



S J P N Trust's

Hirasugar Institute of Technology, Nidasoshi*Inculcating Values, Promoting Prosperity*

Approved by AICTE, New Delhi, Permanently Affiliated to VTU, Belagavi

Recognized under 2(f) & 12B of UGC Act, 1956

Accredited at 'A' Grade by NAAC & Programmes Accredited by NBA: CSE & ECE.

ECE

Self-Appraisal
Form

2022-23

Rev.01/11.03.2019

To,
The Principal
HSIT, Nidasoshi.Faculty Name :Dr. Shreevijay Ittannavar
Designation :Associate Professor
DOJ :15/01/2013

Respected sir,

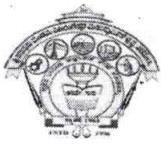
I wish to submit my annual self appraisal report for the academic year 2021-22. Please find the information given below:

Subjects/Lab Handled	Sem./Subject	Subject with code	Subject with code	Lab. with code
	Odd Sem.	1.BSP – 21EC33 ✓	2.DSP – 18EC52 ✓	DSP LAB – 18ECL57 ✓
	Even Sem.	3.DSP – 21EC42 ✓	4. DC – 18EC61 ✓	DSP LAB – 21EC42 ✓

Sr. No.	Criterion			Max. Points	Points earned in Self appraisal	Points earned in HOD/Principal Appraisal	Remarks
A.	Teaching-Learning (70)						
A1	No. of Classes Engaged						
	Odd Sem.	BSP	50/40	10	10	10	<u>Good</u>
		DSP	67/50	10	10	10	
	Even Sem.	DSP	45/40	10	10	10	
		DC	51/50	10	10	10	
	Average Total			10	10	10	
A2	Percentage of Syllabus Covered						
	Odd Sem.	BSP	100	10	10	10	<u>Good</u>
		DSP	100	10	10	10	
	Even Sem.	DSP	98	10	10	10	
		DC	100	10	10	10	
	Average Total			10	10	10	
A3	University Results						
	Odd Sem.	BSP	67.16%	25	25	25 (FT)	<u>Good</u>
		DSP	95.65%	25	25	25	
	Even Sem.	DSP	88.05%	25	25	25 (FT)	
		DC	95.65%	25	25	25	
	Average Total			25	25	25	
A4	Feedback						
	Odd Sem.	BSP	96.5%	05	05	05	<u>Good</u>
		DSP	98%	05	05	05	
	Even Sem.	DSP	97.25%	05	05	05	
		DC	95.62%	05	05	05	
	Average Total			05	05	05	



19/01



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Sr. No.	Criterion	Max. Points	Points earned in Self appraisal	Points earned in HOD/Principal Appraisal	Remarks
A5	Pedagogical Initiatives				
	Instruction Material (Hand written/Soft copy)	BSP	04	04	Good
		DSP	04	04	
		DSP	04	04	
		DC	04	04	
	Average Total	04	04	04 ✓	
	Power Point Presentation	BSP	04	04	Good
		DSP	04	04	
		DSP	04	04	
		DC	04	04	
	Average Total	04	04	04 ✓	
	Working Models/Charts	BSP	04	04	Good
		DSP	04	04	
		DSP	04	04	
		DC	04	04	
	Average Total	04	04	04 ✓	
	Audio/Video aids (NPTEL/NDL/MOOCs etc.)	BSP	04	04	Good
		DSP	04	04	
		DSP	04	04	
		DC	04	04	
	Average Total	04	04	04 ✓	
	VTU Question Paper Solutions	BSP	04	00	Good
		DSP	04	04	
		DSP	04	04	
		DC	04	04	
	Average Total	04	03	03 ✓	
	Total (A)	70	69	69 ✓	
B.	Other Contributions (30)				
B1	Workshops/STTP/FDP attended/organized (Attended:01; Organized: 02; Minimum of 3 days)	02	01	01 ✓	ok
B2	Publication of articles in journals (Peer Reviewed:05; Scopus Indexed :03; UGC Approved: 02; Paid Journals: 00)	05	05	05 ✓	Good
B3	Papers presented/conference attended (Paper presented: 02; Attended: 01)	02	02	02 ✓	Good
B4	Guiding of PG/UG level Funded/ Sponsored students Projects (Applied: 01; Sanctioned: 03)	03	01	01 ✓	ok



19/01



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ECE

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Sr. No.	Criterion	Max. Points	Points earned in Self appraisal	Points earned in HOD/Principal Appraisal	Remarks
B5	Participation in Funded Projects VGST/AICTE/DST/DRDO (Applied:02; Sanctioned: 05)	05	05	05 (Rung) ✓	Good
B6	Additional Duties, Institute/Dept. level	02	02	02 ✓	Good
B7	Student Counseling/Mentoring	02	02	02	Good
B8	Special Lectures/seminars delivered/organized (Organized:01; Delivered:02 at Inter-institute level)	02	02	02	Good
B9	Motivating and Training of students for Placements/ Higher studies/GATE/GRE/TOFEL/Hobby Projects. i) 10 Hours GATE Coaching:02 ii) 02 Hobby Projects: 02 iii) Placement Support and other activity: 01	05	05	05	Good
B10	Special achievements (if any) (University/State/National/International level recognition)	02	02	-	?
Total (B)		30	27	25 ✓	
Grand Total (A+B)		100	96	94 ✓	

Note: Minimum Qualifying Points for Part-A: 50 and for Part-B: 15

Additional Information would like to furnish (If any):

Principal investigator of VGST project.

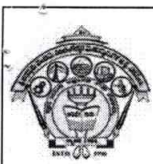
I understand and accept that the information submitted for evaluation is supported by relevant document/s. I can provide any kind of relevant evidence in support of the points claimed. The information furnished below is true to the best of my knowledge and belief.

Faculty Signature with date

HOD Signature with seal

For Office use only

Principal Remarks / Recommendation: *this performance is quite satisfying*Accepted
Signature
19/01/24Signature
19/01/24



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Accredited at "A" Grade by NAAC and Recognized Under Section 2(f) of UGC Act, 1956**Mech.Engg.Dept****Self Appraisal Form****AY:2022-23****Rev.01/11.03.2019**To,
The Principal
HSIT, Nidasoshi.Faculty Name : S. A. Goudadi
Designation : Assistant Professor
DOJ : 06.08.2007

Respected sir,

I wish to submit my annual self appraisal report for the academic year 2022-23. Please find the information given below:

Subjects/ Lab Handled	Sem./ Subject	Subject with code	Subject with code	Lab. with code	
	Odd Sem.	Subject 1: Dynamics of Machines (DOM)(18ME53)	Subject 2: Control Engg.(CE)(18ME71)	Design Lab (18MEL77)	Machine Drawing and GD&T(21MEL35)
	Even Sem.	Subject 3: Finite Element Methods(FEM) (18ME61)	Subject 4: Design of Machine Elements-II(DOME-II) (18ME62)	Modeling and Analysis Lab(18MEL68)	

