

**SEVA SADAN SCHOOL OF NURSING,  
GADHINGLAJ.**

# **ANNEXURE V**

## **Clinical Details**

1737/2024 (U)



महाराष्ट्र MAHARASHTRA

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90AA 037582

जोडपत्र-१

जोडपत्र-२

मुद्रांक विक्री नं. १२६७ दि. १८/०७/२०१८

२०० पेन्सी

मुद्रांक रु. १०००/- डॉ. शिवाजी काशीचे कामी दिला.

श्री. नेताजी शिवाजी मांजरे

Pattanshet Institute of Medical & Educational Research Centre, Gadhinglaj

रा. काग वुल

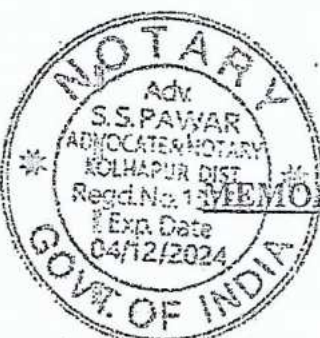
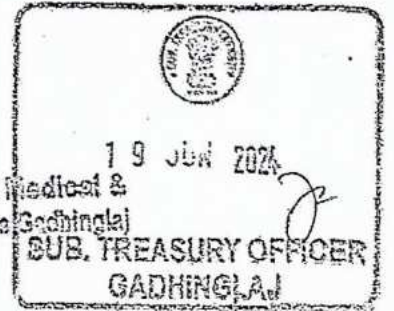
ता. गडहिंगलज, जि. कोल्हापूर

मुद्रांक वि. वेणार सही-

[Signature]

Pattanshet Institute of Medical & Educational Research Centre, Gadhinglaj

SANDEEP SHANKARRAO KAGWADE  
Stamp Vendor, Lic No. 33/2000, Code No. 2606009  
Near Sub-Registrar, Office Gadhinglaj, Dist. Kolhapur



ज्या कारणासाठी ज्यांनी मुद्रांक खरेदी केला त्यांनी त्याच कारणासाठी मुद्रांक खरेदी केल्यापासून सहा महिन्यात वापरणे बंधनकारक आहे

Notary Regl. Sr. N 1737 2024

Seva Sadan School Of Nursing  
Tal-Gadhinglaj Dist-Kolhapur-416502

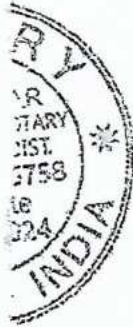
AND

Seva Sadan Hospital Gadhinglaj  
Tal-Gadhinglaj Dist-Kolhapur-416502

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ

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on this page







Affiliation for utilization for Nursing Students  
This DEED OF AGREEMENT IS Made on this 20/7/2024 between  
Seva Sadan School Of Nursing  
Tal -Gadhinglaj, Dist- Kolhapur 416502  
(First Party)  
And  
M/s Seva Sadan Hospital Gadhinglaj.  
Tal-Gadhinglaj Dist-Kolhapur-416502  
(Second Party)

1. The first Party can utilize Second party's hospital as Affiliated hospital for the Nursing Students of First Party for clinical experience.
2. The Second Party is having 100 bedded Hospital. The types and Number of beds are as follows;

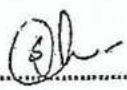

Sr. No.	Departments	Numbers of Beds
01.	medical care	20
02.	Surgical care.	20
03.	OBG care	40
04.	other	20
05.		


3. Video shooting permission during inspection (MSBNPE, INC, DMER)
4. Permission to Conduct to Practical Examination (MSBNPE)
5. Permission to demonstrate the procedure to the students.
6. Posting timing for inter shift wise 08 Hrs duration bases.
7. During final examination, before 20 days student will be study holiday.
8. Permission for integrated posting & research project activities.

  
Seva Sadan School Of Nursing  
Tal-Gadhinglaj Dist-Kolhapur-416502  
(First Party)  
SEVA SADAN SCHOOL OF NURSING  
GADHINGLAJ 416502

  
M/s Seva Sadan Hospital Gadhinglaj.  
Tal-Gadhinglaj Dist-Kolhapur  
SEVA SADAN HOSPITAL  
AJARA ROAD, GADHINGLAJ.  
Ph.:(02327) 222814

Witness Name Address And Signature

1. Sachin Chigam   
2. Rohit Shinde 

  
PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ

No. Of Corrections  
this DEED OF AGREEMENT

3

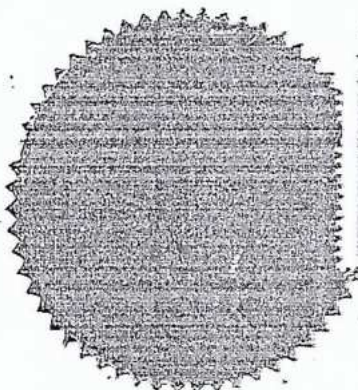
IDENTIFIED BY

*S. B. Patole*  
Shri. S. B. Patole  
ADVOCATE  
Mohite Complex, Kachari Road,  
Gadhinglaj-416502

Before Me

*S. S. Pawar*  
S. S. PAWAR  
Advocate & Notary  
Doctor's Colony, Gadhinglaj  
Dist. Kolhapur-416502  
Mob. 9422581268

20 JUL 2024



No. Of Corrections  
on this page- *02*

This Document Contains  
Page No. 1 to *02*

*RS*  
PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ





महाराष्ट्र शासन

# जिल्हा शल्यचिकित्सक, कोल्हापूर

(सन १९४९ च्या दि. बॉम्बे नर्सिंग होमचा रजिस्ट्रेशन अक्टचा कलम ५ अन्वये दिलेले रजिस्ट्रेशन सर्टिफिकेट)

दि. बॉम्बे नर्सिंग होमचा रजिस्ट्रेशन अक्ट, १९४९ अन्वये

## नॉदणी प्रमाणपत्र

जॉ. श्री./श्रीमती नरेंद्र पद्मवरेदी  
जॉ. शज्जती पद्मवरेदी

यांचे

सेवा सदन हॉस्पिटल, गडहिंग्लज

येथील हॉस्पिटल/नर्सिंग होम/मॅटर्निटी होम रजिस्टर केले असून सदरचे हॉस्पिटल/नर्सिंग

होम/मॅटर्निटी होम चालविण्यास परवाना देणेत येत आहे. ☒ /पुनर्नोदणीस मान्यता देणेत

येत आहे. ☒

रजिस्ट्रेशन क्रमांक : २६७/२०२५/गडहिंग्लज प्रसूतीसाठी कॉट्स : ४०

रजिस्ट्रेशन दिनांक : १९/५/२०२५

इतर रुग्णांसाठी कॉट्स : ६०

ठिकाण : कोल्हापूर

एकूण कॉट्स : १००

सर्टिफिकेट दिल्याचा दिनांक : २९/५/२०२५

सदरचे सर्टिफिकेट दिनांक : ३१/०३/२०२८ पर्यंत कार्यवाहीत राहील.



बेटी बचाओ  
save the girl child



प्रिन्सिपल  
जिल्हा शल्यचिकित्सक,  
छत्रपती प्रमिलाराजे सर्वोपचार  
रुग्णालय, कोल्हापूर.





## कोल्हापूर महानगरपालिका

पोस्ट बॉक्स नं. ३३, पिन कोड नं. - ४१६ ००२  
फोन नं.-पी.बी.एक्स. बोर्ड २५४०२११ ते २५४०२१८



जावक क्र. - अग्निशमन विभाग / वशि-१/ ५९ / २०२५-२६

दि. - २२/०४/२०२५

प्रति,  
डॉ. नागेंद्र पट्टणशेट्टी,  
गडहिंगलज, जि. कोल्हापूर



विषय :- डॉ. नागेंद्र पट्टणशेट्टी, आजरे रोड, गडहिंगलज, जि. कोल्हापूर यांचे १०० वेड ( सेवा सदन हॉस्पिटल ) अग्निशमन विभागाचा ना-हरकत दाखला याबत.

संदर्भ :- १. संचालक, महाराष्ट्र अग्निशमन सेवा संचालनालय यांचा आदेश दि. २७/०१/२०२१  
२. वरद फायर अँड सेफ्टी सर्विसेस यांचा दि. १६/०४/२०२५ चा बी फॉर्म लायसन नं. MFS-LA/RF-259 RF-239

उपरोक्त विषयांकीत कामी संदर्भित पत्रान्वये डॉ. नागेंद्र पट्टणशेट्टी, आजरे रोड, गडहिंगलज, जि. कोल्हापूर यांचे १०० वेड ( सेवा सदन हॉस्पिटल ) बसविणेत आलेल्या अग्निप्रतिबंधक सुविधा दुरुत आणि कार्यक्षम स्थितीत असलेबाबत अग्निशमन विभागाचा ना-हरकत दाखला मागणी केलेला आहे.

उपरोक्त ठिकाणी संचालक, महाराष्ट्र राज्य अग्निशमन सेवा संचालनालय यांनी दिलेल्या आदेशाने महाराष्ट्र आग प्रतिबंधक व जीव संरक्षक उपाययोजना २००६ भाग ४ नुसार आपल्या हॉस्पिटल मध्ये बसवण्यात आलेली अग्निशमन सुविधांची कोल्हापूर महानगरपालिका अग्निशमन विभागाने तपासणी केली असून वरद फायर अँड सेफ्टी सर्विसेस यांचा दि. १६/०४/२०२५ चा बी फॉर्म लायसन नं. MFS-LA/RF-259 RF-239 प्रमाणे १.) ए.पी.सी (६.६६-०६ नग.) २) पंप-२ एच.पी. ३) होजरील -२ नग, हायड्रंट कॅब्ल-२, होज पाईप-०२, आलार्म सिस्टीम-१ ४) फायर इनलेट टु वे -१, बसवलेली आहे. सदर यंत्रणा आज मितीला कार्यक्षम व सुस्थितीत असले बाबत नमूद केले असल्याने त्यांना इकडील विभागा कडून ना-हरकत दाखला देण्यात येत आहे. सदरचा दाखला हा केवळ मुंबई शुभ्रवा गृह नोंदणी साठी वापरण्याचा आहे.

महाराष्ट्र आग प्रतिबंधक व जीव संरक्षक उपाययोजना २००६ भाग ४ मधील कलम ३ (पाठ कलम ३) नुसार सदरची यंत्रणा सुस्थितीत व कार्यक्षम असले बाबत मान्यताप्राप्त लायसन एजन्सी यांचा बी फॉर्म वर्षातून दोन वेळा म्हणजे जानेवारी व जुलै महिन्यात सादर करण्याचा आहे. अन्यथा सदरचा ना-हरकत दाखला रद्द समजण्यात येईल. सदरचा दाखला एक वर्षाचे मुदतीकरिता देण्यात येत आहे. १०० वेड हॉस्पिटल परवाना नुतनीकरण करणेकामी आग सुरक्षा निधी GD133202500444 रक्कम ७,९८६/- रुपये दिनांक १६/०४/२०२५ रोजी भरण्यात आले आहे.

मुख्य अग्निशमन अधिकारी  
कोल्हापूर महानगरपालिका





## Maharashtra Pollution Control Board

महाराष्ट्र प्रदूषण नियंत्रण मंडळ

---

Thank you. Your payment has been successfully received with following details.

### Transaction Receipt

<b>Transaction Status:</b>	Success
<b>Transaction Reference no:</b>	BHD50JS0PNQXKA
<b>Transaction no:</b>	TXN2507001441
<b>Transaction On:</b>	07-07-2025 14:34:36
<b>Payment For:</b>	MPCB-CONSENT-0000251311
<b>Email:</b>	npattanshetti@rediffmail.com
<b>Mobile no:</b>	9890438434
<b>Amount:</b>	5000.00 INR.

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## Maharashtra Pollution Control Board

महाराष्ट्र प्रदूषण नियंत्रण मंडळ

Thank you. Your payment has been successfully received with following details.

### Transaction Receipt

<b>Transaction Status:</b>	Success
<b>Transaction Reference no:</b>	BHD56CI0PNQUJ9
<b>Transaction no:</b>	TXN2507001439
<b>Transaction On:</b>	07-07-2025 14:33:23
<b>Payment For:</b>	MPCB-CONSENT-0000251311
<b>Email:</b>	npattanshetti@rediffmail.com
<b>Mobile no:</b>	9890438434
<b>Amount:</b>	44877.00 INR.





## Maharashtra Pollution Control Board

महाराष्ट्र प्रदूषण नियंत्रण मंडळ

Thank you. Your payment has been successfully received with following details.

### Transaction Receipt

<b>Transaction Status:</b>	Success
<b>Transaction Reference no:</b>	BHD5FUU001HGHR
<b>Transaction no:</b>	TXN2506004277
<b>Transaction On:</b>	20-06-2025 13:31:27
<b>Payment For:</b>	MPCB-CONSENT-0000251311
<b>Email:</b>	npattanshetti@rediffmail.com
<b>Mobile no:</b>	9890438434
<b>Amount:</b>	5000.00 INR.



Maharashtra Pollution Control Board

महाराष्ट्र प्रदूषण नियंत्रण मंडळ

Thank you. Your payment has been successfully received with following details.

**Transaction Receipt**

<b>Transaction Status:</b>	Success
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<b>Email:</b>	npattanshetti@rediffmail.com
<b>Mobile no:</b>	9890438434
<b>Amount:</b>	10000.00 INR.





Maharashtra Pollution Control Board

महाराष्ट्र प्रदूषण नियंत्रण मंडळ

Thank you. Your payment has been successfully received with following details.

**Transaction Receipt**

<b>Transaction Status:</b>	Success
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<b>Transaction no:</b>	TXN2411003630
<b>Transaction On:</b>	27-11-2024 18:57:05
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<b>Email:</b>	npattanshetti@rediffmail.com
<b>Mobile no:</b>	9890438434
<b>Amount:</b>	15000.00 INR.



## 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) 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-0000221316

**Application submitted on:**  
16-09-2024

### Industry Information

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

**Category:**  
Orange

**Scale:**  
S.S.I

**Consent To:**  
Operate (1st Operate)

**Submit to:**  
SRO - Kolhapur

### Consent to Establish Details

**Consent to Establish No.**

**Consent to Establish Grant date**  
01-01-1970

**Consent to Establish Valid Upto**  
01-01-1970

**Authorization No.**  
RO/KOLHAPUR/BMW/AUTH/1909  
000174/03/19

**Authorization Grant date**  
20-09-2019

**Authorization Valid upto**  
30-06-2024

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

**First Name** **Father / Husband Name**  
Dr. Nagendra Malanna

**Mobile No** **Telephone/Fax**  
9890438434

**PAN No** **Address**

ACJPP7786M M.No.2562/A, Ajara Road, Gandhinagar, Gadhinglaj. Tal- Gadhinglaj, Dist- Kolhapur.

