be duly informed to the MPCB.
15. You shall observe provisions of E-waste (Management) Rules 2016 & as amended time to time and Batteries (Management and Handling) Amendment Rules, 2010.
16. An inspection book shall be opened and made available to the Board's officers during their visit to the HCE.
17. In case you use/ handle/ generate the cytotoxic waste you shall strictly adhere to the standards/ SOPs applicable and waste shall be labelled specifically as "Cytotoxic Waste" with symbol on waste containers/ bags and shall handover to BMW CTFs.
18. You shall obtain required permissions from competent authority for radio active material user/ handling/ disposal of waste before commencement of such activity.
19. The Energy source for lighting purpose shall preferably be LED based.
20. You shall harvest rainwater from roof tops of the buildings and storm water drains to recharge the ground water and utilize the same for different industrial applications within the plant
21. You shall provide personal protection equipment as per norms of Factory Act 1948
22. You are responsible to submit application for renewal of Combined Consent & Biomedical Waste authorization before 60 days of expiry.


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This certificate is digitally & electronically signed.

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**PRINCIPAL**  
Ramratan BSC Nursing College  
Bhokar Dist. Nanded.

  
**SECRETARY**  
Jeevanjyot Samajik Sanstha  
Ashti, Tq. Hadgaon Dist. Nanded



महाराष्ट्र MAHARASHTRA

2025

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SUB TREASURY OFFICE



18 JUN 2025

SUB TREASURY OFFICER  
BHOKAR

प्रतिज्ञापत्र

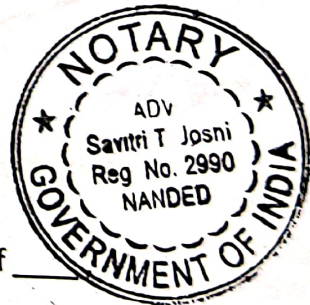
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मुद्रांक दिवशी नोंद नं. १५५६ दिनांक ०१/०६/२०२५  
खरेदीदाराने नांव मंजोश केशव जाधव  
पत्ता व सद्दी भोकर जिवन ज्योत समाजिक संस्था, भोकर

ओ. एम. कासारपेठकर

मुद्रांक विक्रेता, परवाना क्र. ३४०२००४  
रवि झेरॉक्स सेंटर, भोकर जि. नरविड

MEMORANDUM OF UNDERSTANDING (Affiliated Hospital)

(Between Affiliated Hospital and Nursing College)



This Memorandum of Understanding (MoU) is made and entered into on this \_\_\_\_\_ day of \_\_\_\_\_, by and between:

Party No. 1

Sahara Hospital Psychiatric, Bhokar Road, Nanded,  
Through its President, Dr. Vishal Pande,  
(Hereinafter referred to as "Party No.1"),

AND

Party No. 2

Jeevan Jyot Samajik Sanstha, Tq. Bhokar, Dist. Nanded,  
Through its President, Ram Jadhav, Ram Ratan B.Sc. Nursing College, Bhokar,  
(Hereinafter referred to as "Party No.2").

PRINCIPAL  
Ramratan BSC Nursing College  
Bhokar Dist. Nanded.

WHEREAS

1 Sahara Hospital Psychiatric Hospital is a registered healthcare institution under the Bombay Nursing Home Registration Act, 1949. It operates with specialized departments in Gynaecology, Obstetrics, Surgery, Paediatrics, and Vaccination, and is compliant with DMER/MSBPEN/MUHS norms. The hospital is equipped with well-trained and certified staff and qualified medical professionals.

2. Ram Ratan B.Sc. Nursing College, operated by Jeevan Jyot Samajik Sanstha, is a recognized educational institution offering nursing education.

3. Party No.1 willingly agrees to provide clinical field experience and hospital-based training for the students of Party No.2 at Sahara Hospital Psychiatric as part of their nursing education and internship programs.

NOW, THEREFORE,

Both parties mutually agree to the terms of this understanding and shall work together in good faith to facilitate the clinical exposure of students from Party No.2 at the premises of Party No.1.

IN WITNESS WHEREOF,

The parties have executed this Memorandum of Understanding on the date and place mentioned below:

Date: \_ / \_ /

Place: Bhokar

EXECUTANTS

For Party No.1

Sahara Hospital Psychiatric

Through its President:

Dr. Vishal Pande

(Signature & Seal)

Witnesses:

1. :- N. Shinde 2. :- \_\_\_\_\_

For Party No.2

Jeevan Jyot Samajik Sanstha / Ram Ratan B.Sc. Nursing College, Bhokar

Through its President: Dr. Ram Jadhav

(Signature & Seal)

Witnesses:

1. :- R. Jadhav 2. :- \_\_\_\_\_

8 AUG 2025

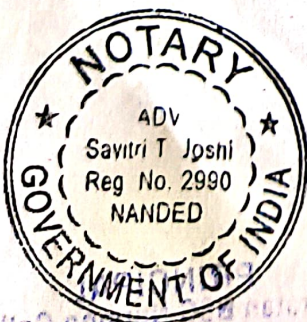
"BEFORE ME"

SAVITRI T. JOSHI

Advocate & Notary

Government of India


CELL 9421761898



Sahara Neuro Psychiatry Hospital Nanded  
Classification Beds

| Beds       | No. of Sanction | Occupancy         |         |
|------------|-----------------|-------------------|---------|
|            |                 | Day of Inspection | Monthly |
| Psychiatry | 30              | 12                | 80      |

  
**PRINCIPAL**  
Ramratan BSC Nursing College  
Bhokar Dist. Nanded.

  
**SECRETARY**  
Jeevanjyot Samajik Sanstha  
Mhiti, Tq. Hadgaon Dist. Nanded

नांदेड वाघाळा शहर महानगरपालिका, नांदेड.  
NANDED WAGHALA CITY  
MUNICIPAL CORPORATION, NANDED.



महाराष्ट्र सुधारीत नियम 2021 कलम 5 अन्वये दिलेले नोंदणी प्रमाणपत्र  
Certificate of Registration under Section 5 of the  
(नियम 5 अन्वये) (Under Rule 5)

महाराष्ट्र सुधुषा गृह नोंदणी सुधारीत नियम 2021 अन्वये श्री / श्रीमती SIDDIQUE AHMED IQBAL AHMED यांचे  
SAHARA NEURO PSYCHIATRY HOSPITAL AND COUNSELING CENTRE (A UNIT OF MINDVISTA NEUROPSYCH  
WELLNESS PVT LTD) येथील सुधुषा गृह / प्रसूती गृह नोंदणी केलेले असून सदरचे सुधुषा गृह व प्रसूतीगृह चालविण्यास परवाना  
देण्यात येत आहे.