Sr. No.	Criterion			Max. Points	Points Earned in Self Sprraisal	Points Earned in HOD/Princip al Appraisal	Remarks
A.	Teaching-Learning (70)						
A1	No. of Classes Engaged						
	Odd Sem.	Subject 1(DOM)	50/50 ✓	10	10 ✓	10	Good
		Subject 2(CE)	50/50 ✓	10	10 ✓	10	
	Even Sem.	Subject 3(FEM)	50/50 ✓	10	10 ✓	10	
		Subject 4(DOME-II)	50/50 ✓	10	10 ✓	10	
	Average Total			10	10	10	
A2	Percentage of Syllabus Covered						
	Odd Sem.	Subject 1(DOM)	100% ✓	10	10 ✓	10	Good
		Subject 2(CE)	100% ✓	10	10 ✓	10	
	Even Sem.	Subject 3(FEM)	100% ✓	10	10 ✓	10	
		Subject 4(DOME-II)	100% ✓	10	10 ✓	10	
	Average Total			10	10	10	
A3	University Results						
	Odd Sem.	Subject 1(DOM)	85.71 ✓	25	25 ✓	25	Good
		Subject 2(CE)	96 ✓	25	25 ✓	25	
	Even Sem.	Subject 3(FEM)	95 ✓	25	25 ✓	25	
		Subject 4(DOME-II)	67 ✓	25	20 ✓	20	
	Average Total			25	23.75	24	
A4	Feedback						
	Odd Sem.	Subject 1(DOM)	96.11% ✓	05	05 ✓	05	Good
		Subject 2(CE)	99.29% ✓	05	05 ✓	05	
	Even Sem.	Subject 3(FEM)	96.12% ✓	05	05 ✓	05	
		Subject 4(DOME-II)	96.42% ✓	05	05 ✓	05	
	Average Total			05	05	05	

18/10/24
Signature



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Accredited at "A" Grade by NAAC and Recognized Under Section 2(f) of UGC Act, 1956**Mech.Engg.Dept****Self Appraisal Form****AY:2022-23****Rev.01/11.03.2019**

Sr. No.	Criterion	Max. Points	Points earned in Self appraisal	Points earned in HOD/Principal Appraisal	Remarks
A5	Pedagogical Initiatives				
	Instruction Material (Hand written/Soft copy)	Subject 1(DOM)	04	04 ✓	Good
		Subject 2(CE)	04	04 ✓	
		Subject 3(FEM)	04	04 ✓	
		Subject 4(DOME-II)	04	04 ✓	
	Average Total		04	04 ✓	
	Power Point Presentation	Subject 1(DOM)	04	04 ✓	Good
		Subject 2(CE)	04	04 ✓	
		Subject 3(FEM)	04	04 ✓	
		Subject 4(DOME-II)	04	04 ✓	
	Average Total		04	04 ✓	
	Working Models/Charts	Subject 1(DOM)	04	04 ✓	Good
		Subject 2(CE)	04	04 ✓	
		Subject 3(FEM)	04	04 ✓	
		Subject 4(DOME-II)	04	04 ✓	
	Average Total		04	04 ✓	
	Audio/Video aids (NPTEL/NDL/MOOCs etc.)	Subject 1(DOM)	04	04 ✓	Good
		Subject 2(CE)	04	04 ✓	
		Subject 3(FEM)	04	04 ✓	
		Subject 4(DOME-II)	04	04 ✓	
	Average Total		04	04 ✓	
	VTU Question Paper Solutions	Subject 1(DOM)	04	04 ✓	Good
		Subject 2(CE)	04	04 ✓	
		Subject 3(FEM)	04	04 ✓	
		Subject 4(DOME-II)	04	04 ✓	
	Average Total		04	04 ✓	
Total (A)		70	68.75	69	
B.	Other Contributions (30)				
B1	Workshops/STTP/FDP attended/organized (Attended:01; Organized: 02; Minimum of 3 days)	02	01 ✓	01	ok
B2	Publication of articles in journals (Peer Reviewed:05; Scopus Indexed :03; UGC Approved: 02; Paid Journals: 00)	05	05 ✓	05	Good
B3	Papers presented/conference attended (Paper presented: 02; Attended: 01)	02	02 ✓	02	Good
B4	Guiding of PG/UG level Funded/ Sponsored students Projects (Applied:01;Sanctioned:03)	03	03 ✓	03	Good



18/01/24



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Mech.Engg.Dept

Self Appraisal Form

AY:2022-23

Rev.01/11.03.2019

Sr. No.	Criterion	Max. Points	Points earned in Self appraisal	Points earned in HOD/Principal Appraisal	Remarks
B5	Participation in Funded Projects VGST/AICTE/DST/DRDO (Applied:02; Sanctioned: 05)	05	02 ✓	02	ok
B6	Additional Duties, Institute/Dept. level	02	02 ✓	02	Good
B7	Student Counseling/Mentoring	02	02 ✓	02	Good
B8	Special Lectures/seminars delivered/organized (Organized:01; Delivered:02 at Inter-institute level)	02	00	00	needs input
B9	Motivating and Training of students for Placements/Higher studies/GATE/GRE/TOFEL/Hobby Projects. i) 10 Hours GATE Coaching: 02 ✓ ii) 02 Hobby Projects: 02 ✓ iii) Placement Support and other activity: 01 ✓	05	05 ✓	05	Good
B10	Special achievements (if any) (University/State/National/International level recognition)	02	02	02	Good
Total (B)		30	24	24	
Grand Total (A+B)		100	92.75	93	

Note: Minimum Qualifying Points for Part-A: 50 and for Part-B: 15**Additional Information would like to furnish (If any)**

- 1) All the course work exam subjects opted are passed and received the course work completion certificate under Ph.D program VTU Belagavi.
- 2) Counseled PUC students by telephonic talk and counseled diploma students for first year and second year lateral entry admission respectively. As a result we achieved around 28 PUC and 15 lateral admission respectively.

I understand and accept that the information submitted for evaluation is supported by relevant document/s. I can provide any kind of relevant evidence in support of the points claimed. The information furnished below is true to the best of my knowledge and belief.

Gulhi
13/01/24
Faculty Signature with date

Qor
12/01/24
HOD Signature with seal

For Office use only

Principal Remarks / Recommendation:

this performance is satisfactory

Accepted
Gulhi
18/1/24



See
18/01/24
Sumu



To,
The Principal
HSIT, Nidasoshi.

Faculty Name : Dr.S.N.Topannavar
Designation : Professor & Head of the Department
DOJ : 25/10/2003

Respected sir,

I wish to submit my annual self appraisal report for the academic year 2020-21. Please find the information given below:

Subjects/Lab Handled	Sem./Subject	Subject with code	Subject with code	Subject with code	Lab. with code
	Odd Sem.	Fluid Power Systems (15ME72/17ME72)	Elements of Mechanical Engineering (18ME15)	Energy & Environment (15ME562/17ME562)	--
	Even Sem.	Fluid Mechanics (18ME43)	Elements of Mechanical Engineering (18ME25)	--	--

Sr. No.	Criterion			Max. Points	Points earned in Self appraisal	Pointsearned in HOD/Principal Appraisal	Remarks
A.	Teaching-Learning (70)						
A1	No. of Classes Engaged						
	Odd Sem.	Subject 1	100	10	10		Good
		Subject 2	100	10	10		
		Subject 3	100	10	10		
	Even Sem.	Subject 4	100	10	10		
		Subject 5	100	10	10		
	Average Total			10	10	10	
A2	Percentage of Syllabus Covered						
	Odd Sem.	Subject 1	100	10	10		Good
		Subject 2	100	10	10		
		Subject 3	100	10	10		
	Even Sem.	Subject 4	100	10	10		
		Subject 5	100	10	10		
	Average Total			10	10	10	
A3	University Results						
	Odd Sem.	Subject 1	95.16	25	25		Good
		Subject 2	96.5	25	25		
		Subject 3	89	25	24.5		
	Even Sem.	Subject 4	100	25	25		
		Subject 5	100	25	25		
	Average Total			25	25	25	
A4	Feedback						
	Odd Sem.	Subject 1	97.51	05	05		
		Subject 2	95.86	05	05		