**Last Name**  
Pattanshetti

**Email**  
npattanshetti@rediffmail.com

**Pin Code**

416502

**Designation**  
Doctor

**Aadhar No**  
771680203776



## 2. Health Care Facility (HCF) Information

a) Name of the Health Care Facility

Sevasadan Pattanshetti Hospital

b) Address for Correspondance

**Pin Code**

416502

**District**

Kolhapur

**City/Town**

Gadhinglaj

**Survey/Gut No.**

M.No.2562/A

**Name of premises /Building**

Sevasadan

**Road/Street**

Ajara Road

**Area/Locality**

Gadhinglaj

**Email**

npattanshetti@rediffmail.com

**Website URL**

NA

c) Onwership of Facility

Private (Proprietary Establishment)

**Land Ownership**

Self Owned

d) Month and year of commissioning of the HCF

1/04/2020

e) Area of the Facility / Hospital

**i) Total plot area (in square meter)**

557.62

**ii) Built up area (in square meter)**

656.29

**iii) Open Plot Area (Sq.Mtr)**

30.00

f) Enter Latitude and Longitude of site (In degrees)

**Latitude (In degrees)**

0

**Longitude (In degrees)**

0

g) Does HCF have Operation Theatre

No

h) Does HCF have Laundry facility in premises

No

i) Does HCF have Canteen/Cafeteria facility in premises

No

j) Does HCF have Hostel/Residential quarters in premises

No

### BMW Authorization Details

a) Type of health treatment system

Medicine

b) Bombay Nursing Home Registration Details

**Total number of Beds**

30

**BNH Registration Number**

367 2020 Gadhinglaj

**Valid Upto**

31-03-2024

**First Issued Date**

01-04-2020

**Certificate issuing Authority**

District Health Officer

c) Diagnostic and Pharma Facilities available in Premises

**Pathology Lab**

No

**Blood Bank**

No

d) Whether HCE intended to Sale / Handover liquid BMW for R&D purpose

No

Category wise Bio-Medical Waste Collected ,Treated,Disposed			
Sr. No	Category	Type of Waste	Quantity not to exceed (Kg/M)
1	Yellow	a) Human Anatomical waste	16.00
		b) Animal Anatomical Waste	0
		c) Soiled Waste	1.00
		d) Expired or Discarded Medicines	0
		e) Chemical Waste	0
		f) Chemical Liquid Waste	1.00
		g) Discarded linen, mattresses, beddings contaminated with blood or body fluid.	0
		h) Microbiology Biotechnology and other clinical laboratory waste	0
2	Red	Contaminated waste (Recyclable)	1.00
3	White (Translucent)	Waste sharps including Metals	3.00
4	Blue	a. Glassware	2.00
		b. Metallic body implants	0

Do you Have Equipment Installed for Pretreatment of Yellow (g), (h) Category Waste

No

Whether you have establish a Bar-Code system for Bag or Containers containing Bio-Medical waste

No

Common Facility Membership Details (CTF)

**CTF Name**

M/s S.S. Services, Ichalkaranji

**Membership Number**

SSS 2023 1725

**Issued Date**

31-03-2024

#### 4.Consent Details

a) Sources of Water

**Surface Water**

Yes

**Name of the water supply**

Gadhinglaj Municipal Water Supply Scheme

**Water Consumption Quantity (CMD)**

10

ii) Ground Water

No

iii) Tanker Water

No

b) Water Consumption Details

**Raw Water (CMD)**

10

**Recycle Water (CMD)**

**Total Water Quantity Requirement (CMD)**

10

c) Water consumption for different uses (CMD)

Purpose	Consumption	Effluent Generation	Disposal
Domestic Pourpose	5	4	NA
Pathology Laboratory, Floor washing, Operation Theater	4	3	NA
Laundry	0	0	NA
Industrial Cooling,spraying in mine pits or boiler feed	1	0	NA
<b>Total</b>	<b>10.00</b>	<b>7.00</b>	



d) Waste Waster Treatment

**Have you installed STP or ETP**

Yes

**1. Sewage Treatment Plant:** No

**2. Effluent Treatment Plant:** No

**3. Combined Treatment Plant:** Yes

Combine Treatment Plant

**Capacity(CMD)**

10

**Preliminary:** No **Preliminary Treatment:**

**Primary:** Yes **Primary Treatment:** Primary Clarifier / Settling

**Secondary:** Yes **Secondary Treatment:**

**Tertiary** Yes **Tertiary Treatment:** Sand & Carbon Filter

**Advance:** Yes **Advance Treatment:**

e) Other waste generation details

**1) Municipal Solid Waste**

**Biodegradable Waste(kg/day)**

2.00

**b) Recyclable Waste(kg/day)**

0

**c) Domestic Hazardous Waste(kg/day)**

0

Air Pollution

**Whether D.G. Set Installed**

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
HCL	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

CHWSDF Details

**CHWTDF Facility Name**

NA

**CHWTDF Membership Number**

0

Hazardous Waste Details		
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
NA	0	NA	NA	NA	NA

### 5. Additional Information

**Do you have Bio Medical Waste Management Committee Constituted**

No

**Average Cost (O & M) for ETP/STP**

10000

**Average Cost of APCD Rs/Year**

10000.00

**Brief details of tree plantation/green belt development within applicant's premises**

**Open Space Availability**

55

**Plantation Done On**

25

**Number of Trees Planted**

10

**Whether Environmental Statement submitted**

No

**Environmental Statement submitted Date**

01-01-1970

**Any other additional information that the applicants desires to give**

**Do you have Infection Control Committee Constituted**

No

### 6. Financial Details

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

No

Bank Gurantee Number	Date	Valid Up To	Amount	Bank Name	Branch
0	01-01-1970	NA	0	NA	NA

Additional Bank Gurantee Details, if Any					
Bank Gurantee Number	Date	Valid Up To	Amount	Bank Name	Branch
0	01-01-1970	NA	0	NA	NA



1738/2024 (1)



महाराष्ट्र MAHARASHTRA

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90AA 037583

जोडपत्र-१

जोडपत्र-२

मुद्रांक विक्री नं. १२३७

दि. १८/०७/२०२४

पत्रांक २२०० पैकी ज्ञानी शिवाजी

Patankar Institute of Medical & Educational Research Centre, Gadhinglaj 19 JUN 2024

म. नेताजी शिवाजी मांजरे

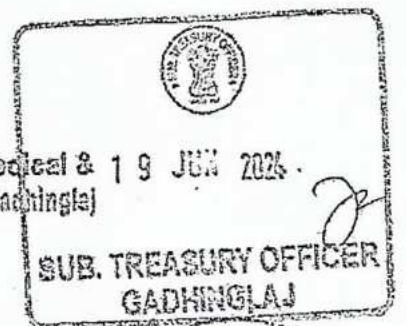
म. का. कुल

ता. गडहिंगलज, जि. कोल्हापूर

*[Signature]*

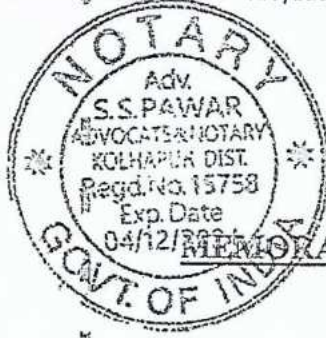
*[Signature]*

मुद्रांक विक्रेता सही-



Patankar Institute of Medical & Educational Research Centre, Gadhinglaj

**SANDEEP SHANKARRAO KAGWADE**  
Stamp Vendor, Lic. No. 33/2000, Code No. 2606009  
Near Sub-Registrar, Office Gadhinglaj, Dist. Kolhapur



ज्या कारणासाठी ज्ञानी मुद्रांक खरेदी केला त्यांनी त्याच कागद्यामाती मुद्रांक खरेदी केल्यापासून सहा महिन्यात आपणगे बंधनकारक आहे

Notary Regl. St. No. 1738 2024

**MEMORANDUM OF UNDERSTANDING (MOU) BETWEEN**

Seva Sadan School Of Nursing  
Tal-Gadhinglaj Dist-Kolhapur-416502

AND

Desai Hospital Gadhinglaj  
Tal-Gadhinglaj Dist-Kolhapur-416502

*[Signature]*

**PRINCIPAL**  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ



2

Affiliation for utilization for Nursing Students  
This DEED OF AGREEMENT IS Made on this 22/7/2024 between  
Seva Sadan School Of Nursing  
Tal -Gadhinglaj, Dist- Kolhapur 416502  
(First Party)

And  
Desai Hospital Gadhinglaj  
Tal-Gadhinglaj Dist-Kolhapur-416502  
(Second Party)



1. The first Party can utilize Second party's hospital as Affiliated hospital for the Nursing Students of First Party for clinical experience.
2. The Second Party is having 50 bedded Hospital. The types and Number of beds are as follows;

Sr. No.	Departments	Numbers of Beds
01.	Critical Care	10
02.	Cardiology	10
03.	Nephrology	10
04.	General Medicine	10
05.	General Surgery & Paediatrics	10

3. Video shooting permission during inspection (MUHS, INC, DMER)
4. Permission to Conduct to Practical Examination (MUHS)
5. Permission to demonstrate the procedure to the students.
6. Posting timing for Inter shift wise 08 Hrs duration bases.
7. During final examination, before 20 days student will be study holiday.
8. Permission for integrated posting & research project activities.

Seva Sadan School Of Nursing  
Tal-Gadhinglaj, Dist-Kolhapur-416502  
SEVASADAN SCHOOL OF NURSING  
(First Party)  
GADHINGLAJ 416502



Desai Hospital, Gadhinglaj  
Tal-Gadhinglaj Dist-Kolhapur  
(Second Party)

Dr. CHANDRASHEKHAR DESAI  
(M.D.)

Physician & Cardiologist  
Gadhinglaj, Dist Kolhapur  
Reg No. 49732

Witness Name Address And Signature

1. Sachin Chigam [Signature]  
2. Rahul Shinde [Signature]

No. of corrections  
on this page - 1

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ



2

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Seva Sadan School Of Nursing  
Tal-Gadhinglaj, Dist-Kolhapur-416502  
SEVA SADAN SCHOOL OF NURSING  
(First Party)  
GADHINGLAJ 416502



Desai Hospital, Gadhinglaj  
Tal-Gadhinglaj Dist-Kolhapur  
(Second Party)

Dr. CHANDRASHEKHAR DESAI  
(M.D.)

Physician & Cardiologist  
Gadhinglaj, Dist Kolhapur  
Reg No. 49732

Witness Name Address And Signature

1. Sachin Chigane  
2. Rahul Shinde

No. of conditions  
on this page - 1

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ

IDENTIFIED BY

3

*S. B. Patole*  
**Shri. S. B. Patole**  
ADVOCATE  
Mohite Complex, Kacheri Road,  
Gadhinglaj-416502

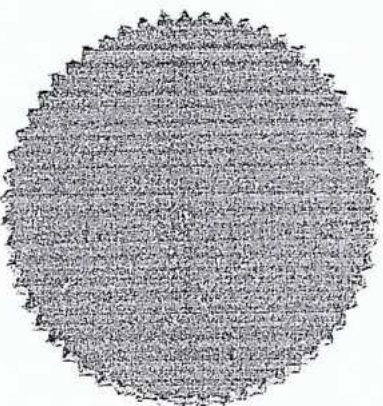
Before Me

*S. S. Pawar*

**S. S. PAWAR**  
Advocate & Notary  
Doctor's Colony, Gadhinglaj  
Dist. Kolhapur-416502  
Mob. 9422581268

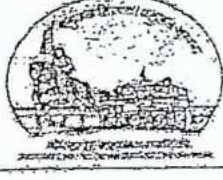
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20 JUL 2024



*[Signature]*  
**PRINCIPAL**  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ





## कोल्हापूर महानगरपालिका

पोस्ट बॉक्स नं. ३३, पिन कोड नं. - ४३६ ००२.

फोन नं.-पी.बी.एक्स. बोर्ड २५४०२९३ ते २५४०२९८



जावक क्र. - अग्निशमन विभाग / वशि-१/ २६/२०२२-२३

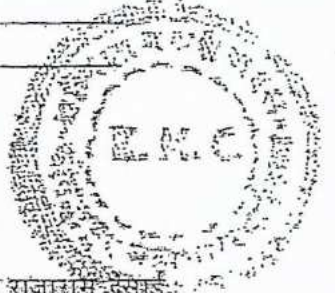
दि. - १६/०६/२०२२

प्रति,

डॉ. चंद्रशेखर राजाराम देसाई

२६५२ डॉ. कॉलनी, एस.टी.स्टॅण्ड शेजारी

गडहिंगलज, जि. कोल्हापूर.



विषय :- २६५२ डॉ. कॉलनी, एस.टी.स्टॅण्ड शेजारी गडहिंगलज, जि. कोल्हापूर. डॉ. चंद्रशेखर राजाराम देसाई

यांच्या ५० बेड (देसाई हॉस्पिटल) साठी अग्निशमन विभागाचा ना-हरकत दाखला बाबत.

संदर्भ :- १. संचालक, महाराष्ट्र अग्निशमन सेवा संचालनालय यांच्या आदेश दि. १०/०५/२०२२

२. युनायटेड सेल्स कॉरपोरेशन यांचा दि. १५/०६/२०२२ चा B फॉर्म लायसन

नं. MFS-LA/RF-376 & RD-349

३. डॉ. देसाई यांचे दिनांक १०/०५/२०२२ चे हामीपत्र.

उपरोक्त विषयांकीत कामी संदर्भित यंत्रांमध्ये:- २६५२ डॉ. कॉलनी, एस.टी.स्टॅण्ड शेजारी गडहिंगलज, जि. कोल्हापूर. डॉ. चंद्रशेखर राजाराम देसाई यांच्या ५० बेड (देसाई हॉस्पिटल) मध्ये बसविणेत आलेल्या अग्निप्रतिबंध सुविधा दुरुस्त आणी कार्यक्षम स्थितीत असलेबाबत अग्निशमन विभागाचा ना-हरकत दाखला मागणी केलेला आहे.

उपरोक्त ठिकाणी संचालक, महाराष्ट्र अग्निशमन सेवा संचालनालय यांनी दिलेल्या आदेशाने महाराष्ट्र आग प्रतिबंधक व जीव संरक्षक उपाययोजना २००६ भाग ४ नुसार असलेल्या हॉस्पिटल मध्ये बसवण्यात आलेली अग्निशमन सुविधांची कोल्हापूर महानगरपालिका अग्निशमन विभागाच्या स्थानिक अधिकारी क्र. १ यांनी तपासणी केली असून युनायटेड सेल्स कॉरपोरेशन यांचा दि. १५/०६/२०२२ चा B फॉर्म लायसन नं. MFS-LA/RF-376 & RD-349 प्रमाणे १.) एम्.सी.पी.-६ नम. २) पंप-५ एच. पी. ३) होजरेल बोझल सह- ४ नम. ४) होज बॉक्स- २ नम. ५) होज पर्ट्रेष ब्रांच सह- २ नम. ६) फायर इन्चलेंट रव्हे- १ नम. ७) हायड्रंट व्हॉल- ५ नम. ८) अलार्म सिस्टीम ४ इमेन पॅनल, ९) एम्.सी.पी.- ४ नम. १०) हुटर- २ नम. बसवलेली आहे सदर यंत्रणा आज मितीला कार्यक्षम व सुस्थितीत असले बाबत समुद केले आहे. दिनांक १०/०५/२०२२ च्या जिन्या बाबतच्या हामीपत्रास अधीन राहून त्यांना इकडील विभागा कडून ना-हरकत दाखला देण्यात येत आहे. सदरचा दाखला हा केवळ युंयई शुश्रूषा गृह चौकणी साठी वापरण्याचा आहे.

महाराष्ट्र आग प्रतिबंधक व जीव संरक्षक उपाययोजना २००६ भाग ४ मधील कलम ३ (पोट कलम ३) नुसार सदरची यंत्रणा सुस्थितीत व कार्यरत असले बाबत मान्यताप्राप्त लायसन एजन्सी यांचा B फॉर्म वर्षातून दोन वेळा म्हणजे जानेवारी व जुलै म्हणून सादर करण्याचा आहे अन्यथा सदरचा ना-हरकत दाखला रद्द समजण्यात येईल.

PRINCIPAL

SEVA SADAN SCHOOL OF NURSING

President

Pattanshetti Institute of Medical &

Research Centre, Gadlinglaj

Secretary

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ

मुख्य अग्निशमन अधिकारी

कोल्हापूर महानगरपालिका





महाराष्ट्र शासन

# जिल्हा शल्यचिकित्सक, कोल्हापूर

(याने १९७७, १९७८ दि. यांचे नर्सिंग होम रजिस्ट्रेशन ऑक्ट्या केल्या ५ अ. १९७८ दि.ने रजिस्ट्रेशन सर्टिफिकेट)

दि. १०/०३/२०२४ रजिस्ट्रेशन ऑक्ट, १९४९ अन्वये

## नोंदणी प्रमाणपत्र

श्री. श्री. / श्रीमती डॉ. रमेश चंद्र र. हेसराई कोचे

हेसराई हॉस्पिटल, गडहिंग्लज

बेथील हॉस्पिटल/नर्सिंग होम/मॅटर्निटी होम रजिस्ट्रेशन केले असून सदरचे हॉस्पिटल/नर्सिंग होम/मॅटर्निटी होम चालविण्यास परवाना देणेत येत आहे. ☒ / पुर्ननोंदणीस मान्यता देणेत येत आहे. ☒

रजिस्ट्रेशन क्रमांक : ४५२/२०२४/गडहिंग्लज

प्रसूतीसाठी कॉट्स : ००

रजिस्ट्रेशन दिनांक : ०९/०४/२०२४

इतर रुग्णांसाठी कॉट्स : ५०

ठिकाण : कोल्हापूर

एकूण कॉट्स : ५०

सर्टिफिकेट दिल्याचा दिनांक : ०६/०५/२०२४

सदरचे सर्टिफिकेट दिनांक : ३१/०३/२०२७ पर्यंत कार्यवाहीत राहील.



