

OFFICE OF THE CHIEF MEDICAL & HEALTH OFFICER
District-DEWAS(M.P.)



Form 'B'
(See rule 5 and 6)

Certificate of Registration under Sub-Section (3) of Section 4 of the Madhya Pradesh Upcharyagriha Taha Rujopchar Sambandhi Sthapanaye (Registrikaran Tatha Anugypan) Adhiniyam, 1973

This is to certify that Shri/Smt. **SUNIL SINGH SENGAR** has been registered under the Madhya Pradesh Upcharyagriha Tatha Rujopchar Sambandhi Sthapanaye (Registrikaran Tatha Anugypan) Adhiniyam, 1973 in respect of **AMALTAS INSTITUTE OF MEDICAL SCIENCES** situated at **DEWAS UJJAIN HIGHWAY ,VILLAGE BANGAR ,DEWAS, Dewas(Block), DEWAS** and has been authorized to carry on the said Nursing Home under the **Allopathy** system of medicine.

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| Registration No | NH/2820/APR-2021 |
| Name of Registration | Allopathy |
| Place | DEWAS |
| Date of issued of certificate: | 01-Apr-2024 |
| This certificate of registration shall be valid upto | 31-Mar-2027 |

Signature valid
Digitally Signed By VISHNU KANTA UIKE
(PERSONAL)
Date : 13-Mar-2024 04:24:11 IST



SIGNATURE AUTHORITY
CHIEF MEDICAL & HEALTH OFFICER
DISTRICT DEWAS

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Go to Settings to activate Windows.