This is to Certify that Shri Shrimati SIDDIQUE AHMED IQBAL AHMED has been registered under  
Bombay Nursing Homes Registration Act, 2021 in respect of SAHARA NEURO PSYCHIATRY HOSPITAL AND  
COUNSELING CENTRE (A UNIT OF MINDVISTA NEUROPSYCH WELLNESS PVT LTD) Situated at PLOT NO.  
121, OPP SPARSH CLINIC BORBAN FACTORY AREA VAZIRABAD NANDED and has been authorised to carry on  
the said Nursing Home.

|                              |              |                                     |      |
|------------------------------|--------------|-------------------------------------|------|
| नोंदणी क्रमांक               | : 0524449    | प्रसूती खाटांची संख्या              |      |
| Registration No              | : 0524449    | Maternity No. of Coats              | : 0  |
| नोंदणी दिनांक                | : 09-05-2024 | इतर रुग्णांसाठी खाटांची संख्या      |      |
| Date of Registration         | : 09-05-2024 | Other Nursing Patients No. of Coats | : 30 |
| ठिकाण                        | : नांदेड     | Total                               | : 30 |
| Place                        | : Nanded     |                                     |      |
| प्रमाणपत्र दित्याचा दिनांक   | : 09-05-2024 |                                     |      |
| Date of issue of Certificate | : 09-05-2024 |                                     |      |

सदरच्या प्रमाणपत्राची वैधता दिनांक पर्यंत 31-03-2027 राहिल.  
This Certificate Shall be valid up to 31-03-2027

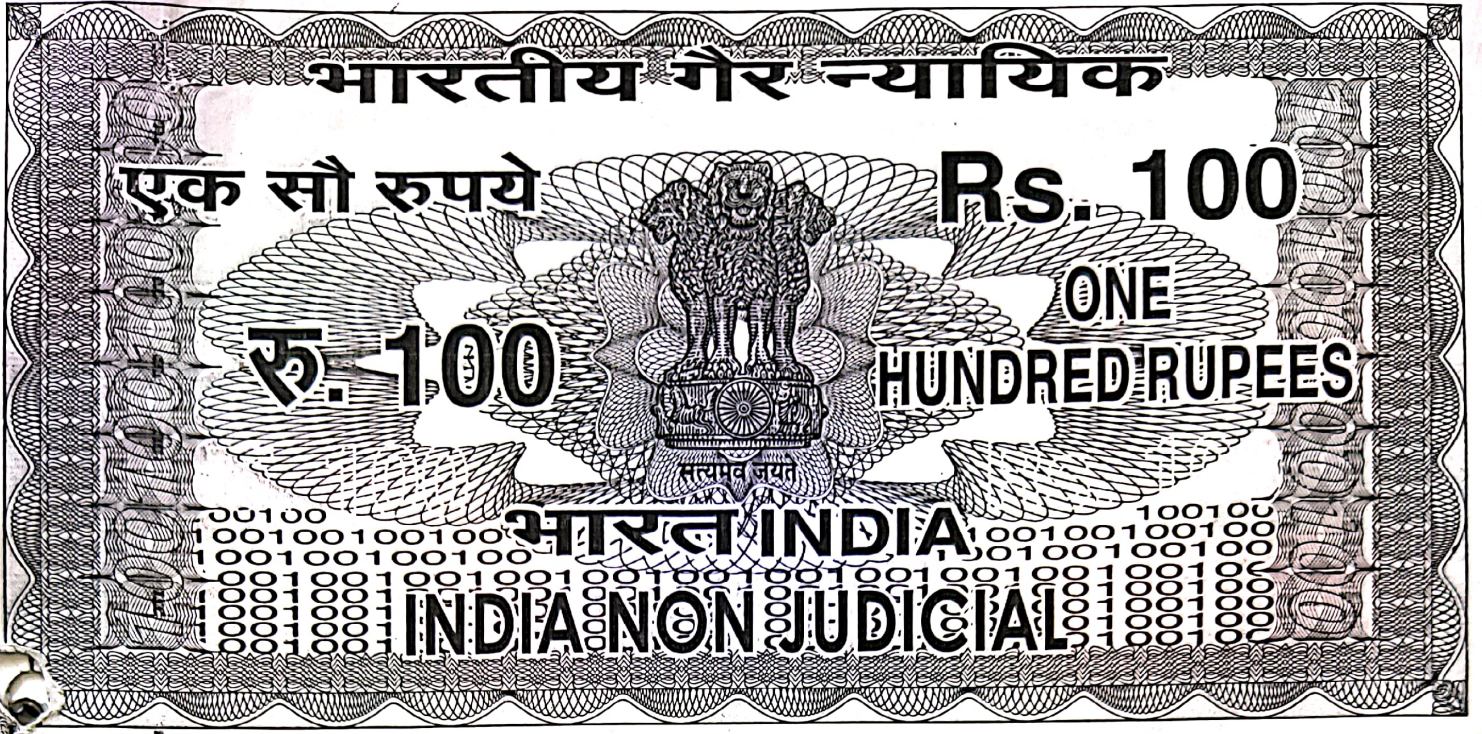
*S. Bisen*

वैद्यकीय आरोग्य अधिकारी,  
नांदेड वाघाळा शहर महानगर पालिका, नांदेड  
Medical Health Officer

Nanded Waghala City Municipal Corporation, Nanded.

*Princpal*  
PRINCIPAL  
Ramratan BSC Nursing College,  
Bhokar Dist. Nanded.