बेटी बचाओ  
save the girl child



*(Signature)*

जिल्हा शल्यचिकित्सक,  
सदान स्कॉलरी प्रमिलाराजे सय्योपचार  
नर्सिंग, गडहिंग्लज



# MAHARASHTRA POLLUTION CONTROL BOARD

## Regional Office, Kolhapur

Phone : 0231-2652952 / 2660448

Fax : 0231-2652952

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

Visit At : <http://mpcb.gov.in>



Udyog Bhawan

Near Collector Office,

Kolhapur - 416003

### LETTER OF BIO-MEDICAL WASTE AUTHORISATION [Authorization for Generation, Collection, Reception, Segregation, Disposal of Bio-Medical Wastes under Rule 7(4)]

I. File number of authorization and date of issue

RO-KOLHAPUR/BMW\_AUTH/2206000556

Date: 28/06/2022

II. M/s. DESAI HOSPITAL, is hereby granted an authorization for generation of biomedical waste on the premises situated DOCTORS COLONY, GADHINGLAJ, TAL. GADHINGLAJ, DIST. KOLHAPUR, MAHARASHTRA.

III. This authorization shall be in force for a period up to 30.06.2027 an application shall be made by the occupier/operator for renewal 3 Months before expiry of earlier authorization.

IV. This authorization is issued subject to compliance of the conditions stated below and to such other conditions as may be specified in the Rules for the time being in force under the Environment (Protection) Act, 1986.

V. No of Beds: 50.

#### Terms and Conditions of authorization

1. The authorized Person shall comply with the provisions of the Environment (Protection) Act, 1986, and the Rules made there under.
2. The authorization shall be produced for inspection at the request of an officer Authorized by the prescribed authority.
3. i) The authorized person shall not rent, lend or sell the biomedical waste or facility.  
ii) The authorized person can transfer the BMW generated at above premises to the "Transporter" or "Operator of Facility" authorized by MPCB under Bio-Medical Waste (Management and Handling) Rules, 1998 for collection, transportation, treatment and/or disposal of BMW generated.
4. Any unauthorized change in equipment or working conditions as mentioned in the application by the person authorized shall constitute a breach of this authorization.
5. It is the duty of the authorized person to take prior permission of the prescribed authority to close down the facility.



MPCB-BMW AUTH-0000039330

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ

PRINCIPAL

SEVA SADAN SCHOOL OF NURSING

President

Secretary

Pattanshetti Institute of Medical &  
Educational Research Centre, Gadhingla



6. The authorization is granted for generation and disposal of Bio-Medical Waste (BMW) to CBMWTSDF in waste categories and quantities listed here in below:

Sr. No.	Category	Type of Waste	Quantity (Kg/M)	Segregation Colour Coding	Treatment & Disposal
1	Yellow	a) Human Anatomical Waste b) Animal Anatomical Waste c) Soiled Waste d) Expired or discarded Medicines e) Chemical Waste f) Chemical liquid Waste g) Discarded linen, mattresses beddings contaminated with blood or body fluid h) Microbiology Biotechnology and other clinical laboratory waste.	1.00 — 2.00 — — — —	Yellow Coloured non-chlorinated plastic bags.  Separate collection system leading to effluent treatment system  Yellow coloured non-chlorinated plastic bags or suitable packing material.  Autoclave safe plastic bags or containers.	No onsite treatment of BMW is permitted. The above mentioned Bio medical Waste shall be sent to Common BMW Treatment & Disposal facility authorized by MPCB
2	Red	Contaminated waste (Recyclable)	14.0	Red coloured non-chlorinated plastic bags or container.	
3	White (Translucent)	Waste Sharps including Metals	2.00	Puncture proof, leak proof, tamper proof container.	
4	Blue	a) Glass ware b) Metallic body implants	— —	Cardboard boxes with blue coloured marking.	

7. The liquid/solid waste generated from the treatment activity (from laboratory and washing, cleaning, housekeeping and disinfecting activities) shall be treated suitably by providing effluent treatment facility to conform the standards prescribed in Schedule V of said Rules and the Environment (Protection) Act, 1986.

MPCB-BMW AUTH-0000039330

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADINDOLAN

PRINCIPAL

President

Secretary

Pattanshetti Institute of Medical & Health Sciences



8. (i) BMW shall be treated and disposed of in accordance with Schedule I and in compliance with the standards prescribed in Schedule V of said Rules.

(ii) You shall setup requisite BMW treatment facilities like incinerator, autoclave / Microwave, shredder etc., at the disposal site in accordance with the BMW rules. You shall dispose of the duly treated BMW and incineration ash in secured land fill site at your own premises / at MSW secured land fill site of Municipal Council authorized by MPCB and duly earmarked for disposal of treated BMW / at common H.W. treatment & disposal facility setup as per the Hazardous Waste (M. & E) Rules, 1989 as amended and authorized by MPCB.

9. (i) BMW shall not be mixed with other wastes or reused, recycled or sold in any form.

(ii) BMW shall be segregated into containers / bags at the point of generation in accordance with Schedule-II prior to storage, treatment and disposal. The containers shall be labeled according to Schedule III.

(iii) If a container containing BMW is to be transported from the premises where BMW is generated to any waste treatment facility outside the premises, the container shall, apart from the Label prescribed in Schedule III, also carry information prescribed in Schedule IV and shall be transported by authorized transporter only.

(iv) Notwithstanding anything contained in the Motor Vehicles Act, 1988 or Rules thereunder, BMW shall be transported only in such vehicle as may be authorized for the purpose by the competent authority as specified by the Government.

(v) No untreated BMW shall be kept stored beyond a period of 48 hours.

(vi) You shall submit details of Management and Handling of outdated, discarded, unused Cytotoxic drugs generated in the Cancer Centers, research and health care 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 copy to CPCB before 31<sup>st</sup> January every year.

(vii) You shall manage the Mercury Waste in the HCE in environmentally sound manner (including storage, spilled collection, transportation and disposal) as per CPCB guidelines published on CPCB website [www.cpcb.nic.in](http://www.cpcb.nic.in) dtd. 07.09.2010 as detailed in document entitled "Environmentally Sound Management of Mercury Waste in Health Care Facilities".

(viii) You shall ensure phase out of chlorinated plastic bags, gloves and blood bags by HCE's within two years.

(ix) You shall ensure that the liquid waste is treated and disposed by all the occupier or operator of CBMWTF in accordance with Water Act, 1974.

10. Standards for waste autoclaving:

The autoclave shall be dedicated for the purposes of disinfecting and treating bio-medical waste.

(i) When operating a gravity flow autoclave, medical waste shall be

MPCB-BMW AUTH-0000039330

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ

PRINCIPAL

President  
Pattanshetti Institute of Medical &  
Educational Research Centre, Gadlingla

Secretary



Subjected to:

- (i) a temperature of not less than 121 C° and pressure of 15 pounds per Square inch (psi) for an autoclave residence time of not less than 60 minutes; or
  - (ii) a temperature of not less than 135 C° and a pressure of 31 psi for an autoclave residence time of not less than 45 minutes; or
  - (iii) a temperature of not less than 149 C° and a pressure of 52 psi for an autoclave residence time of not less than 30 minutes.
- (II) When operating a vacuum autoclave, medical waste shall be subjected to a minimum of one pre-vacuum pulse to purge the autoclave of all air. The waste shall be subjected to the following
- (i) a temperature of not less than 121 C° and a pressure of 15 psi for an autoclave residence time of not less than 45 minutes; or
  - (ii) a temperature of not less than 135 C° and a pressure of 31 psi for an autoclave residence time of not less than 30 minutes; or
- (III) Medical waste shall not be considered properly treated unless the time, temperature and pressure indicators indicate that the required time, temperature and pressure were reached during the autoclave process. If for any reasons, time, temperature or pressure indicates that the required temperature, pressure or residence time was not reached, the entire load of medical waste must be autoclaved again until the proper temperature, pressure and residence time were achieved.
- (IV) *Recording of operational parameters.* - Each autoclave shall have graphic or computer recording devices which will automatically and continuously monitor and record dates, time of day, load identification number and operating parameters throughout the entire length of the autoclave cycle.
- (V) *Validation test. Spore testing.* The autoclave shall completely and consistently kill the approved biological indicator at the maximum design capacity of each autoclave unit. Biological indicator for autoclave shall be *Bacillus stearothermophilus* spores using vials or spore strips, with at least 1x 10<sup>6</sup> spores per milliliter. Under no circumstances will an autoclave have minimum operating parameters less than a residence time of 30 minutes, regardless of temperature and pressure, a temperature less than 121 C° or a pressure, less than 15 psi.
- (VI) *Routine Test.* - A chemical indicator strip/tape that changes color when a certain temperature is reached can be used to verify that a specific temperature has been achieved. It may be necessary to use more than one strip over the waste package at different location to ensure that the inner content of the package has been adequately autoclaved.

11. Every 'Authorized Person' shall submit an Annual Report to the prescribed authority in Form-II by 31<sup>st</sup> January every year including information about the categories and quantities of BMW handled during the preceding year.

MPCB-BMW AUTH-0000039330

PRINCIPAL  
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OF NURSING, GADKINGLAJ

PRINCIPAL  
SEVA SADAN SCHOOL OF NURSING.

President  
Pattanshetli Institute of Medical &  
Educational Research Centre, Gadkinglaaj

Secretary



12. (i) Every 'Authorized Person' shall maintain records related to the generation, collection, reception, storage, transportation, treatment, disposal and/or any form of handling of BMW in accordance with these Rules and any guidelines issued.
- (ii) All records shall be subject to inspection and verification by the prescribed authority at any time.
13. When any accident occurs, at any institution or facility or any other site where BMW is handled or during transportation of such waste, the authorized person shall report the accident in Form-III to the prescribed authority forthwith.
14. The Occupier will obey all the lawful instructions issued by the Board/Officers from time to time.
15. You shall submit following bank guarantees in favour of Regional Office, M. P. C. Board, Kolhapur within a 15 days to ensure the compliance of following conditions:

Sl. No.	Condition to be complied	Compliance Timeline (Months)	BG Amount (Rs)	Validity
A)	Operation and Maintenance			
01	To segregate and handle BMW as per the Conditions of Authorization/BMW Rules.	Continuous	25000/-	31.12.2025
B)	Records			
02.	To maintain records of BMW and submission of Annual report in Form - II before 31 <sup>st</sup> January.	Continuous	15000/-	31.12.2025
03	To maintain records of BMW material received /delivered to authorized party/ CBMWESDF (Transporters only).	Continuous	10000/-	31.12.2025
C)	Performance			
04	To provide Effluent Treatment Plant.	Six months	50,000/-	31.12.2025
Bank Guarantee Total Amount of Rs.			100,000/-	

MPCB-BMW AUTH-0000039330

PRINCIPAL  
SEVABADAN SCHOOL  
OF MURUNG, GADINGLAJ

President

Secretary

Pattanshetti Institute of Medical & Educational Research Centre, Gadinglaj

PRINCIPAL



FOR AND ON BEHALF OF THE  
MAHARASHTRA POLLUTION CONTROL BOARD

(J. S. Salunkhe)

REGIONAL OFFICER, KOLHAPUR

To,  
M/S. DESAI HOSPITAL,  
DOCTORS COLONY, GADHINGLAJ,  
TAL. GADHINGLAJ, DIST. KOLHAPUR,  
MAHARASHTRA.



Authorization Fees Received:

Sr. No.	Amount	Transaction No.	Date	Drawn On
1	12500/-	TXN2112003726	31.12.2021	Online Payment

Copy to:-

Sub Regional Office, Kolhapur.

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ

MPCB-BMW AUTH-0000039330

PRINCIPAL

President

Pattanshetti Institute of Medical &  
Educational Research Centre, Gadginglaj

Secretary





CE 707136

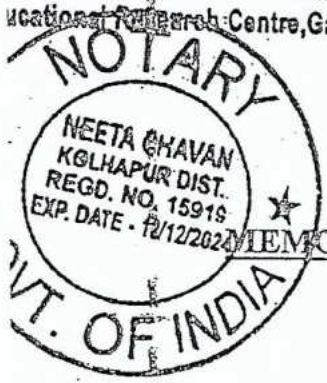
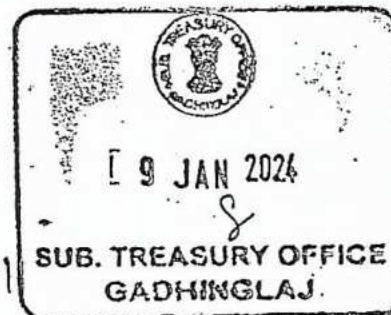
एकूण मुद्रांक रु ५००/- पेंल्लो रु ५००/- न

नेताजी शिवाजी मांजरे

का मूल न गड़हिलज वना दिला 8435 26276681

पू वि प क्र 33/2000 अ नं 26060000

**Sanshetti Institute of Medical & Educational Research-Centre, Gadhingla**



Notary & Regi. Sr. No. 138 / 2024

# MEMORANDUM OF UNDERSTANDING (MOU) BETWEEN

SEVASADAN COLLEGE OF NURSING GADHINGLAJ  
Tal-Gadhinglaj Dist-Kolhapur-416502

AND

M/s MANOMAY HOSPITAL GADHINGLAJ, 52/4/B-2/12, DOCTORS COLONY SCHOOL  
GADHINGLAJ.  
Tal-Gadhinglaj Dist-Kolhapur-416502

LAJ

*[Signature]*

PRINCIPAL  
SEAFARERS COLONY SCHOOL  
OF NURSING, GADHINGLAJ



2

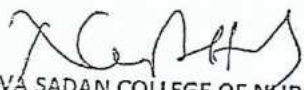
Affiliation for utilization for Nursing Students  
This DEED OF AGREEMENT IS Made on this \_\_\_\_\_ between  
SEVASADAN COLLEGE OF NURSING GADHINGLAJ  
Tal -Gadhinglaj, Dist- Kolhapur 416502  
(First Party)


And  
M/s MANOMAY HOSPITAL GADHINGLAJ ,52/4/B-2/12, DOCTORS COLONY,  
GADHINGLAJ.  
Tal-Gadhinglaj Dist-Kolhapur-416502  
(Second Party)

1. The first Party can utilize Second party's hospital as Affiliated hospital for the Nursing Students of First Party for clinical experience.
2. The Second Party is having 10 bedded Hospital. The types and Number of beds are as follows;

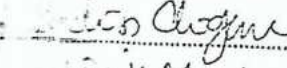
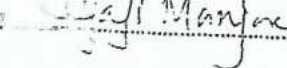
Sr. No.	Departments	Numbers of Beds
01.	Psy	10
02.		
03.		
04.		
05.		

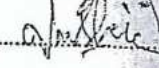
3. Video shooting permission during Inspection (MUHS, INC, DMER)
4. Permission to Conduct to Practical Examination (MUHS)
5. Permission to demonstrate the procedure to the students.
6. Posting timing for inter shift wise 08 Hrs duration-bases.
7. During final examination, before 20 days student will be study holiday.
8. Permission for integrated posting & research project activities.

  
SEVA SADAN COLLEGE OF NURSING,  
Tal-Gadhinglaj, Dist-Kolhapur-416502  
(First Party)

  
M/s MANOMAY HOSPITAL GADHINGLAJ  
,52/4/B-2/12, DOCTORS COLONY,  
GADHINGLAJ. Tal-Gadhinglaj Dist-Kolhapur  
( Second Party )

WITNES Name Address And Signature

1.   
2. 

Dr. Belgudri Rakash A.  
MBBS, DPM  
Reg.No.2007/06/2638

of Correction



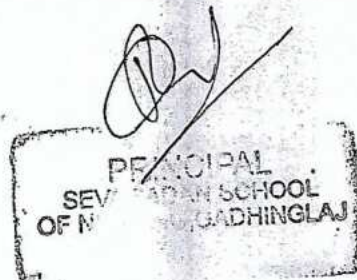
3

Before Me

*Neeta D. Chavan*  
Notary

Smt. NEETA D. CHAVAN  
Advocate & Notary  
"Suyash" Nivas Behind  
Sadhana High School Gadhinglaj  
Tal. Gadhinglaj, Dist. Kolhapur  
Pin. 416502. Mob. 7030306167

12.9 JAN 2024





Section 8  
See Rule 16



48 - A  
Annexure II

## Grant of Licence For Establishment Of Psychiatric Hospital / Nursing Home

Dr. SATISH PAWAR

Director of Health Services, Maharashtra State Mumbai by the authority vested in by the State Mental Health Authority vide Government Notification PHD No. MIS-1088/CR-183/PH-3 Dt. 29<sup>th</sup> March 1995 under section 8 of Mental Health Act 1987 hereby declare that after personally examining the application for the Establishment of **MANOMAY HOSPITAL**

being satisfied,  
GRANT LICENCE to Establish the Psychiatric Hospital / Nursing Home.