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Mech.Engg.Dept

Self Appraisal Form

AY:2020-21

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		Subject 3	98.4	05	05		
	Even	Subject 4	99.56	05	05		
	Sem.	Subject 5	96.2	05	05		
		Average Total		05	05		
Sr. No.	Criterion			Max. Points	Pointsearned in Self appraisal	Pointsearned in HOD/Principal Appraisal	Remarks
A5	Pedagogical Initiatives						
	Instruction Material (Hand written/Soft copy)	Subject 1		04	04		Good
		Subject 2		04	04		
		Subject 3		04	04		
		Subject 4		04	04		
		Subject 5		04	04		
		Average Total		04	04	04	
	Power Point Presentation	Subject 1		04	04		Good
		Subject 2		04	04		
		Subject 3		04	04		
		Subject 4		04	04		
		Subject 5		04	04		
		Average Total		04	04	04	
	Working Models/Charts	Subject 1		04	04		Good
		Subject 2		04	04		
		Subject 3		04	04		
		Subject 4		04	04		
		Subject 5		04	04		
		Average Total		04	04	04	
	Audio/Video aids (NPTEL/NDL/MOOCs etc.)	Subject 1		04	04		Good
		Subject 2		04	04		
		Subject 3		04	04		
		Subject 4		04	04		
		Subject 5		04	04		
		Average Total		04	04	04	
	VTU Question Paper Solutions	Subject 1		04	04		Good
		Subject 2		04	04		
		Subject 3		04	04		
		Subject 4		04	04		
		Subject 5		04	04		
		Average Total		04	04	04	
Total (A)				70	70	70.	
B.	Other Contributions (30)						
B1	Workshops/STTP/FDP attended/organized (Attended:01; Organized: 02; Minimum of 3 days)			02	01	01	
B2	Publication of articles in journals (Peer Reviewed:05; Scopus Indexed :03; UGC Approved: 02; Paid Journals: 00)			05	05	05	



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B3	Papers presented/conference attended (Paper presented: 02; Attended: 01)	02	00	needs input	
B4	Guiding of PG/UG level Funded/ Sponsored students Projects (Applied: 01; Sanctioned: 03)	03	03	03	
B5	Participation in Funded Projects VGST/AICTE/DST/DRDO (Applied: 02; Sanctioned: 05)	05	05	05	
B6	Additional Duties, Institute/Dept. level	02	02	02	
B7	Student Counseling/Mentoring	02	02	02	
B8	Special Lectures/seminars delivered/organized (Organized: 01; Delivered: 02 at Inter-institute level)-on NEP & UHV	02	02	02	
B9	Motivating and Training of students for Placements/ Higher studies/GATE/GRE/TOFEL/Hobby Projects. i) 10 Hours GATE Coaching: 02 ii) 02 Hobby Projects: 02 iii) Placement Support and other activity: 01	05	05	05	
B10	Special achievements (if any) (University/State/National/International level recognition)	02	02	02	
Total (B)		30	27	27	
Grand Total (A+B)		100	97	97	

Note: Minimum Qualifying Points for Part-A: 50 and for Part-B: 15**Additional Information would like to furnish (If any):**

- As a "Centre Superintendent" conducted NEET(UG)-2021 successfully
- Programme Coordinator for Unnat Bharat Abhiyana (UBA)
- E-attestation officer for National Scholarship Portal (NSP) & State Scholarship Portal (SSP)
- Reforming & Transforming administration for Admissions and outcome based Academics, Skill Development and R&D.
- VGST-K-FIST (L1) fund utilisation.
- Programme Coordinator for BOSCH Skill Development Programme under CSR
- Recognised as Ph.D guide by VTU
- Working as a VTU-BoE member
- Coordinator for SES-REC

I understand and accept that the information submitted for evaluation is supported by relevant document/s.
I can provide any kind of relevant evidence in support of the points claimed. The information furnished below is true to the best of my knowledge and belief.

Faculty Signature with date

HOD Signature with seal

Mechanical Engg.
MT, Nidasoshi

For Office use only

Principal Remarks / Recommendation:

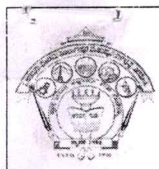
Overall his performance is quite

Satisfactory

Accepted
Dop
22/11/2021

PRINCIPAL

Hirasugar Institute of Technology
Nidasoshi- 591 236



To,
The Principal
HSIT, Nidasoshi.

Faculty Name : Prof. S. V. Manjaragi
Designation : Assistant Professor
DOJ : 01.09.2004

Respected sir,

I wish to submit my annual self appraisal report for the academic year 2018-19. Please find the information given below:

Subjects /Lab Handled	Sem./Subject	Subject with code	Subject with code	Lab. with code
	Odd Sem.	C Programming for Problem Solving(CPS):18CPS13	Cloud Computing & Applications (CCA):17CS742	--
	Even Sem.	C Programming for Problem Solving(CPS):18CPS23	Python Application Programming (PAP):17CS664	--

Sr. No.	Criterion			Max. Points	Points earned in Self appraisal	Points earned in HOD/Principal Appraisal	Remarks
A.	Teaching-Learning (70)						
A1	No. of Classes Engaged						
	Odd Sem.	CPS-18CPS13	52/40	10	10	1	
		CCA-17CS742	50/40	10	10		
	Even Sem.	CPS-18CPS23	50/40	10	10	10	Good
		PAP-17CS664	46/40	10	10		
	Average Total			10	10	10	
A2	Percentage of Syllabus Covered						
	Odd Sem.	CPS-18CPS13	100	10	10		
		CCA-17CS742	100	10	10		
	Even Sem.	CPS-18CPS23	100	10	10		Good
		PAP-17CS664	100	10	10		
	Average Total			10	10	10	
A3	University Results						
	Odd Sem.	CPS-18CPS13	72.41/82.16	25	22		
		CCA-17CS742	100/100	25	25		
	Even Sem.	CPS-18CPS23	100/82.16	25	25		Good
		PAP-17CS664	100/97.92	25	25		
	Average Total			25	24.25	24.25	
A4	Feedback						
	Odd Sem.	CPS-18CPS13	90.25	05	05		
		CCA-17CS742	95.25	05	05		
	Even Sem.	CPS-18CPS23	91.15	05	05		Good
		PAP-17CS664	100	05	05		
	Average Total			05	05	05	