*Secretary*  
SECRETARY  
Jeevanjyot Samajik Sanstha  
Ashli, Tq. Hadgaon Dist. Nanded



महाराष्ट्र MAHARASHTRA

2025

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प्रतिज्ञापत्र

SUB TREASURY OFFICE

प्रतिज्ञापत्रासाठी For Affidavit (प्रतिज्ञापत्र - 4)  
मुद्रांक विक्री नोंदणी क्र. 1545 दिनांक 01/08/2025  
खरेदीदाराचे नांव मंजोश केशव जाधव  
पत्ता व सही भोकर जिवन ज्योत सामाजिक संस्था, भोकर

14 2025

SUB TREASURY OFFICER  
BHOKAR

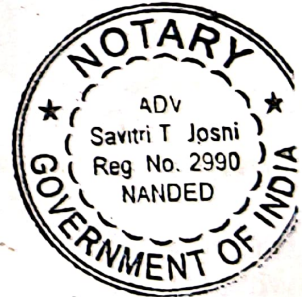
ओ. एम. कासारपेटकर

मुद्रांक विक्री, परवाना क्र. 3802008

रावे जेव्हा मॅटार, भोकर जि. नंदेड

MEMORANDUM OF UNDERSTANDING (Affiliated Hospital)

(Between Affiliated Hospital and Nursing College)



This Memorandum of Understanding (MoU) is made and entered into on this \_\_\_\_\_ day of \_\_\_\_\_, by and between:

Party No. 1

Jeevan Jyot Hospital, Kiwat Road, Bhokar,

Through its President, Dr. Anita Jadhav,

(Hereinafter referred to as "Party No.1"),

AND

Party No. 2

Jeevan Jyot Samajik Sanstha, Tq. Bhokar, Dist. Nanded,

Through its President, Dr. Ram Jadhav, Ram Ratn B.Sc. Nursing College, Bhokar,

(Hereinafter referred to as "Party No.2").

PRINCIPAL  
Ramratan BSC Nursing College  
Bhokar Dist. Nanded.

WHEREAS

1. **Jeevan Jyot Hospital** is a registered healthcare institution under the Bombay Nursing Home Registration Act, 1949. It operates with specialized departments in Gynaecology, Obstetrics, Surgery, Paediatrics, and Vaccination, and is compliant with DMER/MSBPEN/MUHS norms. The hospital is equipped with well-trained and certified staff and qualified medical professionals.
2. **Ram Ratan B.Sc. Nursing College**, operated by **Jeevan Jyot Samajik Sanstha**, is a recognized educational institution offering nursing education.
3. Party No.1 willingly agrees to provide clinical field experience and hospital-based training for the students of Party No.2 at **Jeevan Jyot Hospital** as part of their nursing education and internship programs.

NOW, THEREFORE,

Both parties mutually agree to the terms of this understanding and shall work together in good faith to facilitate the clinical exposure of students from Party No.2 at the premises of Party No.1.

IN WITNESS WHEREOF,

The parties have executed this Memorandum of Understanding on the date and place mentioned below:

Date: \_ / \_ /

Place: Bhokar

EXECUTANTS

For Party No.1

**Jeevan Jyot Hospital**, Bhokar Through its President:

**Dr. Anita Jadhav**

(Signature & Seal)

Witnesses:

1.:- \_\_\_\_\_ 2.:- \_\_\_\_\_

For Party No.2

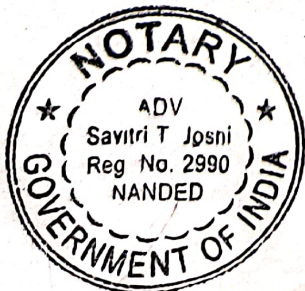
**Jeevan Jyot Samajik Sanstha / Ram Ratan B.Sc. Nursing College**, Bhokar

Through its President: **Dr. Ram Jadhav**

(Signature & Seal)

Witnesses:

1.:- Radhak 2.:- Radhak

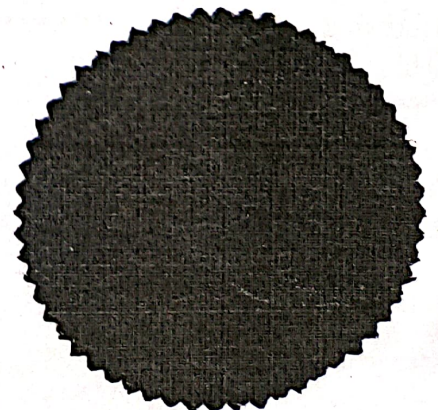


8 AUG 2025

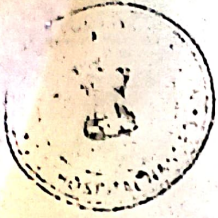
"BEFORE ME"

**SAVITRI T. JOSHI**

Advocate & Notary  
Government of India  
CELL 9421761898



GOVERNMENT



MAHARASHTRA  
NURSING HOMES

# Public Health Department

Certificate of Registration Under Section 3 of the Maharashtra Nursing Home  
Registration Act, 1949  
(Under Rule 5)

No. 201.

This is Certify that Shri/Smt. Dr. Anita Ram Tadha  
Has been registered under the Maharashtra Nursing Homes Registration Act 1949 in  
respect Jivanjyot Hospital Bhokar situated at Bhokar  
and Jivanjyot Hospital Bhokar has been authorized to carry on the  
at kinwat Road Bhokar  
said nursing Home.

Registration No. 201.

Date of Registration 07/07/2021

Place :- Nanded.

Date of issue of certificate 01/04/2023  
(2<sup>nd</sup> Renewal of New Notification)  
This certificate of registration shall be valid upto 31 st March 2027.

Local Supervising Authority MS. RH. Bhokar

| NUMBER OF BEDS              |                  |
|-----------------------------|------------------|
| Maternity Cots              | → 10 Beds        |
| Other Nursing Patients Cots | → 10 Beds        |
| Total Cots                  | total → 10 Beds. |

Date : 15/02/2021.

Seal  
Govt.

1

M  
Civil Surgeon  
Nanded  
CIVIL SURGEON

DIST. HOSPITAL  
NANDED

Secy  
PRINCIPAL

Ramratan Nursing Institut.  
Bhokar Dist. Nanded

# MAHARASHTRA POLLUTION CONTROL BOARD

Tel: 02462 - 242492

Fax: 02462 - 242492

Website: <http://mpcb.gov.in>

Email: [sronanded@mpcb.gov.in](mailto:sronanded@mpcb.gov.in)



Lahoti Complex, 2nd Floor,  
Near Shivaji Statue,  
Vajirabad, Nanded - 431601

ORANGE/S.S.I

No:- Format1.0/SRO/UAN No.0000199782/CO/2405002759

Date: 30/05/2024

To,  
JIVAN JYOTI HOSPITAL  
HOUSE NO 737, AT. KINWAT ROAD, BHOKAR, TQ  
BHOKAR DIST NANDED  
-431801  
Email: [dranitajadhav777@gmail.com](mailto:dranitajadhav777@gmail.com)  
Contact No.: 8624808888