By Dr. **RAKESH APPASAHEB BELGUDRI**

At **12/12, KITTURKAR BLDG., 1ST FLOOR, KADGAON ROAD  
GADHINGLAJ - 416 502, KOLHAPUR** Tel No.

From **20/08/2013** till **19/08/2018**

Licence No. **129/2013**

SEAL



PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ

Place : MUMBAI

Date : **11/08/2014**

Licensing Authority  
Government of Maharashtra



# MAHARASHTRA POLLUTION CONTROL BOARD

## Sub Regional Office, Kolhapur

Phone : 0231-2652952/2660448

Fax : 0231-2652952

Email : rokolkhapur@mpcb.gov.in

Visit At : <http://mpcb.gov.in>



Udyog Bhawan Near Collector Office,

Kolhapur - 416003

### LETTER OF BIO-MEDICAL WASTE AUTHORISATION

[Authorizations for Generation, Collection, Reception, Segregation, Disposal of Bio-Medical Wastes under Rule 7(4)]

- I. File number of authorization and date of issue  
SRO-KOLHAPUR/BMW\_AUTH/2011000045/20 Date: 04/11/2020
- II. M/s. MANOMAY HOSPITAL, GADHINGLAJ is hereby granted an authorization for generation of biomedical waste on the premises situated at: 52/4B/2-12 Doctors colony Gadhinglaj, Tal-Gadhinglaj, Dist-Kolhapur.
- III. This authorization shall be in force for a period up to 31.03.2025. An application shall be made by the occupier/operator for renewal 3 Months before expiry of earlier authorization.
- IV. This authorization is issued subject to compliance of the conditions stated below and to such other conditions as may be specified in the Rules for the time being in force under the Environment (Protection) Act, 1986.
- V. No of Beds: 10.

#### Terms and Conditions of authorization

1. The authorized Person shall comply with the provisions of the Environment (Protection) Act, 1986, and the Rules made there under.
2. The authorization shall be produced for inspection at the request of an officer authorized by the prescribed authority.
3. (i) The authorized person shall not rent, lend or sell the biomedical waste or facility.  
(ii) The authorized person can transfer the BMW generated at above premises to the "Transporter" or "Operator of Facility" authorized by MPCB under Bio-Medical Waste (Management and Handling) Rules, 1998 for collection, transportation, treatment and/or disposal of BMW generated.
4. Any unauthorized change in equipment or working conditions as mentioned in the application by the person authorized shall constitute a breach of this authorization.
5. It is the duty of the authorized person to take prior permission of the prescribed authority to close down the facility.

PRINCIPAL  
SEVA SADAN SCHOOL  
CHANDRANAGAR, KOLHAPUR



MPCB-BMW\_AUTH-0000026270



MPCB and duly earmarked for disposal of treated BMW / at common H.W. treatment & disposal facility setup as per the Hazardous Waste (M & H) Rules, 1989 as amended and authorized by MPCB.

9. (i) BMW shall not be mixed with other wastes or reused, recycled or sold in any form.
- (ii) BMW shall be segregated into containers / bags at the point of generation in accordance with Schedule-II prior to storage, treatment and disposal. The containers shall be labeled according to Schedule III.
- (iii) If a container containing BMW is to be transported from the premises where BMW is generated to any waste treatment facility outside the premises, the container shall, apart from the Label prescribed in Schedule III, also carry information prescribed in Schedule IV and shall be transported by authorized Transporter only.
- (iv) Notwithstanding anything contained in the Motor Vehicles Act, 1988 or Rules there under, BMW shall be transported only in such vehicle as may be authorized for the purpose by the competent authority as specified by the Government.
- (v) No untreated BMW shall be kept stored beyond a period of 48 hours.

10. **Standards for waste autoclaving:**

The autoclave should be dedicated for the purposes of disinfecting and treating bio-medical waste.

- (I) When operating a gravity flow autoclave, medical waste shall be Subjected to:
  - (i) a temperature of not less than 121°C and pressure of 15 pounds per Square inch (psi) for an autoclave residence time of not less than 60 minutes; or
  - (ii) a temperature of not less than 135°C and a pressure of 31 psi for an autoclave residence time of not less than 45 minutes; or
  - (iii) a temperature of not less than 149°C and a pressure of 52 psi for an autoclave residence time of not less than 30 minutes.
- (II) When operating a vacuum autoclave, medical waste shall be subjected to a minimum of one pre-vacuum pulse to purge the autoclave of all air. The waste shall be subjected to the following:
  - (i) a temperature of not less than 121°C and a pressure of 15 psi for an autoclave residence time of not less than 45 minutes; or
  - (ii) a temperature of not less than 135°C and a pressure of 31 psi for an autoclave residence time of not less than 30 minutes; or
- (III) Medical waste shall not be considered properly treated unless the time, temperature and pressure indicators indicate that the required time, temperature and pressure were reached during the autoclave process. If for any reasons, time, temperature or pressure indicates that the required temperature, pressure or residence time was not reached, the entire load of medical waste must be autoclaved again until the proper temperature, pressure and residence time were achieved.
- (IV) Recording of operational parameters: Each autoclave shall have graphic or computer recording devices which will automatically and continuously monitor and record dates, time of day, load identification number and operating parameters throughout the entire length of the autoclave cycle.

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING GADHINGLAJ

*[Signature]*





**गडहिंग्लज नगरपरिषद, गडहिंग्लज**  
ता. गडहिंग्लज, जि. कोल्हापूर, 416502



E-mail - cogmcg@gmail.com  
☎ (02327) 222245

Website - http://gadhinglajnp.in  
Toll Free No-18001331218

जा.क्र. - गड.न.प./आवि/ २८/२०२२


दिनांक. - २०/०६/२०२२

वाचा १) डॉ. राकेश आप्पासाहेब बेळगुद्री . जुना मालमत्ता क्र. ५९९३ व नवीन ११०००४५९ वार्ड क्र ११  
सि.सं.न. ५२ हि. ४ब/२ प्लॉट न. १२ , डॉक्टर कॉलनी , गडहिंग्लज यांचा दि. १४/०६/२०२२ चा अर्ज.  
२) जुना मालमत्ता क्र. ५९९३ व नवीन ११०००४५९ वार्ड क्र ११ सि.सं.न. ५२ हि. ४ब/२ प्लॉट न. १२ ,  
डॉक्टर कॉलनी , गडहिंग्लज , चे प्रापटी कार्ड, बांधकाम परवाना, संमतीपत्र , नकाशा , घरपट्टी भरलेली  
पावती स्टकचरल अभियंता चा दाखला.

**व्यवसाय अनुज्ञेय दाखला .**

तुमचा दि. १४ / ०६ / २०२२ च्या अर्जास जोडलेल्या कागदपत्राचा विचार करून सोबत जोडलेल्या जागेमध्ये " मनोमय हॉस्पिटल " या नावाने " वैद्यकीय " व्यवसाय सुरु करणेसाठी व्यवसाय अनुज्ञेय दाखला देणेत येत आहे.

- १) गडहिंग्लज नगरपरिषद हद्दीमध्ये जुना मालमत्ता क्र. ५९९३ व नवीन ११०००४५९ वार्ड क्र ११ सि.सं.न. ५२ हि. ४ब/२ प्लॉट न. १२ , डॉक्टर कॉलनी , गडहिंग्लज या मिल्कतीमध्ये " मनोमय हॉस्पिटल " या नावाने " वैद्यकीय " हा व्यवसाय सुरु केलेनंतर शेजारील नागरिकांना त्रास होणार नाही याची दक्षता घेणे बंधनकारक आहे.
- २) " मनोमय हॉस्पिटल " या नावाने " वैद्यकीय " हा व्यवसाय अर्जासोबत जोडलेल्या नकाशातील दर्शविलेल्या जागेमध्येच करणे परवानाधारक यांचेवर बंधनकारक राहील .
- ३) सदरच्या व्यवसायाबाबत शेजारील नागरिकांची कोणत्याही प्रकारची हरकत अगर तक्रार आल्यास तुम्हास सदर व्यवसाय बंद करणे बंधनकारक आहे.
- ४) इकडील अधिकारबाह्य बाबींची पूर्तता करणेची झाल्यास व्यवसाय अनुज्ञेय दाखला बंधनकारक राहणार नाही.
- ५) सदर व्यवसायाचा बोर्ड मराठी भाषेतून लावणे , व सदर बोर्डावर संपूर्ण पत्ता , संपर्क नंबर ( मोबाईल नंबर) घालणे आवश्यक आहे.
- ६) दाट लोकवस्तीच्या कारणामुळे सदरचा व्यवसाय बंद करणेबाबत नगरपरिषदेने तुम्हास कळविलेस सदरचा व्यवसाय बंद करणे बंधनकारक आहे.
- ७) वेस्ट मटेरियल ( Bio- Medical ) नगरपरिषदेच्या सुचनेप्रमाणे निर्गत करणेचे आहे हे करत असताना कोणत्याही प्रकारचा उपद्रव होणार नाही याची खबरदारी बंधनकारक आहे.
- ८) सदरच्या व्यवसाय अनुज्ञेय दाखल्याप्रमाणे व्यवसाय सुरु केलेली तारीख व्यवसाय सुरु झालेपासून ७ दिवसाच्या आत इकडे लेखी कळविणे बंधनकारक आहे.
- ९) सदरील व्यवसायासाठी आवश्यक त्या सर्व प्रधिकरणाची मंजूरी घेणे आपणावर बंधनकारक राहील .
- १०) सदरचा व्यवसाय रात्री ९ ते सकाळी ७ या वेळेत बंद ठेवणेचा आहे.

  
PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ





**MAHARASHTRA STATE MENTAL HEALTH AUTHORITY  
(MSMHA)**

**Form-F**

[See rule 66]

**CERTIFICATE OF PERMANENT REGISTRATION OF MENTAL  
HEALTH ESTABLISHMENT**

The Maharashtra State Mental Health Authority, after considering the application under section 65 (2) or section 66 (3) or section 66(10) or section 66 (17) of the Mental Healthcare Act, 2017, hereby accords Permanent Registration to the applicant mental health establishment in terms of section 66 (4) or section 66 (11), or section (17) as per the details given hereunder:

Name: - Dr. Rakesh Appasaheb Belgudri

Address: - Manomay Hospital 52/4/B-2/12, Doctors Colony near Dr.Chetan Patil  
Hospital Gadhinglaj Dist Kolhapur

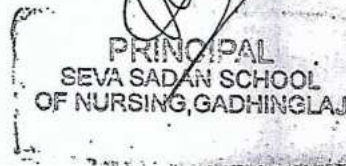
No of beds: - 10

Permanent Registration Certificate No.57/2023

The Permanent registration certificate No.57/2023 issued, is subject to the conditions laid down in the Mental Healthcare Act, 2017 and the rules and regulations made there under.

Place: Mumbai

Date: 04/10/2023



Registration Authority  
(MSMHA)

Seal of the Registration Authority

Dr. Swapnil Lale  
Chief Executive Officer  
State Mental Health  
Authority, Mumbai



## 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) Rules, 2016, in connection with my/our/existing/proposed activity from the premises as per the details given below.

### 1. General Information

**UAN No:**  
MPCB-CONSENT-0000251697

**Application submitted on:**  
24-06-2025

### Industry Information

**Industry Type:** O88 Health-care Establishment (as defined in BMW Rules)  
**Category:** Orange  
**Scale:** S.S.I

**Consent To:** Operate (Plain Renewal)  
**Submit to:** SRO - Kolhapur

### Consent to Establish Details

<b>Consent to Establish No.</b>	<b>Consent to Establish date</b>	<b>Consent to Establish Valid Upto</b>
	01-01-1970	01-01-1970
<b>Previous Consent No.</b>	<b>Previous Consent date</b>	<b>Previous Consent Valid Upto</b>
SRO/KOP/BMW/AUTH/201100004 5/20	04-11-2020	31-03-2025

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

<b>First Name</b>	<b>Father / Husband Name</b>	<b>Last Name</b>	<b>Designation</b>
Dr. RAKESH	APPASAHEB	BELGUDRI	PROPRIETOR
<b>Mobile No</b>	<b>Telephone/Fax</b>	<b>Email</b>	<b>Aadhar No</b>
9049656525	8275020650	raKeshbelgudri84@gmail.com	448502754411
<b>PAN No</b>	<b>Address</b>	<b>Pin Code</b>	
ANMPB0041K	52/4/B/2-12, DOCTORS COLONY, NEAR DR. CHETAN PATIL HOSPITAL, GADHINGLAJ, TAL.- GADHINGLAJ, DIST. - KOLHAPUR	416502	

  
PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ



MANOMAY HOSPITAL

b) Address for Correspondance

**Pin Code**  
416502

**District**  
Kolhapur

**City/Town**  
Gadhinglaj

**Survey/Gut No.**  
52/4/B/2-12

**Name of premises /Building**  
MANOMAY HOSPITAL

**Road/Street**  
DOCTORS COLONY

**Area/Locality**  
Gadhinglaj

**Email**  
rakeshbelgudri84@gmail.com

**Website URL**  
NA

c) Onwership of Facility

Private (Proprietary Establishment)

**Land Ownership**  
Self Owned

d) Month and year of commissioning of the HCF

24/10/2012

e) Area of the Facility / Hospital

**i) Total plot area (in square meter)**  
246

**ii) Built up area (in square meter)**  
140

**iii) Open Plot Area (Sq.Mtr)**  
106.00

f) Enter Latitude and Longitude of site (In degrees)

**Latitude (In degrees)**  
16.21

**Longitude (In degrees)**  
74.3

g) Does HCF have Operation Theatre,

No

h) Does HCF have Laundry facility in premises

No

i) Does HCF have Canteen/Cafeteria facility in premises

No

j) Does HCF have Hostel/Residential quarters in premises

No

**3.BMW Authorization Details**

a) Type of health treatment system

Medicine

b) Bombay Nursing Home Registration Details

**Total number of Beds**  
10

**BNH Registration Number** 57 2023

**Valid Upto** 31-03-2035

**First Issued Date** 24-10-2012

**Certificate issuing Authority**  
Civil Surgeon

c) Diagnostic and Pharma Facilities available in Premises

**Pathology Lab** No

**Blood Bank** No

d) Whether HCF intended to Sale / Handover liquid BMW for R&D purpose

No

  
**PRINCIPAL**  
**SEVA SADAN SCHOOL**  
**OF NURSING, GADHINGLAJ**



		b) Animal Anatomical Waste	0
		c) Soiled Waste	2.00
		d) Expired or Discarded Medicines	1.00
		e) Chemical Waste	0
		f) Chemical Liquid Waste	0
		g) Discarded linen, mattresses, beddings contaminated with blood or body fluid.	1.00
		h) Microbiology Biotechnology and other clinical laboratory waste	0
2	Red	Contaminated waste (Recyclable)	1.00
3	White (Translucent)	Waste sharps including Metals	1.00
4	Blue	a. Glassware	5.00
		b. Metallic body implants	0

Do you Have Equipment Installed for Pretreatment of Yellow (g), (h) Category Waste

No

Whether you have establish a Bar-Code system for Bag or Containers containing Bio-Medical waste

No

Common Facility Membership Details (CTF)

**CTF Name**

M/s S.S. Services, Ichalkaranji

**Membership Number**

OW CER 2025 26 0232

**Issued Date**

31-03-2026

#### 4. Consent Details

a) Sources of Water

i) Surface Water

Yes

**Name of the water supply**

GADHINGLAJ MUNICIPAL CORPORATION 1

**Water Consumption Quantity (CMD)**

ii) Ground Water

No

iii) Tanker Water

No

b) Water Consumption Details

**Raw Water (CMD)**

1

**Recycle Water (CMD)**

**Total Water Quantity Requirement (CMD)**

1

c) Water consumption for different uses (CMD)

Purpose	Consumption	Effluent Generation	Disposal
Domestic Pourpose	1	1	Local Bodies Sewer
Pathology Laboratory, Floor washing, Operation Theater	0	0	NA
Laundry	0	0	NA
Industrial Cooling,spraying in mine pits or boiler feed	0	0	NA
<b>Total</b>	<b>1.00</b>	<b>1.00</b>	

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ



**1) Municipal Solid Waste**

a) Biodegradable Waste(kg/day)

1.00

b) Recyclable Waste(kg/day)

0

c) Domestic Hazardous Waste(kg/day)

0

Air Pollution

Whether D.G. Set Installed

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
HCL	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

CHWSDF Details


CHWTDF Facility Name

NA

CHWTDF Membership Number

0

Hazardous Waste Details		
Description	Waste Category	Quantity in MT/Month
Incineration Ash	37.3	0
STP/ETP	35.3	0

  
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 SEVA SADAN SCHOOL  
 OF NURSING, GADHINGLAJ



Description	Quantity	UOM	Treatment	Treatment	Remarks
NA	0	NA	NA	NA	NA

##### 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

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

Open Space Availability

Plantation Done On Number of Trees  
Planted

106

75

20

Whether Environmental Statement submitted

No

Environmental Statement submitted Date

01-01-1970

Any other additional information that the applicants desires to give

HCE IS REGISTERED UNDER MAHARASHTRA STATE MENTAL HEALTH ESTABLISHMENT  
HAVING REG NO 57 2023

Do you have Infection Control Committee Constituted

No

##### 6. Financial Details

Is there any Bank Guarantee imposed on you during previous Consent/Authorization period.

