



Intimation Letter

To,
MANAVTA PHARMA PVT.LTD. SANCHALIT SAI MEDICAL
 SHOP NO. 1, GR FLR, PROP NO. A0003898,
 H.NO. 5-3-8/1, GHATI ROAD, JUBLI PARK,
 CHHATRAPATI SAMBHAJINAGAR - 431001
Taluka: CHHATRAPATI SAMBHAJINAGAR (CORPORATION
WARD A&D) District: CHHATRAPATI SAMBHAJINAGAR
I/C Person: HIRALAL ISHWARLAL MANDAWARE (Mobile: 8625984785)



SAINATH MADHAVRAO KOTEWAD

Subject : - Drugs & Cosmetics Act - 1940 & Rules there under

Grant of License arising due to: Fresh License

Sir,

Ref :- Your Inward Application vide Inw No:- BF:-1608708, Dated:- 06/10/2025, Inw ID:- 1608708

With reference to your Inward application, we have to inform you that your said application is approved & below mentioned licences are granted / retained , whose retention Dates are mentioned below :-

<u>Lic</u>	<u>License No.</u>	<u>Issue From</u>	<u>Retained From</u>	<u>Retained Upto</u>	<u>Old LIC No</u>
20	612209	17/10/2025		16/10/2030	-
21	612210	17/10/2025		16/10/2030	-

Open 24 Hrs: NO**Cold Storage: YES**

This licence shall remain valid if licensee deposits a licence retention fee before the expiry of a period of every succeeding five years from the date of its issue unless it is suspended or cancelled by Licencing Authority.

The above mentioned licences are sent herewith.

NOTE: You are requested to provide new rent agreement after completion of its validity (Only applicable to those having rent agreement less than 5 years).

Kindly acknowledge the receipt of this letter.



e-Signed on 17/10/2025 10:35:07

TPAV # 7M965WP961
SHYAM NARAYAN SALE**Assistant Commissioner****Food & Drugs Administration****CHHATRAPATI SAMBHAJINAGAR Zone****1 Circle**

This License/Certificate is eSIGNED. Physical Signature is NOT Required