29/11/21



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CSE

Self Appraisal Form

2020-21

Rev.01/11.03.2019

Sr. No.	Criterion	Max. Points	Points earned in Self appraisal	Points earned in HOD/Principal Appraisal	Remarks
A5	Pedagogical Initiatives				
	Instruction Material (Hand written/Soft copy)	CPS-18CPS13	04	04	Good
		CCA-17CS742	04	04	
		CPS-18CPS23	04	04	
		PAP-17CS664	04	04	
	Average Total		04	04	on
	Power Point Presentation	CPS-18CPS13	04	04	Good.
		CCA-17CS742	04	04	
		CPS-18CPS23	04	04	
		PAP-17CS664	04	04	
	Average Total		04	04	on
	Working Models/Charts	CPS-18CPS13	04	04	Good.
		CCA-17CS742	04	04	
		CPS-18CPS23	04	04	
		PAP-17CS664	04	04	
	Average Total		04	04	on
	Audio/Video aids (NPTEL/NDL/MOOCs etc.)	CPS-18CPS13	04	04	Good.
		CCA-17CS742	04	04	
		CPS-18CPS23	04	04	
		PAP-17CS664	04	04	
	Average Total		04	04	on
	VTU Question Paper Solutions	CPS-18CPS13	04	04	Good
		CCA-17CS742	04	04	
		CPS-18CPS23	04	04	
		PAP-17CS664	04	04	
	Average Total		04	04	on
Total (A)		70	69.25		
B.	Other Contributions (30)				
B1	Workshops/STTP/FDP attended/organized (Attended:01; Organized: 02; Minimum of 3 days)	02	01	01	
B2	Publication of articles in journals (Peer Reviewed:05; Scopus Indexed :03; UGC Approved: 02; Paid Journals: 00)	05	02	02	needs support
B3	Papers presented/conference attended (Paper presented: 02; Attended: 01)	02	02	02	Good.
B4	Guiding of PG/UG level Funded/ Sponsored students Projects (Applied:01; Sanctioned:03)	03	03	03	

6
29/11



S J P N Trust's

Hirasugar Institute of Technology, Nidasoshi.

Inculcating Values, Promoting Prosperity

Approved by AICTE, Recognized by Govt. of Karnataka and Affiliated to VTU Belagavi.
Accredited at "A" Grade by NAAC, Programs accredited by NBA: CSE, ECE, EEE, ME

CSE

Self Appraisal Form

2020-21

Rev.01/11.03.2019

Sr. No.	Criterion	Max. Points	Points earned in Self appraisal	Points earned in HOD/Principal Appraisal	Remarks
B5	Participation in Funded Projects VGST/AICTE/DST/DRDO (Applied:02; Sanctioned: 05)	05	02	02	Good
B6	Additional Duties, Institute/Dept. level	02	02	02	
B7	Student Counseling/Mentoring	02	02	02	
B8	Special Lectures/seminars delivered/organized (Organized:01; Delivered:02 at Inter-institute level)	02	02	02	Good
B9	Motivating and Training of students for Placements/ Higher studies/GATE/GRE/TOFEL/Hobby Projects. (i) 10 Hours GATE Coaching:02 (ii) 02 Hobby Projects: 02 (iii) Placement Support and other activity: 01	05	04	04	Good
B10	Special achievements (if any) (University/State/National/International level recognition)	02	00	00	needs input
Total (B)		30	20	20	
Grand Total (A+B)		100	89.25	89.00	

Note: Minimum Qualifying Points for Part-A: 50 and for Part-B: 15

Additional Information would like to furnish (If any)

I understand and accept that the information submitted for evaluation is supported by relevant document/s. I can provide any kind of relevant evidence in support of the points claimed. The information furnished below is true to the best of my knowledge and belief.

Faculty Signature with date

HOD Signature with seal

For Office use only

Principal Remarks / Recommendation: overall his performance is quite satisfactory.

29/11/21

29/11/21
PRINCIPAL
Hirasugar Institute of Technology
Nidasoshi- 591 236

CONFIDENTIAL REPORT OF TECHNICAL SUPPORTING STAFF

(To be submitted by the HOD)

Date: 15.11.2021

Staff Name: Sri. A.B. Sankeshwari Dept: Mechanical Engg Designation: foreman

Date of joining the Institute: 28.09.1999

Date of submission of Self Assessment Form: 15.11.2021

(Use only Good or Satisfactory or Not Satisfactory)

Punctuality and regularity: Good

Practical knowledge and competency: Good

Way & Method of handling equipments/tools/accessories: Good

Communication skills: Good

Cooperation & Coordination with the colleagues: Good

Behavior with the superiors: Good

Availability for other Departmental work: Good

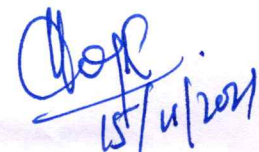
Involvement in Institutional work: Good

Feedback from the students: Good

Overall attitude & behavior: Good

Any other remarks:

Satisfactory



15/11/2021

HOD's Signature with seal

HOD
Mechanical Engg.
HIT, Nidasoshi

Remarks by the Principal

Remarks by the Secretary


Signature of the Principal

Signature of the Secretary

Recommended / Not Recommended for the annual increment / continuation of probationary period / further promotion

CONFIDENTIAL REPORT OF TECHNICAL SUPPORTING STAFF

(To be submitted by the HOD)

Date: 15.11.2021

Staff Name: Sri. V. G. Badiger Dept: Mechanical Engg. Designation: Foreman

Date of joining the Institute: 22.09.1999

Date of submission of Self Assessment Form:

(Use only Good or Satisfactory or Not Satisfactory)

Punctuality and regularity: Good

Practical knowledge and competency: Good

Way & Method of handling equipments/tools/accessories: Good

Communication skills: Good

Cooperation & Coordination with the colleagues: Good

Behavior with the superiors: Good

Availability for other Departmental work: Good

Involvement in Institutional work: Good

Feedback from the students: Good

Overall attitude & behavior: Good

Any other remarks:

Satisfactory


18/11/2021

HOD's Signature with seal

HOD

Mechanical Engg.

HIT, Nidasoshi

Remarks by the Principal

Remarks by the Secretary

Signature of the Principal

Signature of the Secretary

Recommended / Not Recommended for the *annual increment / continuation of probationary period / further promotion*



UNITED INDIA INSURANCE COMPANY LIMITED

240102

NIPANI BRANCH OFFICE 24, 1ST FLOOR, ASHOK NAGAR, NIPANI

BELGAUM - 591237 KARNATAKA

PH: (8338) 220310 FAX: EMAIL:

STUDENT SAFETY POLICY

UIN NO. IRDAI/HLT/UII/P-P/V.I/23/2015-16

POLICY No.: 2401024218P116463211

PERIOD OF INSURANCE
From 00:00 Hrs of 20/03/2019
To midnight of 19/03/2020

*Insured*

HIRASUGAR INSTITUTE OF TECHNOLOGY NIDASOSHI

A/P. NIDASOSHI TQ. HUKKERI DIST. : BELGAUM, KARNATAKA

BELGAUM

KARNATAKA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name	: SMT. MAHANANDA M. NAIKMANI
Agent Code	: AGD0101164
Mobile/Landline Number/Email	: 9448149242 maha_mn@rediff.com



LET US JOIN THE FIGHT AGAINST CORRUPTION.
PLEASE TAKE THE PLEDGE AT <https://pledge.cvc.nic.in>

For any Information, Service Requests, Claim intimation and Grievances please write to 240102@uiic.co.in

REGD. & HEAD OFFICE, 24, WHITES ROAD, CHENNAI - 600014

Website: <http://www.uiic.co.in>

Printed By : MAL28821 @ 18/03/2019 6:36:12 PM



STUDENT SAFETY POLICY
UIN NO. IRDAI/HLT/UII/P-P/V.I/23/2015-16
SCHEDULE

SCHEDULE						
Policy No.	2401024218P116463211					
Name Of Insured/ID	HIRASUGAR INSTITUTE OF TECHNOLOGY NIDASOSHI /1918521427					
Tel.(O)		Fax		Tel. (R)		Mobile
Business/Occupation	None		Email			
Period Of Insurance	From 00:00 Hrs of 20/03/2019 To Midnight of 19/03/2020					

Coininsurance	UIIC 240102 : 100%
{spcCoInsurance}	
PREMIUM: Seventy-four thousand eight hundred fifty rupees only	

INSURED DETAILS:

As Per Annexure Attached.