No

Bank Guarantee Number	Date	Valid Up To	Amount	Bank Name	Branch
0	01-01-1970	NA	0	NA	NA

Additional Bank Guarantee Details, if Any					
Bank Guarantee Number	Date	Valid Up To	Amount	Bank Name	Branch
0	01-01-1970	NA	0	NA	NA

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ



1043/2025 (7)

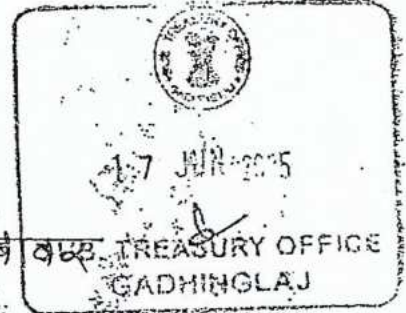


MAHARASHTRA

2024

40AB 135681

जोह्या-१  
 मुद्रांक क्र. १६६३ दि. २२/०७/२०२५  
 मुद्रांक शिवाजी शैक्षणिक सेवा समिती, कोल्हापूर  
 SEVA SADAN SCHOOL OF NURSING  
 श्री. Gadhinglaj, Dist. Kolhapur  
 रा. कोल्हापूर Pin-416502  
 मुद्रांक शिवाजी शैक्षणिक सेवा समिती, कोल्हापूर



Gadhinglaj, Dist. Kolhapur  
 Pin-416502

श्री. संदिप/शंकरराव कोणवाडे  
 म. वि. य. क्र. 33/2000 को. नं. 2606009

ज्या कारणासाठी ज्यांनी मुद्रांक खेदी केला त्यांनी  
 त्याच कारणासाठी मुद्रांक खेदी केल्यापासून  
 सहा महिन्यांत वापरणे बंधनकारक आहे



MEMORANDUM OF UNDERSTANDING (MOU) BETWEEN

SEVA SADAN SCHOOL OF NURSING GADHINGLAJ

Tal- Gadhinglaj, Dist-Kolhapur-416502

AND

M/s KESARKAR HOSPITAL GADHINGLAJ

Tal- Gadhinglaj, Dist-Kolhapur-416502

For Corrections on this page

PRINCIPAL  
 SEVA SADAN SCHOOL  
 OF NURSING, GADHINGLAJ



2

Affiliation for utilization for Nursing Students

This DEED OF AGREEMENT IS Made on this \_\_\_\_\_ between

Seva Sadan School Of Nursing

Tal.-Gadhinglaj, Dist- Kolhapur 416502 (First Party)

And

Kesarkar Hospital

Tal-Gadhinglaj Dist-Kolhapur-416502 (Second Party)



The first Party can utilize Second party's hospital as Affiliated hospital for the Nursing Students of First Party for clinical experience.

2. The Second Party is having 30 bedded Hospital. The types and Number of beds are as follows;

Sr. No.	Departments	Numbers of Beds
01.	<u>Surgical</u>	<u>30</u>
02.		
03.		
04.		
05.		

3. Video shooting permission during inspection (MUHS, INC, DMER, MSBNPE,)

4. Permission to Conduct to Practical Examination (MUHS)

5. Permission to demonstrate the procedure to the students.

6. Posting timing for inter shift wise 08 Hrs duration bases.

7. During final examination, before 20 days student will be study holiday.

8. Permission for integrated posting & research project activities.

Seva Sadan School Of Nursing  
Tal-Gadhinglaj,  
Dist-Kolhapur-416502  
(First Party)



Kesarkar Hospital  
Tal-Gadhinglaj,  
Dist-Kolhapur-416502  
Dr. Pravin S. Kesarkar  
KESARKAR HOSPITAL  
Vadli Prastha, Warananagar Bethe  
Near ST Stand, G/ D/ G/ L/ A/ J  
Reg. No 2121/1104

Witness Name Address And Signature

1. Sadish Chigam

Chigam

Notary Seal  
[Signature]

[Signature]  
PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ



सिद्धि साह्यचिकित्सक, वैद्यनाथ

ਸ੍ਰੀ ਮਾਤਾ ਜੀਵਨੀ ਪ੍ਰੋਫੈਸਰ ਡਾ. ਡੀ. ਡੀ. 1958 ਈ. ਡੀ.

THE UNIVERSITY OF CHICAGO

डॉ. ओ. पी. मरी ~~स्विट्जरलैंड~~ ~~स्विट्जरलैंड~~ ~~स्विट्जरलैंड~~

केसरकर लॉस्पिटल, गडहिंग्लज

वेधीन, हॉस्पिटल/नर्सिंग होम/मेंटलिटी होम रजिस्टर केले अनुसार जतने हॉस्पिटल में

लॉन्ग / सॉर्टिंगरी होम फाउन्डिण्यास परवाना देणेत येत आहे. X मुरादेवराज मल्लिक देवेंद्र

200. 200. ☒

गिरफ्तार क्रमांक २९५/२०२३ गडचिरोल जिल्हा पारुलीवाडी पोलीस ठाणे ००

अग्निस्तुंभान् दिनांश्च :

सर्व कार्यवाही पूर्ण २०

निष्कर्ष : दोहराएँ।

पृष्ठ संख्या ५७

महोदय दिनांक :

सदस्ये सर्टिफिकेट दिनांक : ३१/०३/२०-२६ पर्यंत कार्यवाहीत राहील.

President

Pattanshetti Institute of Medical & Health Sciences, Gadgaon, Maharashtra, India

Educational Research Centre, Gandhinagar, Bangalore-560009.

Secretar ~~PRINCIPAL~~ ~~PRINCIPAL~~

of Medical and Nursing School of Nursing

AD-4-201-010602



# MAHARASHATRA POLLUTION CONTROL BOARD

Sub Regional Office, Kolhapur

Udyog Bhawan Near Collector Office,

Phone : 0231-2652952/2660448

Fax : 0231-2652952

Email : rekolhapur@mpcb.gov.in

Visit At : <http://mpcb.gov.in>



Kolhapur - 416003

## LETTER OF BIO-MEDICAL WASTE AUTHORISATION [Authorizations for Generation, Collection, Reception, Segregation, Disposal of Bio-Medical Wastes under Rule 7(4)]

- I. File number of authorization and date of issue  
SRO-KOLHAPUR/BMW\_AUTH/ 1907000153/21 Date: 12/07/2021
- II. M/s. KESARKAR HOSPITAL is hereby granted an authorization for generation of biomedical waste on the premises situated at, Doctor Colony, Gadhinglaj, Tal-Gadhinglaj, Dist-Kolhapur.
- III. This authorization shall be in force for a period up to 31/12/2026. An application shall be made by the occupier/operator for renewal 3 Months before expiry of earlier authorization.
- IV. This authorization is issued subject to compliance of the conditions stated below and to such other conditions as may be specified in the Rules for the time being in force under the Environment (Protection) Act, 1986.
- V. No of Beds: 30

### Terms and Conditions of authorization:

1. The authorized Person shall comply with the provisions of the Environment (Protection) Act, 1986, and the Rules made there under.
2. The authorization shall be produced for inspection at the request of an officer authorized by the prescribed authority.
3. i) The authorized person shall not rent, lend or sell the biomedical waste or facility.  
ii) The authorized person can transfer the BMW generated at above premises to the "Transporter" or "Operator of Facility" authorized by MPCB under Bio-Medical Waste (Management and Handling) Rules, 1998 for collection, transportation, treatment and/or disposal of BMW generated.
4. Any unauthorized change in equipment or working conditions as mentioned in the application by the person authorized shall constitute a breach of this authorization.
5. It is the duty of the authorized person to take prior permission of the prescribed authority to close down the facility.



MPCB-BMW\_AUTH-0000021055

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ



6. The authorization is granted for generation of Bio-Medical Waste (BMW) in waste categories and quantities listed here in below :

categories and quantities listed here in below :					
Sr. No.	Category	Type of Waste	Quantity (Kg/M)	Segregation Colour Coding	Treatment & Disposal
1	Yellow	a) Human Anatomical Waste	70.00	Yellow Colored non- Chlorinated plastic.bags	No onsite treatment of BMW is permitted. The above mentioned Bio medical Waste shall be sent to Common BMW Treatment & Disposal facility authorized by MPCB
		b) Animal Anatomical Waste	---		
		c) Solid Waste	1.00		
		d) Expired or discarded Medicines	1.00		
		e) Chemical Waste	---	Separate collection system leading to effluent treatment system	
		f) chemical liquid Waste	1.00		
		g) Discarded linen, mattresses beddings contaminated with blood or body fluid.	1.00		
		h) Microbiology Biotechnology and other clinical laboratory waste.	1.00	Autoclave safe plastic bags or containers.	
2	Red	Contaminated waste (Recyclable)	0.00	Red colored non chlorinated plastic bags or container.	
3	White (Translucent)	Waste Sharps including Metals	2.00	Puncture proof, leak proof, tamper proof container.	
4	Blue	a) Glass ware	---	Cardboard boxes with blue colored marking:	
		b) Metallic body implants	---		

7. The liquid/solid waste generated from the treatment activity (from laboratory and washing, clearing, housekeeping and disinfecting activities) shall be treated suitably by providing effluent treatment facility to conform the standards prescribed in Schedule V of said Rules and the Environment (Protection) Act, 1986.

8. (i) BMW shall be treated and disposed of in accordance with Schedule I; and in compliance with the standards prescribed in Schedule V of said Rules.

(ii) You shall setup requisite BMW treatment facilities like incinerator, autoclave / Microwave, shredder etc., at the disposal side in accordance with the BMW rules. You shall disposed of the duly treated BMW and incineration ash in secured land fill site at your own premises / at MSW secured land fill site of Municipal Council authorized by



MPCB and duly earmarked for disposal of treated BMW / at common H.W. treatment & disposal facility setup as per the Hazardous Waste (M & H) Rules, 1989 as amended and authorized by MPCB.

9. (i) BMW shall not be mixed with other wastes or reused, recycled or sold in any form.
- (ii) BMW shall be segregated into containers / bags at the point of generation in accordance with Schedule-II prior to storage, treatment and disposal. The containers shall be labeled according to Schedule III.
- (iii) If a container containing BMW is to be transported from the premises where BMW is generated to any waste treatment facility outside the premises, the container shall, apart from the Label prescribed in Schedule III, also carry information prescribed in Schedule IV and shall be transported by authorized Transporter only.
- (iv) Notwithstanding anything contained in the Motor Vehicles Act, 1988 or Rules there under, BMW shall be transported only in such vehicle as may be authorized for the purpose by the competent authority as specified by the Government.
- (v) No untreated BMW shall be kept stored beyond a period of 48 hours.

10. Standards for waste autoclaving:

The autoclave should be dedicated for the purposes of disinfecting and treating bio-medical waste,

- (I) When operating a gravity flow autoclave, medical waste shall be Subjected to:
  - (i) a temperature of not less than 121 C° and pressure of 15 pounds per Square inch (psi) for an autoclave residence time of not less than 60 minutes; or
  - (ii) a temperature of not less than 135 C° and a pressure of 31 psi for an autoclave residence time of not less than 45 minutes; or
  - (iii) a temperature of not less than 149 C° and a pressure of 52 psi for an autoclave residence time of not less than 30 minutes.
- (II) When operating a vacuum autoclave, medical waste shall be subjected to a minimum of one pre-vacuum pulse to purge the autoclave of all air. The waste shall be subjected to the following.
  - (i) a temperature of not less than 121 C° and a pressure of 15 psi for an autoclave residence time of not less than 45 minutes; or
  - (ii) a temperature of not less than 135 C° and a pressure of 31 psi for an autoclave residence time of not less than 30 minutes; or
- (III) Medical waste shall not be considered properly treated unless the time, temperature and pressure indicators indicate that the required time, temperature and pressure were reached during the autoclave process. If for any reasons, time temperature or pressure indicates that the required temperature, pressure or residence time was not reached, the entire load of medical waste must be autoclaved again until the proper temperature, pressure and residence time were achieved.
- (IV) Recording of operational parameters,- Each autoclave shall have graphic or computer recording devices which will automatically and continuously monitor and record dates, time of day, load identification number and operating parameters throughout the entire length of the autoclave cycle.



- (V) *Validation test: Spore testing.* - The autoclave should completely and consistently kill the approved biological indicator at the maximum design capacity of each autoclave unit. Biological indicator for autoclave shall be *Bacillus stearothermophilus* spores using vials or spore strips, with at least  $1 \times 10^4$  spores per milliliter. Under no circumstances will an autoclave have minimum operating parameters less than a residence time of 30 minutes, regardless of temperature and pressure, a temperature less than  $121^\circ\text{C}$  or a pressure, less than 15 psi.
- (VI) *Routine Test.*—A chemical indicator strip/tape that changes color when a certain temperature is reached can be used to verify that a specific temperature has been achieved. It may be necessary to use more than one strip over the waste package at different location to ensure that the inner content of the package has been adequately autoclaved.
11. Every 'Authorized Person' shall submit an Annual Report to the prescribed authority in Form-II by 31<sup>st</sup> January every year including information about the categories and quantities of BMW handled during the preceding year.
12. (i) Every 'Authorized Person' shall maintain records related to the generation, collection, reception, storage, transportation, treatment, disposal and/or any form of handling of BMW in accordance with these Rules and any guidelines issued.  
(ii) All records shall be subject to inspection and verification by the prescribed authority at any time.
13. When any accident occurs at any institution or facility or any other site where BMW is handled or during transportation of such waste, the authorized person shall report the accident in Form III to the prescribed authority forthwith.
14. The Occupier will obey all the lawful instructions issued by the Board Officers from time to time.
15. You shall renew your BMW membership of CBMWTSD and Nursing Home Certificate time to time failure to which the said authorization will stand cancelled automatically.

For and on behalf of the  
Maharashtra Pollution Control Board



(Sanjay B. More)  
I/c Sub Regional Officer, Kolhapur

To,  
M/s. KESARKAR HOSPITAL  
Doctor Colony, Gadhinglaj,  
Tal-Gadhinglaj, Dist-Kolhapur.

Sr. No.	Amount	TXN NO	Date
1	2500/-	TXN1903001863	18.03.2021
2	3750/-	TXN1907000890	11.07.2021

Copy Submitted to:-

1. Chief Accounts Officer, MPCB Board Mumbai
2. Regional Officer(HQ), MPCB, Sion Mumbai
3. Regional Officer, MPCB Kolhapur.

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ



1040/2025



MAHARASHTRA

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40AB 135684

जोडपत्र-२

जोडपत्र-२

मुद्रांक दि. नं. १८५३ दि. २२/०७/२०२५

मुद्रांक नं. श्री. गंधी श्री. गंधी से जारी दिला.

श्री. Gadhinglaj, Dist. Kolhapur

रा. श्री. गंधी Pin-416502

मुद्रांक वि. वेणार सही

SEVA SADAN SCHOOL OF NURSING

Gadhinglaj, Dist. Kolhapur

Pin-416502

श्री. संदीप शंकरराव कागवाडे

मु. वि. प. क्र. 33/2000 को. नं. 2606009

या कारणासाठी ज्यांनी मुद्रांक खरेदी केला त्यांनी त्याच कारणासाठी मुद्रांक खरेदी केल्यापासून सहा महिन्यात वापरणे बंधनकारक आहे

17 JUN 2025  
SUB. TREASURY OFFICE  
GADHINGLAJ



Notary Regl. Sr. No

1040  
2025



MEMORANDUM OF UNDERSTANDING (MOU) BETWEEN

SEVASADAN SCHOOL OF NURSING GADHINGLAJ

Tal- Gadhinglaj, Dist-Kolhapur-416502

AND

M/s SUSHANTI CLINIC, GADHINGLAJ

Tal- Gadhinglaj, Dist-Kolhapur-416502

No. of Corrections  
on this page

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ



2

Affiliation for utilization for Nursing Students

This DEED OF AGREEMENT IS Made on this \_\_\_\_\_ between

Seva Sadan School Of Nursing

Tal.-Gadhinglaj, Dist- Kolhapur 416502 (First Party)

And

SUSHANTI CLINIC GADHINGLAJ

Tal-Gadhinglaj Dist-Kolhapur-416502 (Second Party)



1. The first Party can utilize Second party's hospital as Affiliated hospital for the Nursing Students of First Party for clinical experience.