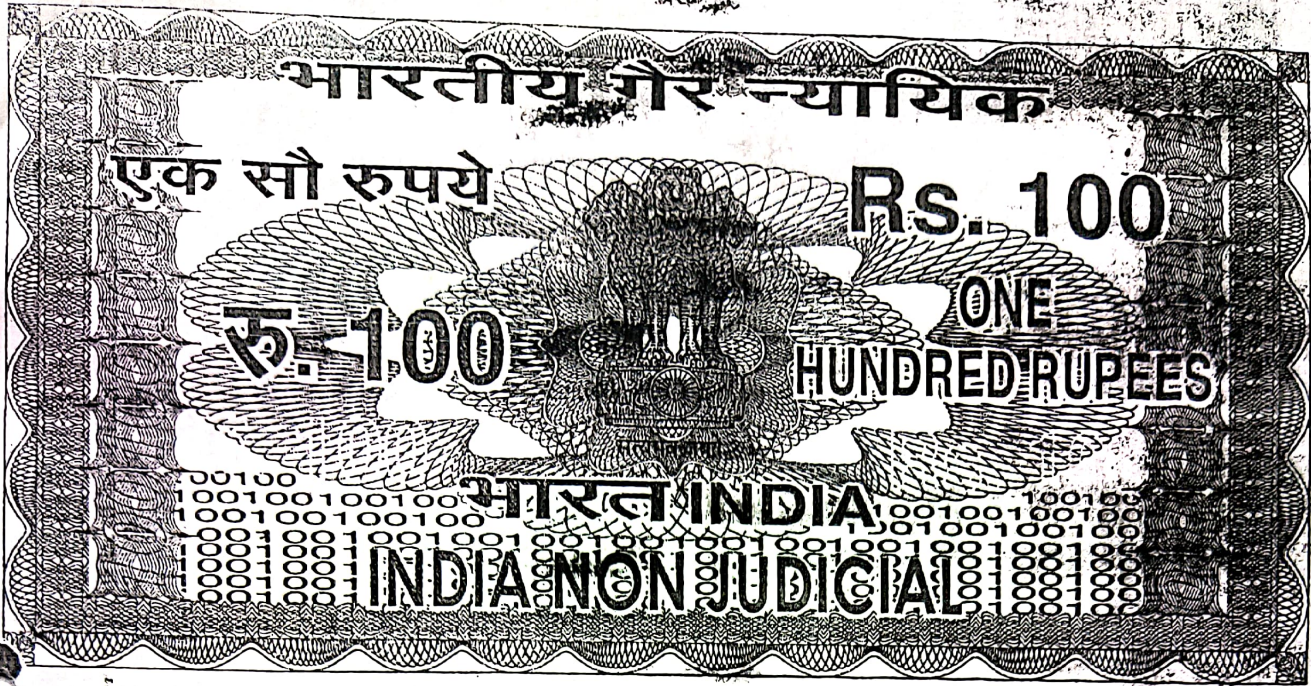


*Combined Consent to 1st Operate and BMW Authorization (CCA) under the provisions of Water (P & CP) Act, 1974, Air (P & CP) Act, 1981 and Bio-Medical Waste Management Rules, 2016 as amended and Hazardous Waste (M & TM) Rules, 2016.*

**Ref:** Your application for Combine Consent and Bio-Medical Waste Authorization dated 03/04/2024

After examining the proposal, The Maharashtra Pollution Control Board hereby grant of operate Combined Consent and BMW Authorization to HCE under Section 25/26 of the Water (P&CP) Act, 1974, Section 21 of the Air (P&CP) Act, 1981 and Bio-Medical Waste Management Rules, 2016, and Hazardous Wastes (Management & Transboundary Movement) Rules, 2016 respectively, under Environment (Protection) Act, 1986, subject to terms and conditions as specified below and in the **Schedule(I-IV) and Annexure (I-II)** enclosed in this order.

1. The CCA is granted for a period up to 31.12.2027



MAHARASHTRA

2024

41AB 249321

मुद्रांक विक्री नं. अ. २६६९१ दि. ०७/०३/२४

मुद्रांक विक्रीत घेणाऱ्याचे नाव.....

कोणारा.....

पत्ता व सही.....

राम रतन जधव  
सामाजिक संस्था  
०७/०३/२४

Stamp and signature area with some illegible text.

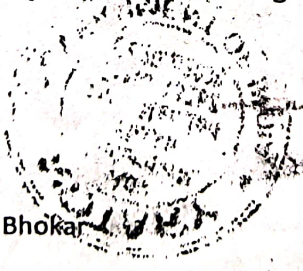
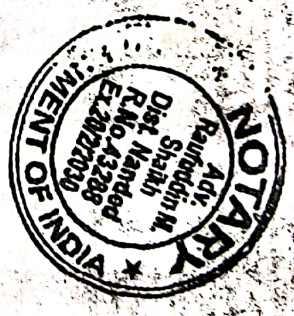
परवानाधारक मुद्रांक विक्रीत्याची सही व

परवाना क्रमांक - ३४०९०५३

MEMORANDUM OF UNDERSTANDING (Affiliated Hospital)

This Memorandum of understanding is made between following party

- 1. Shree Icon Multi Speciality Hospital, Nanded-Through its President Dr. Ram Ratan Jadhav (Hereinafter call as Party No.1)
- 2) Jeevan Jyot Samajik santha Tq. Bhokar Dist. Nanded Through its Secretary Ram Ratan BSC Nursing College, Bhokar Ishwar Ratan Jadhav Hereinafter call as party No.2)



SECRETARY  
Jeevanjyot Samajik Sanstha  
Ashti, Tq. Hadgaon, Dist. Nanded

PRINCIPAL  
Ram Ratan BSC Nursing College  
Dist. Nanded

WHEREAS the, Shree Icon Multi Speciality Hospital, is running a Hospital, which is covers Dedicated section for Gynaecology, Obstetrics, surgery, Paediatric, Vaconation as its distinctive features. The hospital is registered under section of Bombay nursing home registration act 1949 it has all specialities as per DMER/MSBPEN/MUHS norms. The Hospital have a well-trained certified staff in each sections and Qualified Doctors. Shree Icon Multi Speciality Hospital, giving wilful consent to send Students of Ram Ratan BSC Nursing College, Bhokar for clinical field experience at Our hospital therefore, this Memorandum of understanding & for which both the parties Have put their signatures below

Date:

EXCECLITANT

Place:

Bondhwa

1- Shree Icon Multi Speciality Hospital, Nanded

Through its President

Dr. Ram Ratan Jadhav

Cherinafter call as Party No.1)

Witnesses:

1. Anita Ram Jadhav

Anita

2. Dr. Jadhav

Jadhav

2) Jeevan Jyot Samajik santha

Ta. Dhokar Dat Nanded

Through its Secretary

Ram Ratan BSC Nursing College, Bhokar

Ishwar Ratan Jadhav,

(Hereinafter call as party No.2)




12 MAR 2025

"BEFORE ME"  
Raufuddin M. Shaikh  
Advocate & Notary  
(Appointed by Govt. of India  
Nanded Dist. Nanded. (M.S.))