Total No of Students: 881	Total Suminsured: ₹ 8810000
Risks Covered: DEATH COVER & HOSPITALISATION EXPENSES DUE TO ACCIDENT FOR 881 STUDENTS AS PER LIST ATTACHED	
Special Conditions: 881 STUDENTS AS PER LIST PROVIDED BY THE INSTITUTE ARE COVERED FOR SUM INSURED RS: 100000/- EACH, HOSPITALISATION BENEFIT IS RESTRICTED TO RS: 50000/- FOR EACH STUDENT.	

Premium:	74,850.00
CGST(9%):	6,737.00
SGST(9%):	6,737.00
Stamp Duty:	5.00
Total (Rounded Off):	88,324.00
Receipt Number :	10124010218117222285
Receipt Date:	18/03/2019
Debit Note Number:	
Agency or Broker Code:	SMT. MAHANANDA M. NAIKMANI
Dev. Officer Code:	
Direct Business :	

Customer GST/UIN No.:		Office GST No.:	29AAACU5552C1ZF
SAC Code:	9971	Invoice No. & Date:	42181116463211 & 18/03/2019
Amount Subject to Reverse Charges-NIL			

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

Date of Proposal and Declaration: 20/03/2019

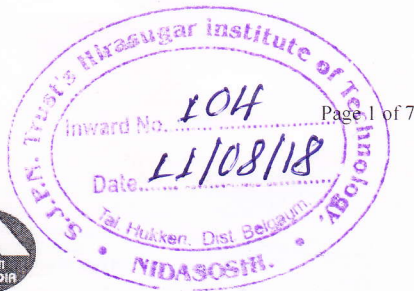
IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO NIPANI 240102 on this 14th day of March 2019 .

For and On behalf of
 United India Insurance Co. Ltd.

Duly Constituted Attorney(s)
 Underwritten By : MAL28821 (BO UW CUM CASHIER)



**Policy Stamps not affixe
 for want of Stock**



UNITED INDIA INSURANCE COMPANY LIMITED

NIPANI BRANCH OFFICE 24, 1ST FLOOR, ASHOK NAGAR, NIPANI

BELGAUM - 591237 KARNATAKA

PH: (8338) 220310 FAX: EMAIL:

MICRO-INSURANCE PRODUCT-JANATA PERSONAL ACCIDENT - GROUP POLICY

UIN NO. IRDAI/HLT/UII/P-P/V.I/8/2015-16

POLICY NO: 2401024718P106225725

PERIOD OF INSURANCE
From 00:00 Hrs of 11/08/2018
To Midnight of 10/08/2019



Insured

HIRASUGAR INSTITUTE OF TECHNOLOGY NIDASOSHI

A/P. NIDASOSHI TQ. HUKKERI DIST. : BELGAUM, KARNATAKA

591236

BELGAUM

KARNATAKA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name	: SMT. MAHANANDA M.
	: NAIKMANI
Agent Code	: AGD0101164
Mobile/Landline	: 9448149242
Number/Email	: maha_mn@rediff.com

LET US JOIN THE FIGHT AGAINST CORRUPTION.
PLEASE TAKE THE PLEDGE AT <https://pledge.cvc.nic.in>

For any Information, Service Requests, Claim intimation and Grievances please write to 240102@uiic.co.in

<http://gccore.uiic.in/Configurator/UnderwritingMasters/reports/firmPolicySchedule.aspx?Re...> 08/10/18

PolicyNo.:2401024718P106225725
 MICRO-INSURANCE PRODUCT-JANATA PERSONAL ACCIDENT - GROUP POLICY
 UIN NO.UIN NO. IRDAI/HLT/UII/P-P/V.I/8/2015-16



**MICRO-INSURANCE PRODUCT-JANATA PERSONAL ACCIDENT - GROUP
 POLICY
 UIN NO.IRDAI/HLT/UII/P-P/V.I/8/2015-16
 SCHEDULE**

Policy No.	2401024718P106225725			Prev. Pol. No.	
Name Of Insured / ID	HIRASUGAR INSTITUTE OF TECHNOLOGY NIDASOSHI / 1918521427				
Tel.(O)		Fax		Tel.(R)	Mobile
Business/Occupation	None		Email		
Period of Insurance	From	00:00 Hours of 11/08/2018		To	Midnight of 10/08/2019

Coinsurance	UIIC 240102 : 100%
PREMIUM : Ten thousand five hundred sixty rupees only	

Total no of Person:	176	Total Sum Insured:	₹ 17,600,000.00
Policy Period:	1 Yr	Policy Variant:	Unnamed
Special Condition:	ALL THE 176 MEMBERS MENTIONED IN THE LIST GIVEN BY HIRASUGAR INSTITUTE OF TECHNOLOGY NIDASOSHI ARE COVERED FOR RS ONE LACH FOR THE TERM ONE YEAR		
Underwriting Remarks:	ALL THE 176 MEMBERS MENTIONED IN THE LIST GIVEN BY HIRASUGAR INSTITUTE OF TECHNOLOGY NIDASOSHI ARE COVERED FOR RS ONE LACH FOR THE TERM ONE YEAR		

Net Premium:	10,560.00
CGST(0%):	0.00
SGST(0%):	0.00
UTGST(0%):	0.00
IGST(0%):	0.00
Stamp Duty:	5.00
Total:	10,560.00
Receipt No:	10124010218106481826
Receipt Date:	10/08/2018

Agency/Broker Code :	AGD0101164
Dev officer code :	

<http://gccore.uiic.in/Configurator/UnderwritingMasters/reports/frmPolicySchedule.aspx?Re...> 08/10/18

Policy No.: 2401024718P106225725
 MICRO-INSURANCE PRODUCT-JANATA PERSONAL ACCIDENT - GROUP POLICY
 UIN NO./UIN NO. IRDAI/HLT/UII/P-P/V.I/8/2015-16

Customer GST No.:		Office GST No.:	29AAACU5552C1ZF
SAC Code:	9971	Invoice No. & Date:	4718106225725 & 10/08/2018
Amount Subject to Reverse Charges-NIL			

Anti Money Laundering Clause: In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

Date of Proposal and Declaration: 11/08/2018

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO NIPANI 240102 on this 10th day of August 2018.

For and On behalf of
 United India Insurance Co. Ltd.