2. The Second Party is having 15 bedded Hospital. The types and Number of beds are as follows;

Sr. No.	Departments	Numbers of Beds
01.	OB/Gyn Dept	15 (Fifteen)
02.		
03.		
04.		
05.		

3. Video shooting permission during inspection (MUHS, INC, DMER, MSBNPE,)

4. Permission to Conduct to Practical Examination (MUHS)

5. Permission to demonstrate the procedure to the students.

6. Posting timing for inter shift wise 08 Hrs duration bases.

7. During final examination, before 20 days student will be study holiday.

8. Permission for integrated posting & research project activities.

Seva Sadan School Of Nursing

Tal-Gadhinglaj,

Dist-Kolhapur-416502

(First Party)



SUSHANTI CLINIC GADHINGLAJ

Tal-Gadhinglaj,

Dist-Kolhapur-416502

Dr. BANJITE PATIL

M.B.B.S., D.G.O.

Reg.No. 84782

Witness Name Address And Signature

1

Sachin Chigam

Chigam

No. of Corrections  
on this page







महाराष्ट्र शासन

# जिल्हा आर्यचिकित्सक, कोल्हापूर

(सन १९४९ च्या दि. १०वे नर्सिंग होमस रजिस्ट्रेशन अक्टचा कलम ५ अन्वये दिवत लोकांसाठी सर्टिफिकेट)

दि. १०वे नर्सिंग होमस रजिस्ट्रेशन अक्ट, १९४९ अन्वये

**जिल्हा प्रमाणपत्र**

जें. जी./श्रीमती सुशान्ता श. चव्हाण यांचे

सुशान्ता रमिटेन्स, गडहिंग्लज

वेधील हॉस्पिटल/नर्सिंग होम/मॅटर्निटी होम रजिस्टर केले असून सदरचे हॉस्पिटल/नर्सिंग होम/मॅटर्निटी होम कोलविषयास परवाना देणेत येत आहे. ☒ /पुनर्नौदणीस मान्यता देणेत येत आहे. ☐

रजिस्ट्रेशन क्रमांक : ४३१/२०२४/गडहिंग्लज प्रसूतीमार्ती कॉटर्स : १०

रजिस्ट्रेशन दिनांक : ०१/०४/२०२४ इतर कोणत्याही कॉटर्स : ०५

ठिकाण : कोल्हापूर एकूण कॉटर्स : १५

सर्टिफिकेट दिव्याचा दिनांक : १९/०४/२०२४

सदरचे सर्टिफिकेट दिनांक : ३१/०३/२०२७ पर्यंत कार्यवाहीत राहील.



PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ

जिल्हा आर्यचिकित्सक,  
कोल्हापूर



# MAHARASHATRA POLLUTION CONTROL BOARD

## Sub Regional Office, Kolhapur

Phone : 0231-2652952/2660448

Fax : 0231-2652952

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

Visit At : <http://mpcb.gov.in>



Udyog Bhawan Near Collector Office,

Kolhapur - 416003

### LETTER OF BIO-MEDICAL WASTE AUTHORISATION

[Authorizations for Generation, Collection, Reception, Segregation, Disposal of Bio-Medical Wastes under Rule 7(4)]

- I. File number of authorization and date of issue  
SRO-KOLHAPUR/BMW\_AUTH/ 1907000153/2-1 Date: 12/09/2021.
- II. M/s.SUSHANTI CLINIC is hereby granted an authorization for generation of biomedical waste on the premises situated at, Doctor Colony, Gadhinglaj, Tal-Gadhinglaj, Dist-Kolhapur.
- III. This authorization shall be in force for a period up to 31.12.2026. An application shall be made by the occupier/operator for renewal 3 Months before expiry of earlier authorization.
- IV. This authorization is issued subject to compliance of the conditions stated below and to such other conditions as may be specified in the Rules for the time being in force under the Environment (Protection) Act, 1986.
- V. No of Beds: 15

#### Terms and Conditions of authorization:

1. The authorized Person shall comply with the provisions of the Environment (Protection) Act, 1986, and the Rules made there under.
2. The authorization shall be produced for inspection at the request of an officer authorized by the prescribed authority.
3. i) The authorized person shall not rent, lend or sell the biomedical waste or facility.  
ii) The authorized person can transfer the BMW generated at above premises to the "Transporter" or "Operator of Facility" authorized by MPCB under Bio-Medical Waste (Management and Handling) Rules, 1998 for collection, transportation, treatment and/or disposal of BMW generated.
4. Any unauthorized change in equipment or working conditions as mentioned in the application by the person authorized shall constitute a breach of this authorization.
5. It is the duty of the authorized person to take prior permission of the prescribed authority to close down the facility.

MPCB-BMW\_AUTH-0000021065



PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ



# MAHARASHTRA POLLUTION CONTROL BOARD

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SRO-KOLHAPUR/BMW\_AUTH/ 1907000153/21 Date: 12/09/2021
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6. The authorization is granted for generation of Bio-Medical Waste (BMW) in waste categories and quantities listed here in below :

categories and quantities listed here in below :					
Sr. No.	Category	Type of Waste	Quantity (Kg/M)	Segregation Colour Coding	Treatment & Disposal
1	Yellow	a) Human Anatomical Waste	70.00	Yellow Colored non- Chlorinated plastic bags	No onsite treatment of BMW is permitted. The above mentioned Bio medical Waste shall be sent to Common BMW Treatment & Disposal facility authorized by MPCB
		b) Animal Anatomical Waste	---		
		c) Solid Waste	1.00		
		d) Expired or discarded Medicines	1.00		
		e) Chemical Waste	---	Separate collection system leading to effluent treatment system	
		f) chemical liquid Waste	1.00		
		g) Discarded linen, mattresses beddings contaminated with blood or body fluid.	1.00		
		h) Microbiology Biotechnology and other clinical laboratory waste.	1.00	Autoclave safe plastic bags or containers.	
2	Red	Contaminated waste (Recyclable)	0.00	Red colored non chlorinated plastic bags or container.	
3	White (Translucent)	Waste Sharps including Metals	2.00	Puncture proof, leak proof, tamper proof container.	
4	Blue	a) Glass ware	---	Cardboard boxes with blue colored marking.	
		b) Metallic body implants	---		

7. The liquid/solid waste generated from the treatment activity (from laboratory and washing, cleaning, housekeeping and disinfecting activities) shall be treated suitably by providing effluent treatment facility to conform the standards prescribed in Schedule V of said Rules and the Environment (Protection) Act, 1986.
8. (i) BMW shall be treated and disposed of in accordance with Schedule I; and in compliance with the standards prescribed in Schedule V of said Rules.
- (ii) You shall setup requisite BMW treatment facilities like incinerator, autoclave / Microwave, shredder etc., at the disposal side in accordance with the BMW rules. You shall disposed of the duly treated BMW and incineration ash in secured land fill site at your own premises / at MSW secured land fill site of Municipal Council authorized by

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MPCB and duly earmarked for disposal of treated BMW / at common H.W. treatment & disposal facility setup as per the Hazardous Waste (M & H) Rules, 1989 as amended and authorized by MPCB.

9. (i) BMW shall not be mixed with other wastes or reused, recycled or sold in any form.  
(ii) BMW shall be segregated into containers / bags at the point of generation in accordance with Schedule-II prior to storage, treatment and disposal. The containers shall be labeled according to Schedule III.  
(iii) If a container containing BMW is to be transported from the premises where BMW is generated to any waste treatment facility outside the premises, the container shall, apart from the Label prescribed in Schedule III, also carry information prescribed in Schedule IV and shall be transported by authorized Transporter only.  
(iv) Notwithstanding anything contained in the Motor Vehicles Act, 1988 or Rules there under, BMW shall be transported only in such vehicle as may be authorized for the purpose by the competent authority as specified by the Government.  
(v) No untreated BMW shall be kept stored beyond a period of 48 hours.
10. **Standards for waste autoclaving:**  
The autoclave should be dedicated for the purposes of disinfecting and treating bio-medical waste,
- (I) When operating a gravity flow autoclave, medical waste shall be Subjected to:
- (i) a temperature of not less than 121 C° and pressure of 15 pounds per Square inch (psi) for an autoclave residence time of not less than 60 minutes; or
  - (ii) a temperature of not less than 135 C° and a pressure of 31 psi for an autoclave residence time of not less than 45 minutes; or
  - (iii) a temperature of not less than 149 C° and a pressure of 52 psi for an autoclave residence time of not less than 30 minutes.
- (II) When operating a vacuum autoclave, medical waste shall be subjected to a minimum of one pre-vacuum pulse to purge the autoclave of all air. The waste shall be subjected to the following.
- (i) a temperature of not less than 121 C° and a pressure of 15 psi for an autoclave residence time of not less than 45 minutes; or
  - (ii) a temperature of not less than 135 C° and a pressure of 31 psi for an autoclave residence time of not less than 30 minutes; or
- (III) Medical waste shall not be considered properly treated unless the time, temperature and pressure indicators indicate that the required time, temperature and pressure were reached during the autoclave process. If for any reasons, time temperature or pressure indicates that the required temperature, pressure or residence time was not reached, the entire load of medical waste must be autoclaved again until the proper temperature, pressure and residence time were achieved.
- (IV) **Recording of operational parameters.** - Each autoclave shall have graphic or computer recording devices which will automatically and continuously monitor and record dates, time of day, load identification number and operating parameters throughout the entire length of the autoclave cycle.



- (V) *Validation test: Spore testing.* - The autoclave should completely and consistently kill the approved biological indicator at the maximum design capacity of each autoclave unit. Biological indicator for autoclave shall be *Bacillus stearothermophilus* spores using vials or spore strips, with at least  $1 \times 10^4$  spores per milliliter. Under no circumstances will an autoclave have minimum operating parameters less than a residence time of 30 minutes, regardless of temperature and pressure, a temperature less than  $121^\circ\text{C}$  or a pressure, less than 15 psi.
- (VI) *Routine Test.*—A chemical indicator strip/tape that changes color when a certain temperature is reached can be used to verify that a specific temperature has been achieved. It may be necessary to use more than one strip over the waste package at different location to ensure that the inner content of the package has been adequately autoclaved.
11. Every 'Authorized Person' shall submit an Annual Report to the prescribed authority in Form-II by 31<sup>st</sup> January every year including information about the categories and quantities of BMW handled during the preceding year.
12. (i) Every 'Authorized Person' shall maintain records related to the generation, collection, reception, storage, transportation, treatment, disposal and/or any form of handling of BMW in accordance with these Rules and any guidelines issued.  
(ii) All records shall be subject to inspection and verification by the prescribed authority at any time.
13. When any accident occurs at any institution or facility or any other site where BMW is handled or during transportation of such waste, the authorized person shall report the accident in Form III to the prescribed authority forthwith.
14. The Occupier will obey all the lawful instructions issued by the Board Officers from time to time.
15. You shall renew your BMW membership of CBMWTSD and Nursing Home Certificate time to time failure to which the said authorization will stand cancelled automatically.

For and on behalf of the  
Maharashtra Pollution Control Board



(Sanjay B. More)

I/c Sub Regional Officer, Kolhapur

To,  
M/s. SUSHANTI CLINIC  
Doctor Colony, Gadhinglaj,  
Tal-Gadhinglaj, Dist-Kolhapur.

Sr. No.	Amount	TXN NO	Date
1	2500/-	TXN1903001863	18.03.2021
2	3750/-	TXN1907000890	11.07.2021

Copy Submitted to:-

1. Chief Accounts Officer, MPCB Board Mumbai
2. Regional Officer(HQ), MPCB, Sion Mumbai
3. Regional Officer, MPCB Kolhapur.

MPCB-BMW\_AUTH-0000021065

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1038/2025



महाराष्ट्र MAHARASHTRA

2024

40AB 135683

जोडपत्र-१

मुद्रांक विक्री नं. १६७३ दि. २२/०७/२०२५

मुद्रांक रु. १००/- शैक्षणिक चे कापी दिला.

श्री. Gadhinglaj, Dist. Kolhapur करीत अर्जदिव बापद बाव

रा. पो. Pin-416502 त. गडहिंगलज, जि. कोल्हापूर

SEVA SADAN SCHOOL OF NURSING  
Gadhinglaj, Dist. Kolhapur  
Pin-416502



श्री. सौंदर्य शंकरराव कागवाडे  
मु.वि.प.क्र. 33/2000 को.नं. 2606009  
ज्या कारणासाठी ज्यांनी मुद्रांक खरीदी केला त्यांनी  
त्याच कारणासाठी मुद्रांक खरीदी केल्यापासून  
सहा महिन्यात वापरणे बंधनकारक आहे

Notary Regl. Sr. No 103/2025

**MEMORANDUM OF UNDERSTANDING (MOU) BETWEEN**

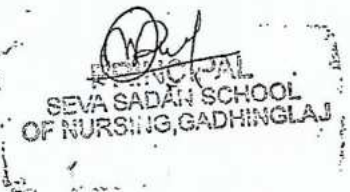
**SEVA SADAN SCHOOL OF NURSING GADHINGLAJ**

Tal- Gadhinglaj, Dist-Kolhapur-416502

**AND**

**M/s TARA NURSING HOME, GADHINGLAJ**

Tal- Gadhinglaj, Dist-Kolhapur-416502



No. of Corrections on this page 1/3



2

Affiliation for utilization for Nursing Students

This DEED OF AGREEMENT IS Made on this \_\_\_\_\_ between

Seva Sadan School Of Nursing

Tal.-Gadhinglaj, Dist- Kolhapur 416502 (First Party)

And

Tara Nursing Home

Tal-Gadhinglaj Dist-Kolhapur-416502 (Second Party)



1. The first Party can utilize Second party's hospital as Affiliated hospital for the Nursing Students of First Party for clinical experience.

2. The Second Party is having 15 bedded Hospital. The types and Number of beds are as follows;

Sr. No.	Departments	Numbers of Beds
01.	OB & care	15
02.		
03.		
04.		
05.		

3. Video shooting permission during inspection (MUHS, INC, DMER, MSBNPE,)

4. Permission to Conduct to Practical Examination (MUHS)

5. Permission to demonstrate the procedure to the students.

6. Posting timing for inter shift wise 08 Hrs duration bases.

7. During final examination, before 20 days student will be study holiday.

8. Permission for integrated posting & research project activities.

Seva Sadan School Of Nursing

Tal-Gadhinglaj,

Dist-Kolhapur-416502

(First Party)



Tara Nursing Home

Tal-Gadhinglaj,

Dist-Kolhapur-416502

Witness Name Address And Signature

1. Sachin Chigane

Signature

Dr. Sanjay R. Shetkar  
MD, DGO, FRCR DNB  
MMC Reg. No. 070245

Principal  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ

No. of Corrections on this page



2

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Seva Sadan School Of Nursing

Tal-Gadhinglaj,

Dist-Kolhapur-416502

(First Party)



Tara Nursing Home

Tal-Gadhinglaj,

Dist-Kolhapur-416502

Witness Name Address And Signature

1. Sachin Chigore

Signature

Dr. Sanjay R. Shinde  
MD, FRCO, FRCR DM  
MMC Reg. No. 070845

PROVIDED  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ

No. of Corrections of Nursing, Gadhinglaj  
on this page 1/18





महाराष्ट्र शासन

# जिल्हा शल्यचिकित्सक, कोल्हापूर

(शम १९४९ च्या दि. बॉम्बे नर्सिंग होमस रजिस्ट्रेशन ऑक्टचा कालम ५ अन्वये दिलेले रजिस्ट्रेशन सर्टिफिकेट)

दि बॉम्बे नर्सिंग होमस रजिस्ट्रेशन ऑक्ट, १९४९ अन्वये

**जिल्हा प्रमाणपत्र**

डॉ. श्री./श्रीमती डॉ. स्नेहल शारदाबा यांचे  
लॅन्स नर्सिंग होम कॅन्ड रेवेन्शोपी सेंटर गडहिंगलज

येथील हॉस्पिटल/नर्सिंग होम/मॅटर्निटी होम रजिस्टर केले असून सदरचे हॉस्पिटल/नर्सिंग होम/मॅटर्निटी होम चालविण्यास परवाना देणेत येत आहे. ☒ /पुनर्नॉदणीस मान्यता देणेत येत आहे. ☒

रजिस्ट्रेशन क्रमांक : ४३३/२०२४/गडहिंगलज प्रसूतीसाठी कॉटस् : १०

रजिस्ट्रेशन दिनांक : ०७/०२/२०२४(१/४/२४) इतर रुग्णांसाठी कॉटस् : ०५

ठिकाण : कोल्हापूर

एकूण कॉटस् : १५

सर्टिफिकेट दिल्याचा दिनांक : ०६/०४/२०२४

सदरचे सर्टिफिकेट दिनांक : ३१/०३/२०२७ पर्यंत कार्यवाहीत राहील.