*Faint blue stamp of Ram Ratan BSC Nursing College, Bhokar.*



**NANDED WAGHALA CITY  
MUNICIPAL CORPORATION, NANDED.**

 Nanded\_logo

महाराष्ट्र सुधारीत नियम 2021 कलम 5 अन्वये दिलेले नोंदणी प्रमाणपत्र  
Certificate of Registration under Section 5 of the  
(नियम 5 अन्वये) (Under Rule 5)

महाराष्ट्र सुश्रुषा गृह नोंदणी सुधारीत नियम 2021 अन्वये श्री / श्रीमती dr purushottam namdeo pawar यांचे Icon multispeciality hospital येथील सुश्रुषा गृह / प्रसुती गृह नोंदणी केले असून सदरचे सुश्रुषा गृह व प्रसुतीगृह चालविण्यास परवाना देण्यात येत आहे.

This is to Certify that Shri Shrimati dr purushottam namdeo pawar has been registered under Bombay Nursing Homes Registration Act, 2021 in respect of Icon multispeciality hospital Situated at plot no 03 sarve no 25 purusharth cop. of housing society javahar nagar, sathe chouk, nanded and has been authorised to carry on the said Nursing Home.

|                              |              |                                     |      |
|------------------------------|--------------|-------------------------------------|------|
| नोंदणी क्रमांक               | : 1124475    | प्रसुती खाटांची संख्या              |      |
| Registration No              | : 1124475    | Maternity No. of Coats              | : 5  |
| नोंदणी दिनांक                | : 18-11-2024 | इतर रुग्णांसाठी खाटांची संख्या      |      |
| Date of Registration         | : 18-11-2024 | Other Nursing Patients No. of Coats | : 35 |
| ठिकाण                        | : नांदेड     | Total                               | : 40 |
| Place                        | : Nanded     |                                     |      |
| प्रमाणपत्र दिल्याचा दिनांक   | : 18-11-2024 |                                     |      |
| Date of issue of Certificate | : 18-11-2024 |                                     |      |

सदरच्या प्रमाणपत्राची वैधता दिनांक पर्यंत 31-03-2027 राहिल.

This Certificate Shall be valid up to 31-03-2027

*S. Bisen*

वैद्यकिय आरोग्य अधिकारी,

नांदेड वाघाळा शहर महानगर पालिका, नांदेड

Medical Health Officer

Nanded Waghala City Municipal Corporation, Nanded.

PRINT CERTIFICATE

*Jadhav*

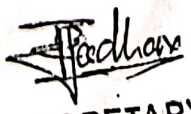
**PRINCIPAL** Jeevanjyot Samajik Sanstha  
Ramratan BSC Nursing College Tq. Hadgaon Dist. Nanded  
Bhokar Dist. N.

**SECRETARY**  
Jeevanjyot Samajik Sanstha  
Tq. Hadgaon Dist. Nanded

Shree Icon Hospital Nanded  
Classification Beds

| Beds                | No. of Sanction | Occupancy         |         |
|---------------------|-----------------|-------------------|---------|
|                     |                 | Day of Inspection | Monthly |
| Medical             | 10              | 3                 | 60      |
| Surgical            | 8               | 2                 | 45      |
| O.P.D               | 10              | 8                 | 66      |
| Orthopedic          | 5               | 3                 | 48      |
| O.B.G.Y             | 5               | 2                 | 30      |
| Casualt / Emergency | 2               | 2                 | 25      |

  
**PRINCIPAL**  
Ramratan BSC Nursing College  
Bhakar Dist. Nanded.

  
**SECRETARY**  
Jeevanjyot Samajik Sanstha  
Ashti, Tq. Hadgaon Dist. Nanded



# Maharashtra Pollution Control Board

महाराष्ट्र प्रदूषण नियंत्रण मंडळ

## Application for Consent/ Authorisation

Sir,  
I/We hereby apply for\*

1. Consent to Establish/Operate/Renewal of consent under section 25 and 26 of the Water (Prevention & Control of Pollution) Act, 1974 as amended.
2. Consent to Establish/Operate/Renewal of consent under Section 21 of the Air (Prevention and Control of Pollution) Act, 1981, as amended.
3. Authorization/renewal of authorization under Bio-Medical Wastes Management Rules, 2016 as amended, Hazardous waste (M, & TM)n Rules, 2016, in connection with my/our/existing/proposed activity from the premises as per the details given below.