Duly Constituted Attorney(s)
 Underwritten By - KIR52106 (BO UW CUM CASHIER)

Policy Stamps not affixed
 for want of Stock





Bajaj Allianz General Insurance Company Ltd.
Bajaj Allianz House, Airport Road, Yerawada, Pune - 411006
POLICY SCHEDULE

DUPLICATE COPY

Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc. :

Madiwale Arcade, 1st floor,, Hasmi Manzil, Club Road, , ,
 Belgaum-590001 Phone No :0831-4215475

Policy No. **OG-20-1713-9902-00000002**
 Product **Group Personal Accident**
 Period of Insurance **From 16:04:46 17-AUG-19 To 16-AUG-20 Midnight** Policy Issued On **31-AUG-19**
 Co-Insurance Details **Own Share: 100%**
 Insured Name **HIRASUGAR INSTITUTE OF TECHNOLOGY**
 Insured Address **NIDASOSHI, , PO Area - NIDASOSHI, , BELGAUM, KARNATAKA - 591236**
 Bank Details : **No Details** No Details
 GSTIN / UIN **NA** **STATE CODE/NAME** **29 - Karnataka**
 Company GST No : **29AABCB5730G1ZT** **Invoice No :** **127327931/1**
 Company PAN : **AABCB5730G**

Description	Sum Insured (Rs)
P.A WIDER COVER FOR 176 EMPLOYEES SUM INSURED AS PER ENCLOSED LIST UNDER RISK II	1,76,00,000.00

Additional** Loading @ **0 %**
 Additional Discount@ **0 %**
 Base Premium **8,288.00**
 Special Discount **0**
 Net Premium **8,288.00**
 Terrorism** Surcharge **0**
 Stamp Duty
 State GST (9%) **746.00**
 Central GST (9%) **746.00**
 Final Premium **9,780.00**

*** All Premium figures are in Rupee.

Scope of Cover **As per the policy wording attached.**
 Risk Covered **Named Group Personal Accidental Policy for Risk class, II**
 Special Perils **NONE**
 Special Exclusions **As per Group Personal Accident Policy Wording Attached**
 Subject to Clauses **Children's Education Bonus,: Rs 5000/- for a child or Rs. 100000/- maximum for 2 children below the age of 19 or 10% of capital sum insured, whichever is less. Carriage Of Dead Body Upto Rs.5000/-**
 Warranties **As per Group Personal Accident Policy Wording Attached**
 Special Conditions **Cremation charges - In Built -upto 5000/-,Education Benefit- In Built 1% of SI or Rs. 5000/- whichever is lesser per child,Family Transportation: Upto Rs. 5000/-,Repatriation of remains: Upto Rs.5000/-,Carriage of Dead body- In Built upto 5000/-Dead body- In Built upto 5000/-**
 Comments **ALL EMPLOYEES DETAILS AS PER ANNEXTURE ATTACHED.Beneficiary will be corporate. Addhaar No and PAN NO/Form 60 will be required at the time of claims mandatorily.**

Bank RM Employee Code : **Y**

Agency Code BAG10028453	Channel Name : ML
Agency Name : SACHIN A BHADALE	
Contact No : 9035073212/0	
Email - sachin24may@gmail.com	

Premium Collection Details [Receipt No/Collection No/Amount] 1713-00174273 / 126654309 / Rs. 9780 ,

*** If Premium paid through Cheque, the Policy is void ab-initio in case of dishonour of Cheque

*** This policy is subject to the standard policy wordings, warranties and conditions applicable for this product in addition to any specific warranty or condition attached

For & On Behalf of Bajaj Allianz General Insurance Company Ltd.



Caringly yours

BAJAJ Allianz



Authorized Signatory
Printed, Signed and Executed at Pune

This document is digitally signed, hence counter signature / stamp is not required

Regd Office : Bajaj Allianz House, Airport Road, Yerwada Pune-411006 (India), A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113, Corporate Identification Number U66010PN2000PLC015329.

Consolidated Stamp Duty of Rs.5/- paid towards Insurance Stamps vide Challan No. MH00375352201920M Defaced No. 0002277216201920 ORDER NO.CSD/93/2019/3587/19 ORDER DATED 24.07.2019 DEFACED DATE dated 23-JUL-19 timing 15:54:05 of General Stamp Office, Mumbai, India.

Principal Location : Golden Heights, 4th Floor, No.1/2, 59th C Cross, 4th M Block, Rajajinagar, BANGALORE - 560010 PH:080-67195000 | Services Accounting Code : 997133 - Accident and health insurance services. No reverse charge is payable on these services.

In case of any claim, please contact our 24 Hour Call centre at 1800-22-5858, 1800-102-5858 (Toll Free) / 91-020-30305858 (chargeable, add area code before this number in case of mobile call) or email us at 'Bagichelp@bajajallianz.co.in'.

126654309/-/10028453/NA/-

Prefix your area code if you are calling from a Mobile Device.

A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113, Corporate Identification Number U66010PN2000PLC015329.

Generated by mahesh kangralkar01





UNITED INDIA INSURANCE COMPANY LIMITED

240102

NIPANI BRANCH OFFICE 24, 1ST FLOOR, ASHOK NAGAR, NIPANI
BELGAUM - 591237 KARNATAKA
PH: (8338) 220310 FAX: EMAIL:

STUDENT SAFETY POLICY

UIN NO. IRDAI/HLT/UII/P-P/V.I/23/2015-16

POLICY No.: 2401024219P116766972

PERIOD OF INSURANCE
From 00:00 Hrs of 18/03/2020
To midnight of 17/03/2021



Insured

HIRASUGAR INSTITUTE OF TECHNOLOGY NIDASOSHI

A/P. NIDASOSHI TQ. HUKKERI DIST. : BELGAUM, KARNATAKA
BELGAUM
KARNATAKA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name : SMT. MAHANANDA M. NAIKMANI
Agent Code : AGD0101164
Mobile/Landline Number/Email : 9448149242
maha_mu@rediff.com

The genuineness of the policy can be verified through "Verify Your Policy" link at www.uiic.co.in.

For any Information, Service Requests, Claim intimation and Grievances please write to 240102@uiic.co.in

Download Customer App(www.uiic.co.in). REGD. & HEAD OFFICE, 24, WHITES ROAD, CHENNAI - 600014.

Website: <http://www.uiic.co.in>

Printed By : SAN52110 @ 20/05/2020 10:29:27 AM



STUDENT SAFETY POLICY
UIN NO. IRDAI/HLT/UII/P-P/V.I/23/2015-16
SCHEDULE

Policy No.	2401024219P116766972				
Name Of Insured/ID	HIRASUGAR INSTITUTE OF TECHNOLOGY NIDASOSHI /1918521427				
Tel.(O)		Fax		Tel. (R)	
Business/Occupation	None	Email		Mobile	
Period Of Insurance	From 00:00 Hrs of 18/03/2020 To Midnight of 17/03/2021				

Coinsurance	UIIC 240102 : 100%
PREMIUM: Fifty-nine thousand three hundred eighty-nine rupees only	

INSURED DETAILS:
As Per Annexure Attached.