बेटी बचाओ  
save the girl child

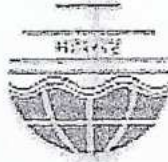
जिल्हा शल्यचिकित्सक,  
छत्रपती प्रनिलाराजे सर्वोपचार  
रुग्णालय, कोल्हापूर.

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ



# MAHARASHTRA POLLUTION CONTROL BOARD

Tel: 0231 -2652952  
Fax: 0231 - 2660448  
Website: <http://mpcb.gov.in>  
Email:  
srokolhapur@mpcb.gov.in



Udyog Bhavan Building ,  
Near Collectarate Office,  
Kolhapur-416 002

ORANGE/S.S.I

Date: 01/05/2025

No:- Format1.0/SRO/UAN No.0000231479/CO/2505000004

To,  
TARA NURSING HOME  
Plot No 3, House No 624/2, Ward No 12, Zone 1, Daddi  
Colony, Ajra Road, Gadhinglaj, Tal-Gadhinglaj, Dist-  
Kolhapur.



Email: superstryker7@gmail.com  
Contact No.: 9822421040

*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:** 1. Combine Consent and Bio-Medical Waste Authorization granted by the Board vide no.MPCB-CONSENT-0000231479& BMW Auth No. ✓  
2. Your application for Combine Consent and Bio-Medical Waste Authorization dated 04/04/2025

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 **31-12-2024 To 31-12-2034**
2. HCF Area : - Plot Area 631.00 M<sup>2</sup> with Built-up area 167.00 M<sup>2</sup>.
3. **Activities Included**
  - a. Total Number of Beds : **15 Nos. 433**
    1. General Beds : **15 Nos**
4. **Conditions under the Water (P&CP) Act, 1974:-**
  1. Quantity of total water consumption shall not exceed 2 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.

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5. **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**.

6. **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.

Sl No	Type of Waste	H/W Category no.	Quantity	UOM	Disposal
NA					

7. **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.

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

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 **S.S. Services, Ichalkaranji** 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)).
9. 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.
10. 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.



PRINCIPAL  
SEVA SADAN SCHOOL



11. 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.
12. 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.
13. 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.
14. 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.
15. This CCA shall not be construed as exemption from obtaining necessary NOC/permission from any other Government agencies as applicable.
16. Applicant shall provide Waste Treatment Facility as per the BMW Rule as 2016 on priority & submit the proposal within one month from issuing the certificate.
17. The hospital shall comply the MPC Board circular vide no. MPC/PSO/B-211111FTS0124 dtd.11/11/2021 time to time. HCE shall possess valid registration under Bombay Nursing Home Act 1949 rule 5.

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: Mr. Pranod Rajaram Mane  
Sub Regional Officer  
For and on behalf of,  
Maharashtra Pollution Control Board  
srokolhapur@mpcb.gov.in  
2025-05-01 10:11:26 IST

#### Received Consent/Authorization fee of -

Sl No	Amount(Rs.)	Transaction/DR No.	Date	Transaction Type
1	25000.00	TXN2501000800	07/01/2025	Online Payment
2	46561.00	TXN2504001082	04/04/2025	Online Payment

#### Copy to:

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

*[Handwritten signature]*

PRINCIPAL  
SEVA SADAN SCHOOL



**Conditions under Water (P & 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	2.00
3.	Pathology Laboratory, Floor washing, Operation Theater	0.00
4.	Laundry	0.00
5.	Other such as agriculture, gardening, etc.	0.00

**B. Conditions for Sewage & Effluent Generation, Treatment and Disposal:-**

Sr. No.	Description	Permitted quantity of discharge (CMD)	Standards to be achieved	Disposal
1	Domestic Sewage	01	As per clause 'C'	100% Recycle
2	Trade effluent	0	As per clause 'C'	100% Recycle

- 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	Discharge Standards applicable
		Limiting Concentration in mg/l except for pH
1	pH	6.5-9.0
2	Oil & Grease	10
3	BOD (3 days 27°C)	30
4	COD	250
5	Total Suspended Solids	100
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.



PRINCIPAL  
SATA SADAN SCHOOL



**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):

Sl No.	Stack Attached to	Fuel Type	Quantity	Stack height (Mtr)
1	NA	--	--	-

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 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.



PRINCIPAL  
SEVA SADAN SCHOOL  
SEVA SADAN, GARDHINGLAJ



**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	20.00	Yellow coloured non- chlorinated plastic bags.	Bio medical Waste shall be sent to MPCB authorized BMW-CTF S.S. Services, Ichalkaranji Ichalkaranji
		b) Animal Anatomical Waste	0.00		
		c) Soiled Waste	5.00		
		d) Expired or Discarded Medicines	1.00		
		e) Chemical Waste	1.00		
		f) Chemical Liquid Waste	2.00	Separate collection system leading to effluent treatment system.	
		g) Discarded linen, mattresses, beddings contaminated with blood or body fluid.	2.00	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.	Pre-treat to sterilize with nonchlorinated chemicals on-site as per National AIDS Control Organisation or World Health Organisation guidelines thereafter sent to BMW-CTF for Incineration.
2	Red	Contaminated waste (Recyclable)	5.00	Red coloured non chlorinated plastic bags or containers.	Bio medical Waste shall be sent to MPCB authorized BMW-CTF S.S. Services, Ichalkaranji Ichalkaranji
3	White (Translucent)	Waste sharps including Metals	15.00	Puncture proof, Leak proof, tamper proof container.	Bio medical Waste shall be sent to MPCB authorized BMW-CTF S.S. Services, Ichalkaranji Ichalkaranji
4	Blue	a) Glassware	20.00	Puncture proof, Leak proof with Blue coloured marking.	Bio medical Waste shall be sent to MPCB authorized BMW-CTF S.S. Services, Ichalkaranji Ichalkaranji
		b) Metallic body implants	0.00		



PRINCIPAL  
TARA NURSING HOME



**Responsibilities of RCF**

1. You shall handover Bio Medical waste only to MPCB Authorized Common Bio medical waste treatment and Disposal facility **S.S. Services, Ichalkaranji** 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, Kolhapur and uploading the same to MPCB Portal (<https://www.ecmpcb.in/>).

**PRINCIPAL****SEVA BHARATI SOCIETY  
OF NURSING, GADHINGLAJ**



**Bank Guarantees**

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

S. 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
2	Towards Operation and Maintenance of STP/ETP to achieve prescribed discharge standards	Continuous	
<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
2	To maintain records of BMW handed over to CBMWTF	Continuous	
<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


  
**PRINCIPAL**  
 SEVA SADAN SCHOOL  
 GADHINGLAJ



**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, Kolhapur.
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.

  
PRINCIPAL  
TARA NURSING HOME  
OF NURSING, KARVE



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  
SEVA SADAN SCHOOL  
OF NURSING  
GATEWAY





# कोल्हापूर महानगरपालिका

प्रोग्रॅड घाईला नं. ३३, पिन कोड नं. - ४३६ ००२.

फोन नं.-पी.टी.एक्स. बॉर्डर - २५४०२९१ ते २५४०२९४



जावक क्र. - अग्निशमन विभाग / वशि-१/ ५०६/२०२४-२५

दि. १६/१०/२०२४

धनि.

डॉ. संजय आर शानबाग,

जि.कोल्हापूर

विषय :- डॉ. संजय आर शानबाग, आजरा रोड, गडहिंग्लज, जि. कोल्हापूर यांचा नाग नर्सिंग ग्राम १५ वेड

हॉस्पिटल इमारतीसाठी ना-हरकत दाखला चावत...

संदर्भ :- १. संचालक, महाराष्ट्र अग्निशमन सेवा संचालनालय यांचा आदेश दि. ०९/१०/२०२४

२. वरद फायर अँड सेफ्टी सर्विसेस यांचा दि. ०९/१०/२०२४ चा वी फॉर्म लायसन

नं. MFS- LA/RF-259, RD-239

उपरोक्त विषयकोत कामी संदर्भित पत्रांत ये डॉ. संजय आर शानबाग, आजरा रोड, गडहिंग्लज, जि. कोल्हापूर

यांचा नाग नर्सिंग होम १५ वेड हॉस्पिटल मध्ये वर्गविणेत आलेल्या अग्निप्रतिबंधक सुविधा वृद्धत आणि कार्यक्षम स्थितीत

असलेबाबत अग्निशमन विभागाचा ना-हरकत दाखला मागणी केलेला आहे.

उपरोक्त ठिकाणी संचालक, महाराष्ट्र राज्य अग्निशमन सेवा संचालनालय यांनी दिलेल्या आदेशाने महाराष्ट्र आग प्रतिबंधक व जीव संरक्षक उपाययोजना २००६ भाग ४ नुसार आपल्या हॉस्पिटल मध्ये वर्गविण्यात आलेली अग्निशमन सुविधांची कोल्हापूर महानगरपालिका अग्निशमन विभागाने तपासणी केली असून वरद फायर अँड सेफ्टी सर्विसेस यांचा दि. ०९/१०/२०२४ चा वी फॉर्म लायसन नं. MFS- LA/RF-259, RD-239 प्रमाणे १.) ए.जी.सी. - ०३ नग, सी.ओ.०३, २) वंघ- ३ एच.पी., ३) हॉजरील -०२ नग, हायड्रंट वॉल्व-०२ नग, होज बॉक्स-०३ ४) फायर इनलेट रु वे-१ नग बसवलेली आहे. सद्यः पंधरणा आज मिताला कार्यक्षम व सुस्थितीत असले बाबत नमूद केले असल्याने त्यांना इकडील विभागा कडून ना-हरकत दाखला देण्यात येत आहे. सदरचा दाखला हा केवळ मुंबई श्रृंखला गृह नोंदणी साठी वापरण्याचा आहे.

महाराष्ट्र आग प्रतिबंधक व जीव संरक्षक उपाययोजना २००६ भाग ४ मधील कलम ३ (पोट कलम ३) नुसार सदरची यंत्रणा सुस्थितीत व कार्यक्षम असले बाबत मान्यताप्राप्त लायसन एजन्सी यांचा वी फॉर्म पूर्णतुन दोन वेळा म्हणजे ज्ञानदारी व जुलै महिन्यात सादर करण्याचा आहे असाथा सदरचा ना-हरकत दाखला रद्द समजण्यात येईल. सदरचा दाखला एक वर्षाचे मुदतीकरिता देण्यात येत आहे १५ वेड हॉस्पिटल परवाना नुतनीकरण करणेकामी आग सुरक्षा निधी GD 1000133202406118 रक्कम ३,०२५/- रुपये दिनांक १६/१०/२०२४ रोजी भरण्यात आले आहे.

मुख्य अग्निशमन अधिकारी  
कोल्हापूर महानगरपालिका

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ



1036/2025 ①



महाराष्ट्र MAHARASHTRA

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जोडावतः १

जोडावतः २

मुद्रांक क्रि. नं. १६६३

दि. ०२/०७/२०२५

मुद्रांक रु. श्री शिव शैक्षणिक सेवा सादन

SEVA SADAN SCHOOL OF NURSING

श्री. Gadhinglaj, Dist. Kolhapur

रा. श्री श्री Pin-416502

Habab

SEVA SADAN SCHOOL OF NURSING

Gadhinglaj, Dist. Kolhapur

Pin-416502

श्री. संदिप शंकरराव काभवाडे

मु. वि. प. क्र. 33/2000 को. नं. 2606009

ज्या कारणासाठी ज्यांनी मुद्रांक खरेदी केला त्यांनी त्याच कारणासाठी मुद्रांक खरेदी केल्यापासून सहा महिन्यात वापरणे बंधनकारक आहे



17 JUN 2025

SUB-TREASURY OFFICE  
GADHINGLAJ



Notary Regl. Sr. No.

1036  
2025



MEMORANDUM OF UNDERSTANDING (MOU) BETWEEN

SEVA SADAN SCHOOL OF NURSING GADHINGLAJ

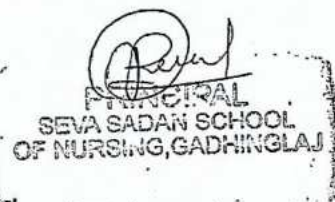
Tal- Gadhinglaj, Dist-Kolhapur-416502

AND

M/s SHREE CHILDREN'S HOSPITAL, GADHINGLAJ

Tal- Gadhinglaj, Dist-Kolhapur-416502

No. of Corrections  
on this page





2

Affiliation for utilization for Nursing Students

This DEED OF AGREEMENT IS Made on this \_\_\_\_\_ between

Seva Sadan School Of Nursing

Tal.-Gadhinglaj, Dist- Kolhapur 416502 (First Party)

And

Shree Children's Hospital

Tal-Gadhinglaj Dist-Kolhapur-416502 (Second Party)



1. The first Party can utilize Second party's hospital as Affiliated hospital for the Nursing Students of First Party for clinical experience.

2. The Second Party is having 20 bedded Hospital. The types and Number of beds are as follows;

Sr. No.	Departments	Numbers of Beds
01.	<i>Pediatric.</i>	<i>20</i>
02.		
03.		
04.		
05.		

3. Video shooting permission during inspection (MUHS, INC, DMER, MSBNPE,)

4. Permission to Conduct to Practical Examination (MUHS)

5. Permission to demonstrate the procedure to the students.

6. Posting timing for inter shift wise 08 Hrs duration bases.

7. During final examination, before 20 days student will be study holiday.

8. Permission for integrated posting & research project activities.

Seva Sadan School Of Nursing

Tal-Gadhinglaj ,

Dist-Kolhapur-416502

(First Party)



Shree Children Hospital

Tal-Gadhinglaj,

Dist-Kolhapur-416502

SHREE CHILDREN HOSPITAL

Dr. Bhikant K. Butar

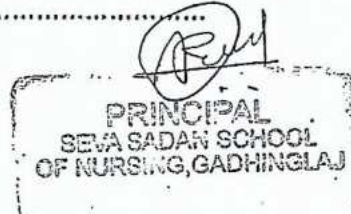
M.B.B.S. D.D.O.

2002/01/0007

Witness Name Address And Signature

1. *Sachin Chigau.*

*Chigau*







सहायक शासन

# जिल्हा शल्यचिकित्सक, कोल्हापूर

जिल्हा शल्यचिकित्सक, कोल्हापूर यांच्या कार्यालयीन वेळापत्रक २०२३-२४

दि १९/०३/२०२३ रोजी होणारे रुग्णसंख्या ऑक्ट, १९४९ अन्वये

## चौदणी प्रमाणपत्र

ज. श्री. श्रीमता श्री. वसुदेव सुतार यांचे

श्री. वसुदेव सुतार, गडहिंग्लज

वर्धन हॉस्पिटल/नर्सिंग होम/गॅटनेटी होम रजिस्टर केले असून सदरचे हॉस्पिटल/नर्सिंग होम/गॅटनेटी होम बालविण्वास प्रदाना देणेत येत आहे. ☒ /पुनर्नवनीत प्रदाना देणेत येत आहे. ☒

रजिस्ट्रेशन क्रमांक २९७/२०२३/गडहिंग्लज प्रमाणीकृत कॉडर, ००

रजिस्ट्रेशन दिनांक २०/०४/२०२३ इतर लष्करी कॉडर २०

लष्करी कॉडर २०

रजिस्ट्रेशन दिनांक २२/०४/२०२३

सदरचे सर्टिफिकेट दिनांक १९/०३/२०२३ पर्यंत कार्यवाहीत राहील.



