



महाराष्ट्र MAHARASHTRA

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YH 903348

प्रतिज्ञापत्र

मुद्राक (कंपक) क्रमांक (Stamp (Comp) Article No.)	
क्या नोंदणी करणार (होईल की)? (Whether it is to be Registered?)	
नोंदणी करणारकक नाम (नोंदणी करणारकक नाम) (If Registered Name of SRP)	
विषयक (विषयक) (Property Description in Brief)	
माबत (माबत) (Consolidation of Accounts)	
मुद्राक विकत (मुद्राक विकत) (Stamp Purchaser's Name)	विद्याधर दामाडर धोबाडे सातारा
मुद्राक रक्कम (Stamp Duty Amount)	2000/-



मुद्राक विक्री वाट वही अनु. क्रमांक दिनांक (Stamp No. Date)	6364/ - 5 AUG 2021
मुद्राक विकत घणायारी सही (Stamp Purchaser's Sign Date)	<i>D</i>
माबतल रक्कम (Consideration of Account)	
परवाना क्रमांक, मुद्राक विकतकर्त (नोंदणी करणारकक नाम) सत्य मुद्राक विक्रीची दिनांक	
	<i>A&P</i> श्रीमती आशा सुनिल पांडेकर परवाना क्र २३०५०२९

DECLARATION**(To be prepared on a Stamp Paper Rs.100)**

I, the Dean / Director/ Principal of the Mahalaxmi College of Physiotherapy College / and Rehabilitation Center, Raigad. Institute solemnly states on affirmation, that the information provided by me in Inspection Format as well as uploaded on College Website alongwith all Annexures is true and correct to the best of my knowledge. The said information is provided to me by the concerned teachers and duly verified by me. It is further submitted the teachers information attached in respective Annexure- VII & VIII are not working in / at any other College /Institute or presented themselves at any inspection for the Academic Year 2022-2023, as per my knowledge and information provided by the concerned teachers. The teachers in the Annexure- VII & VIII are staying in the same city / town / village where the College / Institute is situated or adjacent to the city / town / village, where the College/Institute is situated and having the valid proof of residence of the said city / town / village. The teachers in the Annexure- VII & VIII are not practicing in College working hours or out-side the City where the College /Institute is situated.

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

This declaration is voluntarily signed by me on 09 day of May 2022 at Mahalaxmi college of physiotherapy and Rehabilitation center, Raigad, Satara.

Date : 9/6/2022Place : SATARA

Signature of Dean/Principal

Name of the Signatory-

(with Seal of the College / Institute)