## General Information

**UAN No:**  
MPCB-CONSENT-0000222175

**Application submitted on:**  
27-09-2024

## Industry Information

**Industry Type:**  
O88 Health-care Establishment  
(as defined in BMW Rules)

**Category:**  
Orange.

**Scale:**  
S.S.I

**Consent To:**  
Establish (New)

**Submit to:**  
SRO - Nanded

## Particulars of Applicant (Owner/Occupier/Any other Authorised Person)

**First Name**  
Dr. PURUSHOTTAM N

**Father / Husband Name**

**Mobile No**  
9833983243

**Telephone/Fax**

**PAN No**  
AXGPP2401E

**Address**  
JAWAHAR NAGAR SATHE CHOWK NANDED

**Last Name**  
PAWAR


**Designation**  
DOCTOR

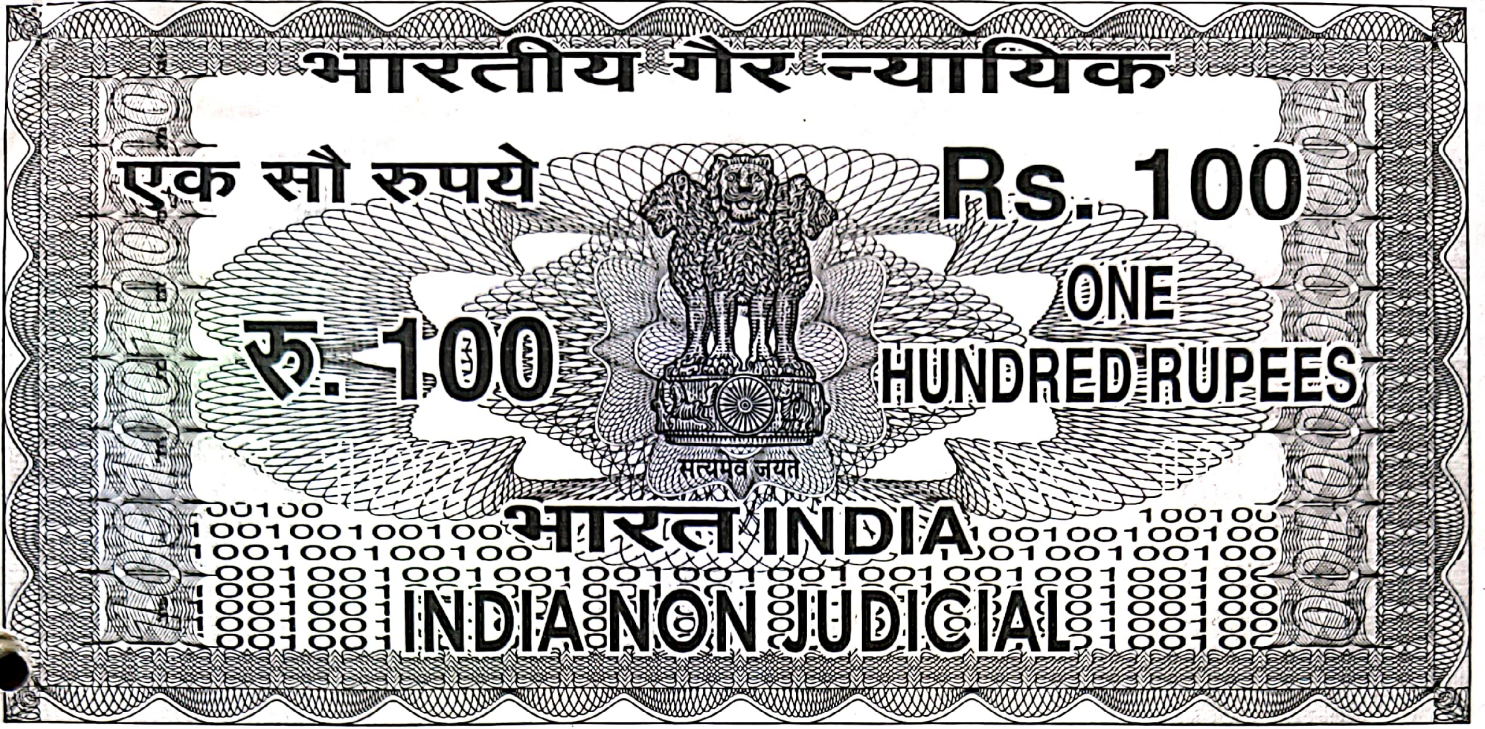
**Email**  
dr.purupawar@gmail.com

**Aadhar No**  
256756139217

**Pin Code**  
431602

  
**PRINCIPAL**  
Ramratan BSC Nursing College  
Bhokar Dist. Nanded.

  
**SECRETARY**  
Jeevanjyot Samajik Sanstha  
Ashti, Tq. Hadgaon Dist. Nanded



महाराष्ट्र MAHARASHTRA

2025

49AB 832319

प्रतिज्ञापत्र

प्रतिज्ञापत्रासाठी / For Affidavit .. (श.मा.पत्र-ह)  
मूद्रांक विक्री नोंदणी क्र. 1548. दिनांक. 21.1.2025

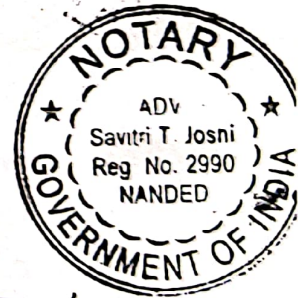
प्रेषीदाराचे नांव / मंगेश केशव जाधव

प्रेषीत व सही / जिवन ज्योत सामाजिक संस्था, भोकर

ओ. एम. कासारपेटकर  
मूद्रांक विक्रेता, परवाना क्र. ३४०२००४  
गवि जैराव गे. नं. ३

MEMORANDUM OF UNDERSTANDING (Affiliated Hospital)

(Between Affiliated Hospital and Nursing College)



This Memorandum of Understanding (MoU) is made and entered into on this \_\_\_\_\_ day of \_\_\_\_\_, by and between:

Party No. 1

Star Kidney Centar Superspeciality Hospita & ICU , Bhokar Road Nanded ,

Through its President, Dr.Rajiv Rathod ,

(Hereinafter referred to as "Party No.1"),

AND

Party No. 2

Jeevan Jyot Samajik Sanstha, Tq. Bhokar, Dist. Nanded,

Through its President, . Ram Jadhav, Ram Ratan B.Sc. Nursing College, Bhokar,

(Hereinafter referred to as "Party No.2").

PRINCIPAL  
Ramratan BSC Nursing College  
Bhokar Dist. Nanded.



Bombay  
rics,




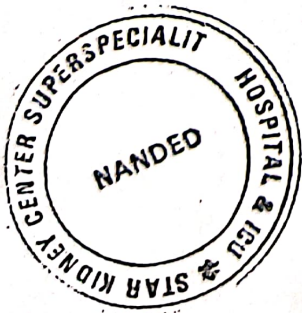
# STAR KIDNEY CENTER

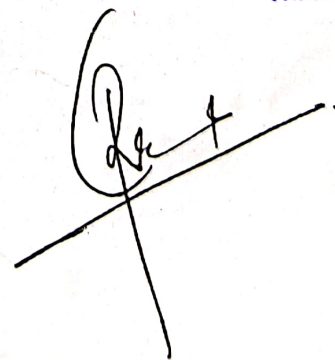
SUPERSPECIALITY HOSPITAL & ICU


## AFFILIATION LETTER

THIS IS TO CERTIFY THAT I AM WILLING TO  
MAKE OUR HOSPITAL FACILITY AVAILABLE TO THE  
NURSES TRAINING COURSE IN JEEVANJYOT SAMAJIK  
SANSTHA SANCHALIT RAMRATAN RANM, RGNM & BSC  
NURSING INSTITUTE BHOKAR DIST. NANDED.  
HENCE I AM PROVIDING PERMISSION TO PRACTICE  
ALL THE NURSING TRAINING STUDENTS.