Total No of Students: 703	Total Suminsured: ₹ 70300000
Risks Covered: DEATH COVER & HOSPITALISATION EXPENSES DUE TO ACCIDENT FOR 703 STUDENTS AS PER LIST ATTACHED	
Special Conditions:	

Premium:	59,389.00
CGST(9%):	5,345.00
SGST(9%):	5,345.00
Stamp Duty:	5.00
Total (Rounded Off):	70,079.00
Receipt Number :	10124010220100253523
Receipt Date:	14/04/2020
DebitNote Number:	
Agency or Broker Code:	SMT. MAHANANDA M. NAIKMANI
Dev. Officer Code:	
Direct Business :	

Customer GST/UIN No.:		Office GST No.:	29AAACU5552C1ZF
SAC Code:	9971	Invoice No. & Date:	42191116766972 & 14/04/2020
Amount Subject to Reverse Charges-NIL			

Anti Money Laundering Clause: In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

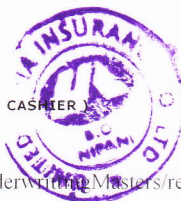
LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT <https://pledge.cvc.nic.in>.

Date of Proposal and Declaration: 18/03/2020

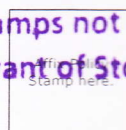
IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO NIPANI 240102 on this 14th day of April 2020 .

For and On behalf of
United India Insurance Co. Ltd.

Duly Constituted Attorney(s)
Underwritten By - MAL28821 (BO UW CUM CASHIER)



**Policy Stamps not affixed
for want of Stock**



Caringly yours

BAJAJ Allianz



Bajaj Allianz General Insurance Company Ltd.
Bajaj Allianz House, Airport Road, Yerawada, Pune - 411006
GROUP PERSONAL ACCIDENT POLICY SCHEDULE
UIN: IRDA/NL-HLT/BAGI/P-P.V.I/151/13-14

Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc. :

Madiwale Arcade, 1st floor,, Hasmi Manzil, Club Road, , ,
 Belgaum-590001 Phone No :0831-4215475

Policy No. **OG-21-1713-9902-00000002**
 Product **GROUP PERSONAL ACCIDENT**
 Period of Insurance **From 00:01:00 28-AUG-20 To 27-AUG-21 Midnight** Policy Issued On **09-SEP-20**
 Co-Insurance Details **Own Share: 100%**
 Insured Name **HIRASUGAR INSTITUTE OF TECHNOLOGY**
 Insured Address **NIDASOSHI, , PO Area - NIDASOSHI, , BELGAUM, KARNATAKA - 591236**
 Bank Details : **No Details** No Details
 GSTIN / UIN **NA** **Place of Supply/State Code/Name** **29 - Karnataka**
 Company GST No : **29AABCB5730G1ZT** **Invoice No :** **208324403/1**
 Company PAN : **AABCB5730G**

Description	Sum Insured (Rs)
149 - Total members covered.	1,49,00,000.00

Highest Sum Insured 100000
 Additional** Loading @ 0 %
 Additional Discount@ 0 %
 Base Premium 7,577.00
 Special Discount 0
 Net Premium 7,577.00
 Terrorism** Surcharge 0
 Stamp Duty
 State GST (9%) 682.00
 Central GST (9%) 682.00
 Final Premium 8,941.00

*** All Premium figures are in Rupee.

On specific request and subject to terms and conditions, record of information exchange will be made available.

As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 30th September of the next financial year.

Scope of Cover As per the policy wording attached.
 Risk Covered Group Personal Accidental Policy. Risk class - II. Coverage - Basic cover.
 Special Perils As per the policy wordings attached.
 Special Exclusions As per the policy wordings attached.
 Subject to Clauses Cremation charges is covered up to 5000/-, Carriage of Dead body is covered up to 5000/-, Repatriation of Remains is covered up to 5000/-, Family Transportation is covered up to 5000/-, Children Education Bonus is covered upto maximum Rs. 5000 per child for maximum 2 children below age of 19 years, applicable in the event of an admissible Accidental Death claim.
 Warranties Basic:- Death + Children Education Bonus (Sum insured limited to 100 times of monthly salary or Rs. 1 lakhs whichever is Less).
 Special Conditions As per the policy wordings attached.
 Comments Previous Policy Number: OG-20-1713-9902-00000002. Beneficiary will be corporate.
 Bank RM Employee Code : Y

Agency Code **BAG10028453** Channel Name : **ML**
 Agency Name : **SACHIN A BHADALE**
 Contact No : **9035073212/0**
 Email - **sachin24may@gmail.com**

Premium Collection Details [Receipt No/Collection No/Amount] 1704-00172510 / 205457803 / Rs. 8,940.00 ,

*** If Premium paid through Cheque, the Policy is void ab-initio in case of dishonour of Cheque

*** This policy is subject to the standard policy wordings, warranties and conditions applicable for this product in addition to any specific warranty or condition attached

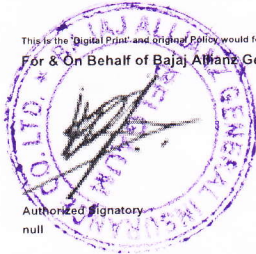


Caringly yours

BAJAJ Allianz



This is the Digital Policy and Original Policy would follow and the Original policy, duly countersigned, to be relied on for all legal purposes.
For & On Behalf of Bajaj Allianz General Insurance Company Ltd.



Authorized Signatory
null



This document is digitally signed, hence counter signature / stamp is not required

Regd Office : Bajaj Allianz House, Airport Road, Yerwada Pune-411006 (India), A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113, Corporate Identification Number U66010PN2000PLC015329.

Consolidated Stamp Duty of Rs.5/- paid towards Insurance Stamps vide Challan No. MH013770432201920M Defaced No. 0000433117202021 Order No.CSD/22/2020/1432/2020 Order Dated 09.06.2020 Defaced date dated 09-JUN-20 timing 12:23:03 of General Stamp Office, Mumbai, India.

Principal Location : Golden Heights, 4th Floor, No.1/2, 59th C Cross, 4th M Block, Rajajinagar, BANGALORE - 560010 PH:080-67195000 | Services Accounting Code : 997133 - Accident and health insurance services. No reverse charge is payable on these services.

In case of any claim, please contact our 24 Hour Call centre at 1800-22-5858, 1800-102-5858 (Toll Free) / 91-020-30305858 (chargeable, add area code before this number in case of mobile call) or email us at 'Bagichelp@bajajallianz.co.in'.

205457803/-10028453/-/-

Prefix your area code if you are calling from a Mobile Device.

A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113, Corporate Identification Number U66010PN2000PLC015329.

Generated by sachin bhadale@general bajajallianz co in



Bajaj Allianz General Insurance Company Ltd.

1st floor, Kalburgi Noolvi Majestic, New cotton Market, Hubli - 580029
Contact No: 0836-2356827, 0836-4253666; Fax No: 0836-4265555

RECEIPT

Receipt Number **1704-00172510**
Receipt Date **14/08/2020**
Business Channel **DI**

Received with thanks from **HIRASUGAR INSTITUTE OF TECHNOLOGY**

(Customer ID : 158920251) a total sum of Rupees Eight Thousand Nine Hundred Forty Only
by,

Instrument Type	Instrument No.	Instrument Date	Bank Name	Branch Name	Amount
Bank Advice/Direct Credit	6205227D1456	14/08/2020	Bank Of America_Direct Credits	Mumbai	8,940

Total Amount Rs. 8,940.00

Note : /REF-6205227D1456 /ENTRY-14 AUG POSTED=14:31 TRSF BOOK TRANSFER CREDIT
SND=NOREF ORG=PRINCIPAL CHAIRMAN HIT NIDASOSH NIDASOSHI OBI=1704C0158920251
BANK ADVICE Loader

Issuance of this receipt does not amount to acceptance of the risk by Bajaj Allianz General Insurance Company Limited. The insurance cover for the risk shall be as per the terms and conditions of the Insurance Policy if and when issued.