जिल्हा शल्यचिकित्सक,  
नर्सिंग प्रविण्वास तज्ज्ञ  
कोल्हापूर

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ



# MAHARASHTRA POLLUTION CONTROL BOARD

Sub Regional Office, Kolhapur



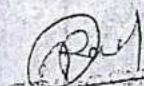
## LETTER OF BIO MEDICAL WASTE AUTHORIZATION

(Authorization for Generation, Collection, Reception, Segregation, Disposal of Bio-Medical Wastes under Rule 74 of)

- I. The name of the authorized person and date of issue: SRO-KOLHAPUR/0001/0001 Date: 07/07/2021
- II. MR. SHREE BAL RUMALAY is hereby granted an authorization for generation of biomedical waste on the premises situated at DOCTORS COLONY NEAR DESAI HOSPITAL GABHINGLA DISTRICT-KOLHAPUR.
- III. This authorization shall be in force for a period up to 31/01/2022. An application shall be made by the competent operator for renewal 3 Months before expiry of earlier authorization.
- IV. This authorization is issued subject to compliance of the conditions stated below and for such other conditions as may be specified in the Rules for the time being in force under the Environment (Protection) Act, 1986.
- V. No of Data: 20.

### Terms and Conditions of authorization

1. The authorized Person shall comply with the provisions of the Environment (Protection) Act, 1986, and the Rules made there under.
2. The authorization shall be produced for inspection at the request of an officer authorized by the prescribed authority.
3. i) The authorized person shall not rent, lend or sell the biomedical waste or facility.  
ii) The authorized person can transfer the BMW generated at above premises to the "Transporter" or "Operator of Facility" authorized by MPCB under Bio-Medical Waste (Management and Handling) Rules, 1998 for collection, transportation, treatment and/or disposal of BMW generated.
4. Any unauthorized change in equipment or working conditions as mentioned in the application by the person authorized shall constitute a breach of this authorization.
5. It is the duty of the authorized person to take prior permission of the prescribed authority to close down the facility.
6. The authorization is granted for generation of Bio-Medical Waste (BMW) in waste categories and quantities listed here in below

  
SRO-KOLHAPUR/0001/0001  
SUB REGIONAL OFFICE, KOLHAPUR



6. The authorization is granted for generation of Bio-Medical Waste (BMW) in waste categories and quantities listed here in below :

categories and quantities listed here in below :					
Sr. No.	Category	Type of Waste	Quantity (Kg/M)	Segregation Colour Coding	Treatment & Disposal
1	Yellow	a) Human Anatomical Waste	70.00	Yellow Colored non- Chlorinated plastic bags	No onsite treatment of BMW is permitted. The above mentioned Bio medical Waste shall be sent to Common BMW Treatment & Disposal facility authorized by MPCB
		b) Animal Anatomical Waste	---		
		c) Solid Waste	1.00		
		d) Expired or discarded Medicines	1.00		
		e) Chemical Waste	---	Separate collection system leading to effluent treatment system	
		f) chemical liquid Waste	1.00		
		g) Discarded linen, mattresses beddings contaminated with blood or body fluid.	1.00		
		h) Microbiology Biotechnology and other clinical laboratory waste.	1.00	Autoclave safe plastic bags or containers.	
2	Red	Contaminated waste (Recyclable)	0.00	Red colored non chlorinated plastic bags or container.	
3	White (Translucent)	Waste Sharps including Metals	2.00	Puncture proof, leak proof, tamper proof container.	
4	Blue	a) Glass ware	---	Cardboard boxes with blue colored marking.	
		b) Metallic body implants	---		

7. The liquid/solid waste generated from the treatment activity (from laboratory and washing, cleaning, housekeeping and disinfecting activities) shall be treated suitably by providing effluent treatment facility to conform the standards prescribed in Schedule V of said Rules and the Environment (Protection) Act, 1986.

8. (i) BMW shall be treated and disposed of in accordance with Schedule I; and in compliance with the standards prescribed in Schedule V of said Rules.  
(ii) You shall setup requisite BMW treatment facilities like incinerator, autoclave / Microwave, shredder etc., at the disposal side in accordance with the BMW rules. You shall disposed of the duly treated BMW and incineration ash in secured land fill site at your own premises / at MSW secured land fill site of Municipal Council authorized by



MPCB and duly earmarked for disposal of treated BMW / at common H.W. treatment & disposal facility setup as per the Hazardous Waste (M & H) Rules, 1989 as amended and authorized by MPCB.

9. (i) BMW shall not be mixed with other wastes or reused, recycled or sold in any form.
  - (ii) BMW shall be segregated into containers / bags at the point of generation in accordance with Schedule-II prior to storage, treatment and disposal. The containers shall be labeled according to Schedule III.
  - (iii) If a container containing BMW is to be transported from the premises where BMW is generated to any waste treatment facility outside the premises, the container shall, apart from the Label prescribed in Schedule III, also carry information prescribed in Schedule IV and shall be transported by authorized Transporter only.
  - (iv) Notwithstanding anything contained in the Motor Vehicles Act, 1988 or Rules there under, BMW shall be transported only in such vehicle as may be authorized for the purpose by the competent authority as specified by the Government.
  - (v) No untreated BMW shall be kept stored beyond a period of 48 hours.
10. **Standards for waste autoclaving:**  
The autoclave should be dedicated for the purposes of disinfecting and treating bio-medical waste,
- (I) When operating a gravity flow autoclave, medical waste shall be Subjected to:
    - (i) a temperature of not less than 121 C° and pressure of 15 pounds per Square inch (psi) for an autoclave residence time of not less than 60 minutes; or
    - (ii) a temperature of not less than 135 C° and a pressure of 31 psi for an autoclave residence time of not less than 45 minutes; or
    - (iii) a temperature of not less than 149 C° and a pressure of 52 psi for an autoclave residence time of not less than 30 minutes.
  - (II) When operating a vacuum autoclave, medical waste shall be subjected to a minimum of one pre-vacuum pulse to purge the autoclave of all air. The waste shall be subjected to the following.
    - (i) a temperature of not less than 121 C° and a pressure of 15 psi for an autoclave residence time of not less than 45 minutes; or
    - (ii) a temperature of not less than 135 C° and a pressure of 31 psi for an autoclave residence time of not less than 30 minutes; or
  - (III) Medical waste shall not be considered properly treated unless the time, temperature and pressure indicators indicate that the required time, temperature and pressure were reached during the autoclave process. If for any reasons, time temperature or pressure indicates that the required temperature, pressure or residence time was not reached, the entire load of medical waste must be autoclaved again until the proper temperature, pressure and residence time were achieved.
  - (IV) **Recording of operational parameters,-** Each autoclave shall have graphic or computer recording devices which will automatically and continuously monitor and record dates, time of day, load identification number and operating parameters throughout the entire length of the autoclave cycle.



- (V) *Validation test: Spore testing.* — The autoclave should completely and consistently kill the approved biological indicator at the maximum design capacity of each autoclave unit. Biological indicator for autoclave shall be *Bacillus stearothermophilus* spores using vials or spore strips, with at least  $1 \times 10^4$  spores per milliliter. Under no circumstances will an autoclave have minimum operating parameters less than a residence time of 30 minutes, regardless of temperature and pressure, a temperature less than  $121^\circ\text{C}$  or a pressure, less than 15 psi.
- (VI) *Routine Test.*—A chemical indicator strip/tape that changes color when a certain temperature is reached can be used to verify that a specific temperature has been achieved. It may be necessary to use more than one strip over the waste package at different location to ensure that the inner content of the package has been adequately autoclaved.
11. Every 'Authorized Person' shall submit an Annual Report to the prescribed authority in Form-II by 31<sup>st</sup> January every year including information about the categories and quantities of BMW handled during the preceding year.
12. (i) Every 'Authorized Person' shall maintain records related to the generation, collection, reception, storage, transportation, treatment, disposal and/or any form of handling of BMW in accordance with these Rules and any guidelines issued.  
(ii) All records shall be subject to inspection and verification by the prescribed authority at any time.
13. When any accident occurs at any institution or facility or any other site where BMW is handled or during transportation of such waste, the authorized person shall report the accident in Form III to the prescribed authority forthwith.
14. The Occupier will obey all the lawful instructions issued by the Board Officers from time to time.
15. You shall renew your BMW membership of CBMW SDF and Nursing Home Certificate time to time failure to which the said authorization will stand cancelled automatically.

For and on behalf of the  
Maharashtra Pollution Control Board



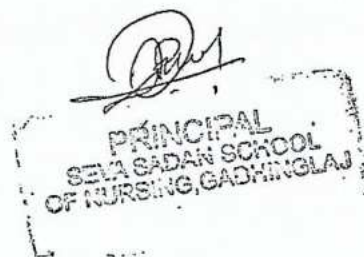
(Sanjay B. More)  
I/c Sub Regional Officer, Kolhapur

To,  
M/s. SHREE BALRUGNALAY,  
Doctor Colony, Gadhinglaj,  
Tal-Gadhinglaj, Dist-Kolhapur.

Sr. No.	Amount	TXN NO	Date
1	2500/-	TXN1903001863	18.03.2021
2	3750/-	TXN1907000890	11.07.2021

Copy Submitted to:-

1. Chief Accounts Officer, MPCB Board Mumbai
2. Regional Officer(HQ), MPCB, Sion Mumbai
3. Regional Officer, MPCB Kolhapur.





1042/2025(U)



MAHARASHTRA

2024

40AB 135688

जोडपत्र-१

मुद्रांक नं. १६६४ दि. २२/०७/२०२५

मुद्रांक रु. १००/-

श्री. SEVASADAN SCHOOL OF NURSING

Gadhinglaj, Dist. Kolhapur

रा. श्री. दि. Pin-416502

जोडपत्र-२

श्री. संधिप शंकरराव कागवाडे

मु.वि.प.क्र.३३/२००० को.नं.२६०६००९

ज्या कारणासाठी ज्यांनी मुद्रांक खरेदी केला त्यांनी

त्याच कारणासाठी मुद्रांक खरेदी केल्यापासून

सहा महिन्यात वापरणे बंधनकारक आहे

17 JUN 2025

SUB. TREASURY OFFICE

GADHINGLAJ

संधिप शंकरराव कागवाडे

प.क्र.३३/२०००

को.नं.२६०६००९

जि.कोल्हापूर

Notary Regl. Sr. No

1042/2025

Adv. SHIVANAND B. SHIRATE

KOLHAPUR

REGD. NO. 26699

Exp. Date 01-01-2030

MEMORANDUM OF UNDERSTANDING (MOU) BETWEEN

SEVASADAN SCHOOL OF NURSING GADHINGLAJ

Tal- Gadhinglaj, Dist-Kolhapur-416502

AND

Suresh Deshpande Memo.Orthopaedic Hospital& Rehabilitation Center, GADHINGLAJ

Tal- Gadhinglaj, Dist-Kolhapur-416502

No. of Corrections on this page

PRINCIPAL

SEVA SADAN SCHOOL

OF NURSING, GADHINGLAJ



1042/2025(U)



MAHARASHTRA

2024

40AB 135688

जोडपत्र-१

मुद्रांक क्रि. नं. १६६४ दि. २२/०७/२०२५

मुद्रांक र. श्री. संधिप शंकरराव कागवाडे शैक्षणिक कामी दिला.

SEVA SADAN SCHOOL OF NURSING

श्री. Gadhinglaj, Dist. Kolhapur ककीता महदिव साकपंद बाबू

रा. श्री. दि. पीन-४१६५०२ ता. गडहिंगलज, जि. कोल्हापूर

मुद्रांक वि. घेया सही Hebar

SEVA SADAN SCHOOL OF NURSING

Gadhinglaj, Dist. Kolhapur

17 JUN 2025

SUB. TREASURY OFFICE

GADHINGLAJ

संधिप शंकरराव कागवाडे

प.क्र. ३३/२०००

को. नं. २६०६००९

जि. कोल्हापूर

Notary Regl. Sr. No 1042

2025

Adv. SHIVANAND B. KOLHATE

REGD. NO. 29699

Exp. Date 01-01-2030

GOVT. OF INDIA

श्री. संधिप शंकरराव कागवाडे

मु. वि. प. क्र. ३३/२००० को. नं. २६०६००९

ज्या कारणासाठी ज्यांनी मुद्रांक खरेदी केला त्यांनी

त्याच कारणासाठी मुद्रांक खरेदी केल्यापासून

सहा महिन्यात वापराचे बंधनकारक आहे

MEMORANDUM OF UNDERSTANDING (MOU) BETWEEN

SEVASADAN SCHOOL OF NURSING GADHINGLAJ

Tal- Gadhinglaj, Dist-Kolhapur-416502

AND

Suresh Deshpande Memo. Orthopaedic Hospital & Rehabilitation Center, GADHINGLAJ

Tal- Gadhinglaj, Dist-Kolhapur-416502

No. of Corrections on this page

PRINCIPAL

SEVA SADAN SCHOOL

OF NURSING, GADHINGLAJ



(2)

Affiliation for utilization for Nursing Students

This DEED OF AGREEMENT IS Made on this \_\_\_\_\_ between

Seva Sadan School Of Nursing

Tal.-Gadhinglaj, Dist- Kolhapur 416502 (First Party)

And

M/s Suresh Deshpande Memorial Orthopedic Hospital And Rehabilitaion  
Centre, Gadhinglaj

Tal-Gadhinglaj Dist-Kolhapur-416502 (Second Party)

1. The first Party can utilize Second party's hospital as Affiliated hospital for the Nursing Students of First Party for clinical experience.

2. The Second Party is having 30 bedded Hospital. The types and Number of beds are as follows;

Sr. No.	Departments	Numbers of Beds
01.	Orthopaedics	30
02.		
03.		
04.		
05.		

3. Video shooting permission during inspection (MUHS, INC, DMER, MSBNPE,)

4. Permission to Conduct to Practical Examination (MUHS)

5. Permission to demonstrate the procedure to the students.

6. Posting timing for inter shift wise 08 Hrs duration bases.

7. During final examination, before 20 days student will be study holiday.

8. Permission for integrated posting & research project activities.

Seva Sadan School Of Nursing

Tal-Gadhinglaj ,

Dist-Kolhapur-416502

(First Party)



M/s Suresh Deshpande Memorial

Orthopedic Hospital And Rehabilitaion

Centre, Gadhinglaj

Tal-Gadhinglaj, Dist-Kolhapur-416502

Hospital & Rehabilitation Center

Final Plot No. 8-A/5, Azad Road,

Gadhinglaj-416502

Witness Name Address And Signature

1. Sachin Chigane

Chigane

Principal

PRINCIPAL  
SEVA SADAN SCHOOL  
OF NURSING, GADHINGLAJ

Corrections  
Page No.





महाराष्ट्र शासन

# जिल्हा शल्यचिकित्सक, कोल्हापूर

(सन् १९४९ च्या दि. १० वी नर्सिंग होम रजिस्ट्रेशन अक्टचा कलम ५ अन्वये दिलेले रजिस्ट्रेशन सर्टिफिकेट)

दि. १० वी नर्सिंग होमचा रजिस्ट्रेशन अक्ट, १९४९ अन्वये

## नोंदणी प्रमाणपत्र

जॉ. श्री./श्रीमती जॅ. डेवेंद्र देवरायडे यांचे  
"सुरेश देवरायडे मेमोरियल" माय्नेटिक हॉस्पिटल  
अँड निहबलिटेशन सेंटर, गडहिंग्लज  
 येथील हॉस्पिटल/नर्सिंग होम/मॅटर्निटी होम रजिस्टर केले असून सदरचे हॉस्पिटल/नर्सिंग  
 होम/मॅटर्निटी होम चालविण्यास परवाना देणेत येत आहे. ☒ / पुर्ननोंदणीस मान्यता देणेत  
 येत आहे. ☒

रजिस्ट्रेशन क्रमांक : ६३५/२०२४/गडहिंग्लज प्रसूतीसाठी कॉट्स : ००

रजिस्ट्रेशन दिनांक : ०९/०४/२०२४

इतर रुग्णांसाठी कॉट्स : ३०

ठिकाण : कोल्हापूर

एकूण कॉट्स : ३०

सर्टिफिकेट दिल्याचा दिनांक : ०९/०४/२०२४

सदरचे सर्टिफिकेट दिनांक : ३१/०३/२०२७ पर्यंत कार्यवाहीत राहील.



*[Signature]*  
 जिल्हा शल्यचिकित्सक,  
 PRINCIPAL, *[Signature]*  
 SEVA SADAN SCHOOL  
 OF NURSING, GADHINGLJ, कोल्हापूर.