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| **SHRADDHA HOSPITAL**  **PMC Reg. No. : LCBP-0506-01856** | | | | | | | | | | | | | | | | | | | | | | | | |  |
| **Sr.No. 43, Parashar Society, Pune Nagar Road, Chandan Nagar, Kharadi, Pune – 411014** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Mob No.** **9011052829** | | | | | | | | | | | | | | |  |  |  |  |  |  | **Dr.Sanjiv Jadhav** | |  | |  |
| **9403822324** | | | | | | | | | | | | | | | | |  |  |  |  | **M.B.BS., D.G.O.(Regn.No.60876)** | |  | |  |
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| **Timing** : Mon to Sat. 10:00 a.m. to 2:00 p.m. &6:00 a.m. to 8:00 p.m. **Sunday Closed** | | | | | | | | | | | | | | | | | | | | | | |  | |  |
| **वेळ**: सोमवार ते शनिवार स.१०:०० ते दु.२:०० व सायं. ६:०० ते ८:०० वा. रविवार १०:०० ते १:०० | | | | | | | | | | | | | | | | | | | | | | |  | |  |
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Date :

Dr. Sanjiv Shivram Jadhav

SHRADDHA HOSPITAL

Sr. No. 43, Parashar Society,

Pune-Nagar Road, Kharadi,

Pune-411014.

To,

MOH,

Pune MC

Subject : **Correction of Location mentioned on registration certificate.**

Respected Sir,

I, U/S, Dr. Sanjiv S. Jadhav, have sonography centre at above mentioned place with

PCPNDT/PMC No.550/2012 at present the sonography machine is located at ground floor,

but the registration certificate mentions it at **SHRADDHA HOSPITAL First floor.**

I request you to the appropriate correction.

Attached here with ,

Both the original copies of PMC registration certificate

Thanking You,

Your Sincerely,

Dr. Sanjiv Shivram Jadhav