  
**PRINCIPAL**  
Ramratan BSC Nursing College  
Bhokar Dist. Nanded.





  
**Dr. RAJIV R. RATHOD**  
MS, DNB (Surgery)  
FMAS, DNB (Urology)  
MMC Reg. No. 2005/03/2176  
Consultant Urologist & Andrologist

  
**SECRETARY**  
Jeevanjyot Samajik Sanstha  
Ashti, Tq. Hadgaon Dist. Nanded

**Star Kidney Center Hospital Nanded  
Classification Beds**

| Beds            | No. of Sanction | Occupancy         |         |
|-----------------|-----------------|-------------------|---------|
|                 |                 | Day of Inspection | Monthly |
| Medical         | 8               | 4                 | 80      |
| Surgical        | 10              | 4                 | 80      |
| Nephrology      | 10              | 3                 | 50      |
| Casualty        | 3               | 2                 | 30      |
| Medical Urology | 15              | 6                 | 120     |

  
**PRINCIPAL**  
Ramratan BSC Nursing College  
Bhokar Dist. Nanded.

  
**SECRETARY**  
Jeevanjyot Samajik Sanstha  
Ashti, Tq. Hadgaon Dist. Nanded

नांदेड वाघाळा शहर महानगरपालिका, नांदेड.  
NANDED WAGHALA CITY  
MUNICIPAL CORPORATION, NANDED.



महाराष्ट्र सुधारित नियम 2021 कलाम 3 अन्वये विलेखी नोंदणी प्रमाणपत्र  
Certificate of Registration under Section 3 of the  
(नियम 3 अन्वये) (Under Rule 3)

महाराष्ट्र सुधारित नोंदणी सुधारित नियम 2021 अन्वये श्री / श्रीमती Dr. Rajiv Rawaji Rathod यांचे star kidney center superspeciality hospital and icu star kidney center superspeciality hospital and icu येथील सुधारित नोंदणी / प्रसूती गृह नोंदणी केले असून सदरचे सुधारित गृह व प्रसूतीगृह चालविण्यास परवाना देण्यात येत आहे.

This is to Certify that Shri Shrimati Dr. Rajiv Rawaji Rathod has been registered under Bombay Nursing Homes Registration Act, 2021 in respect of star kidney center superspeciality hospital and icu situated at plot no. 128, near Govardhan Ghat Road, Borban Factory Area, Vajirabad, Nanded-431601 and has been authorised to carry on the said Nursing Home.

|                              |              |                                    |      |
|------------------------------|--------------|------------------------------------|------|
| नोंदणी क्रमांक               | : 0524388    | प्रसूती खाटांची संख्या             |      |
| Registration No              | : 0524388    | Maternity No. of Cots              | : 0  |
| नोंदणी दिनांक                | : 13-05-2024 | इतर रुग्णांसाठी खाटांची संख्या     |      |
| Date of Registration         | : 13-05-2024 | Other Nursing Patients No. of Cots | : 45 |
| ठिकाण                        | : नांदेड     | Total                              | : 45 |
| Place                        | : Nanded     |                                    |      |
| प्रमाणपत्र दिव्याचा दिनांक   | : 13-05-2024 |                                    |      |
| Date of issue of Certificate | : 13-05-2024 |                                    |      |

सदरच्या प्रमाणपत्राची वैधता दिनांक पर्यंत 31-03-2027 राहिल.

This Certificate Shall be valid up to 31-03-2027

*S. Bisen*

वैद्यकीय आरोग्य अधिकारी,  
नांदेड वाघाळा शहर महानगर पालिका, नांदेड  
Medical Health Officer

Nanded Waghal City Municipal Corporation, Nanded.

*Ju*  
PRINCIPAL  
Ramratan BSC Nursing College  
Bhokar Dist. Nanded.

*Jadhav*  
SECRETARY  
Jeevanjyot Samajik Sanstha  
Bhokar Dist. Nanded



## अग्निशमन व आणीबाणी सेवा

श्री गुरु गोविंदसिंघजी स्टेडियम, नांदेड, दुरध्वनी क्र. 101,02462- 255555, फॅक्स क्र. 02462-232071

www.nwcmcnanded.gov.in. / email:-nwmccorporation.yahoo.in

जा.क्र.नांवाशमनपा/अवअसे/ 0424637,

दिनांक 12-04-2024

### प्रतिलिपी माहितीस्वरुप,

star kidney center superspeciality hospital & icu

द्वारा, dr rajiv revaji rathod

plot no. 128, near govardhan ghat road, borban factory area, nanded

विषय:- 'तात्पुरते नाहरकत प्रमाणपत्र' बाबत..

संदर्भ: संबधीताचा दिलेला अर्ज दिनांक 21-01-2024

उपरोक्त विषयाचे अनुषंगाने या विभागाच्या अधिका-याने star kidney center superspeciality hospital & icu, dr rajiv revaji rathod, plot no. 128, near govardhan ghat road, borban factory area, nanded, नांदेड. या इमारतीचे मालक/विकास/भोगवटदार यांनी दाखल केलेल्या मॅक्सिम फायर सर्व्हिस, औरंगाबाद, या शासनमान्य अनुज्ञापती धारकाने अग्निशमन यंत्रणा ही दुरुस्त व कार्यक्षम असल्या बाबतचे प्रमाण पत्र 'ब' सोबत जोडलेल्या यादी नुसार दिनांक 02-04-2024 रोजी आग प्रतिबंधकात्मक साहित्याची तपासणी केली ती समाधानकारक आहे.

सदरचे 'नाहरकत प्रमाणपत्र' हे जारी केल्या दिनांकापासुन एका वर्षापर्यंत वैध राहिल्या नंतर अग्निशमन नाहरकत प्रमाणपत्र घेण्याची सर्वस्वी जबाबदारी आपल्यावर राहिल. तसेच तपासणी दरम्यान आढळून आलेली आग प्रतिबंधात्मक व जीव संरक्षक उपायोजना ही भविष्यात तशीच राहिल याची दक्षता घ्यावी.

- स्वयंचलीत तपास व भय सुचना यंत्रणा (Automatic Detection And Alarm System) O.T मध्ये व ICU मध्ये बसविण्यात यावे.
- पॅनल बोर्डच्या ठिकाणी Co2 चे Fire Extinguisher बसविण्यात यावे.

महाराष्ट्र आग प्रतिबंधक व जीवसंरक्षक उपायोजना अधिनियम 2006 नुसार खालील दिलेल्या अटी व शर्तीचे पालन करणे बंधनकारक राहिल.

- महाराष्ट्र आग प्रतिबंधक व जीवसंरक्षक उपाययोजना अधिनियमातील नियम क्र. 3 नुसार अर्जदाराने (विकासक, मालक, भोगवटदार किंवा ज्या अभिनामाने बोध करण्यात येईल तो) आग प्रतिबंधक व जीवसंरक्षक उपाययोजना 2006 व भारतीय राष्ट्रीय इमारत संहिता 2016 आणी त्या मध्ये वेळो- वेळी केलेल्या सुधारनेनुसार अमलबजावणी करणे बंधनकारक राहिल. या कायद्याचे उल्लंघन होणार नाही याची दक्षता संबधीताने घ्यावी.
- सदर अधिनियमातील कलम क्र. 3 मधील पोट कलम 3 नुसार अर्जदाराने आग प्रतिबंधक जीवसंरक्षक उपाययोजनांची तरतुद केली आहे या बाबतचे लायसन्स प्राप्त अभिकरणा कडून दिलेले विहित नमुण्यातील प्रमाणपत्र व पोट कलम (1) मध्ये विनिर्दिष्ट केल्याप्रमाणे दुरुस्त आणी कार्यक्षम स्थितीत ठेवल्याबाबतचे विहित नमुण्यातील प्रमाणपत्र 'ब' मुख्य अग्निशमन अधिकारी यांचे कडे वर्षातून दोन वेळा (जानेवारी व जुलै या महिन्यामध्ये) सादर करावा.
- कोणतीही व्यक्ती आपल्या इमारतीत किंवा तिच्या भागात बसविलेले आग प्रतिबंधक उपकरण बिघडविणार नाही, त्यामध्ये फेरबदल करणार नाही, ते काढून टाकणार नाही किंवा त्याला कोणतेही हाणी व नुकसान पोहचविणार नाही किंवा कोणत्याही व्यक्तीला तसे करणे बाबत चिथावणी देणार नाही.
- सदर इमारतीत अग्निशमन प्रतिबंधात्मक उपाययोजना सुस्थितीत असल्यानंतर तसेच या पुर्वी यंत्रणात काही त्रुटी आढळल्या बाबत आपणास नोटीस मिळाली नसेल किंवा त्या ठिकाणी आगी पासुन कुठलीही घटना घडली नसेल तरच हे प्रमाणपत्र ग्राह्य धरण्यात येईल.
- महाराष्ट्र आग प्रतिबंधक व जीवसंरक्षक 654 उपाययोजना अधिनियम 2006 नुसार लावण्यात येणारी अग्निशमन सेवा फी/मनपा फीस नजर चुकीणे कमी लावण्यात आल्यास, होणारी फरकाची रक्कम ही नाहरकत प्रमाणपत्र घेते वेळेस भरावी लागेल.
- तात्पुरत्या नाहरकत प्रमाणपत्रामध्ये दिलेल्या सर्व अटीच्या पुर्ततेस ग्राह्य धरुन तसेच इतर कुठलेही बदल होणार नाही आणी सदर इमारतीत काही बदल करावयाचे असल्यास खालील स्वाक्षरीतास कळवुन बदल / वाढ करण्यात यावी.
- संवैधानिक तरतुदीमध्ये वारंवार होणा-या बदलास अधिन राहुन अतिरिक्त सुचना करण्याचा अधिकार सदर स्वाक्षरीकल्पाने राखुन ठेवण्यात आला आहे. या अटी व शर्तीच्या अधिन राहुन सदरचे 'नाहरकत प्रमाणपत्र' देण्यात येत आहे.

PRINCIPAL  
Ramratan BSC Nursing College  
Bhokar Dist. Nanded  
SECRETARY  
Deevanijyot Samajik Sanstha  
Ashti. Ta. Hadgaon Dist. Nanded

**Application for Consent/ Authorisation**

We hereby apply for\*

Consent to Establish/Operate/Renewal of consent under section 25 and 26 of the Water (Prevention & Control of Pollution) Act, 1974 as amended.

Consent to Establish/Operate/Renewal of consent under Section 21 of the Air (Prevention and Control of Pollution) Act, 1981, as amended.

Authorization/renewal of authorization under Bio-Medical Wastes Management Rules, 2016 as amended, Hazardous waste (M, & TM) Rules, 2016, in connection with my/our/existing/proposed activity from the premises as per the details given below.

**General Information**

UA No:  
MPCB-CONSENT-0000231872

Application submitted on:  
09-01-2025

**Industry Information**

Industry Type: 388 Health-care Establishment (as defined in BMW Rules)  
Category: Orange  
Scale: S.S.I

Consent To: Operate (1st Operate)  
Submit to: SRO - Nanded

**Consent to Establish Details**

| Consent to Establish No. | Consent to Establish Grant date | Consent to Establish Valid Upto |
|--------------------------|---------------------------------|---------------------------------|
| MAHP0036                 | 08-01-2025                      | 31-03-2025                      |
| Authorization No.        | Authorization Grant date        | Authorization Valid upto        |
| MAHP0036                 | 08-01-2025                      | 31-03-2027                      |

**Particulars of Applicant (Owner/Occupier/Any other Authorised Person)**

| First Name | Father / Husband Name        | Last Name                 | Designation  |
|------------|------------------------------|---------------------------|--------------|
| Dr. RAJIV  | REWAJI                       | RATHOD                    | DOCTOR       |
| Mobile No  | Telephone/Fax                | Email                     | Aadhar No    |
| 9776017773 |                              | drrajivrathod99@gmail.com | 386558866402 |
| PAN No     | Address                      | Pin Code                  |              |
| SDPR8028C  | BORBAN AREA VAZIRABAD NANDED | 431606                    |              |

**PRINCIPAL**  
Ramratan BSC Nursing College  
Chakar Dist. Nanded

**SECRETARY**  
Jeevanjyot Samajik Sanstha  
Ashti, Tq. Hadgaon Dist. Nanded