* Cheque/DD/PO receipt is valid subject to realisation of the instrument.

For & on behalf of

Bajaj Allianz General Insurance Company Ltd.



Regd. Office: Bajaj Allianz House, Airport Road, Yerwada, Pune - 411006



UNITED INDIA INSURANCE COMPANY LIMITED

NIPANI BRANCH OFFICE 24, 1ST FLOOR, ASHOK NAGAR, NIPANI
BELGAUM - 591237 KARNATAKA
PH: (8338) 220310 FAX: EMAIL:

MICRO-INSURANCE PRODUCT-JANATA PERSONAL ACCIDENT - GROUP POLICY

UIN NO. IRDAI/HLT/UII/P-P/V.I/8/2015-16
POLICY NO: 2401024720P114839013

PERIOD OF INSURANCE
From 16:49 Hrs of 17/03/2021
To Midnight of 16/03/2022



Insured

MR THE PRINCIPAL

HIRASUGAR INSTITUTE OF TECHNOLOGY, NIDASOSHI
591236
BELGAUM
KARNATAKA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name	: SMT. MAHANANDA M.
	: NAIKMANI
Agent Code	: AGD0101164
Mobile/Landline	: 9448149242
Number/Email	: maha_mn@rediff.com

The genuineness of the policy can be verified through "Verify Your Policy" link at www.uiic.co.in.

For any Information, Service Requests, Claim intimation and Grievances please write to 240102@uiic.co.in

Download Customer App(www.uiic.co.in). REGD. & HEAD OFFICE, 24, WHITES ROAD, CHENNAI - 600014.

Website: <http://www.uiic.co.in>

Printed By : MAL28821 @ 19/03/2021 5:10:31 PM

PolicyNo.: 2401024720P114839013



**MICRO-INSURANCE PRODUCT-JANATA PERSONAL ACCIDENT - GROUP
POLICY
UIN NO.IRDAI/HLT/UII/P-P/V.I/8/2015-16
SCHEDULE**

Policy No.	2401024720P114839013		Prev. Pol. No.		
Name Of Insured / ID	MR THE PRINCIPAL / 23104303250				
Tel.(O)		Fax		Tel.(R)	
Business/Occupation	None			Email	
Period of Insurance	From	16:49 Hours of 17/03/2021		To	Midnight of 16/03/2022

Coinurance	UIIC 240102 : 100%
PREMIUM :	Thirty-six thousand six hundred rupees only

Insured Details : As Per Annexure Attached.

Total no of Person:	610	Total Sum Insured:	₹ 61,000,000.00
Policy Period:	1 Yr	Policy Variant:	Named
Special Condition:			
Underwriting Remarks:			

Net Premium:	36,600.00
CGST(0%):	0.00
SGST(0%):	0.00
UTGST(0%):	0.00
IGST(0%):	0.00
Stamp Duty:	5.00
Total:	36,600.00
Receipt No:	10124010220116243194
Receipt Date:	19/03/2021

Agency/Broker Code :	AGD0101
Dev officer code :	

Policy No.: 2401024720P114839013
 MICRO-INSURANCE PRODUCT-JANATA PERSONAL ACCIDENT - GROUP POLICY
 UIN NO./UIN NO. IRDAI/HLT/UII/P-P/V.1/8/2015-16

Customer GST/UIN No.:		Office GST No.:	29AAACU5552C1ZF
SAC Code:	9971	Invoice No. & Date:	47201114839013 & 19/03/2021
Amount Subject to Reverse Charges-NIL			

Anti Money Laundering Clause:- In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT <https://pledge.cvc.nic.in>.

Date of Proposal and Declaration: 17/03/2021

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO NIPANI 240102 on this 19th day of March 2021 .

For and On behalf of
 United India Insurance Co. Ltd.

Duly constituted Attorney(s)
 Underwritten By - MAL28821 (BO UW CUM CASHIER)

Affix Policy
 Policy Stamps not affixed
 for want of Stock



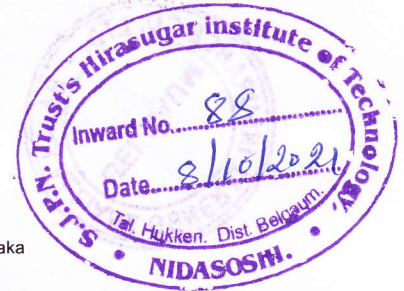


Bajaj Allianz General Insurance Company Ltd.
Bajaj Allianz House, Airport Road, Yerawada, Pune - 411006
GROUP PERSONAL ACCIDENT POLICY SCHEDULE
UIN: IRDA/NL-HLT/BAG/P-PV.I/151/13-14

Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc.:

Madiwale Arcade, 1st floor,, Hasmi Manzil,Club Road, , ,
 Belgaum-590001 Phone No :0831-4215475

Policy No. OG-22-1713-9902-00000002
Product GROUP PERSONAL ACCIDENT
Period of Insurance From 00:01:00 27-SEP-21 To 26-SEP-22 Midnight
Policy Issued On 29-SEP-21
Co-Insurance Details Own Share: 100%
Insured Name HIRASUGAR INSTITUTE OF TECHNOLOGY
Insured Address NIDASOSHI, , PO Area - NIDASOSHI, , BELGAUM, KARNATAKA - 591236
Bank Details : No Details
Place of Supply/State 29 - Karnataka
Code/Name
GSTIN / UIN NA
Invoice No : 308236967/1
Company GST No : 29AABCB5730G1ZT
Company PAN : AABCB5730G



Description	Sum Insured (Rs)
137 - Total members covered.	1,37,00,000.00

Highest Sum Insured	100000
Additional** Loading @	0 %
Additional Discount@	0 %
Base Premium	6,966.00
Special Discount	0
Net Premium	6,966.00
Terrorism** Surcharge	0.0
Stamp Duty	
State GST (9%)	627.00
Central GST (9%)	627.00
Final Premium	8,220.00

*** All Premium figures are in Rupee.

On specific request and subject to terms and conditions, record of information exchange will be made available.

As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 30th September of the next financial year.

Scope of Cover As per the policy wording attached.

Risk Covered Group Personal Accident Policy. Risk Class 2. Coverage - Basic:- Accidental Death (Sum insured limited to 100 times of monthly salary or Rs. 1 lakhs whichever is Less) .

Special Perils Cremation charges is covered up to 5000/-,Carriage of Dead body is covered up to 5000/-,Repatriation of Remains is covered up to 5000/-,Family Transportation is covered up to 5000/-,Children Education Bonus is covered upto maximum Rs. 5000 per child for maximum 2 children below age of 19years, applicable in the event of an admissible Accidental Death claim.

Special Exclusions As per policy terms and conditions.

Subject to Clauses Upon mutual agreement between the Insurer and the Group manager the claim settlement can be done by the Insurer either in favour of the Group Manager or the Insured Member / Nominee / Legal Heir. However,wherever it has been agreed to settle the claim in favour of the Group Manager , the Insurer must seek an undertaking from the Group Manager that confirms that the final claim settlement will be done to the InsuredMember / Nominee / Legal Heir within 15 days of claim settlement to the Group Manager as per policy t&c.The employer may utilize the insurance amount as part of the overall service benefit and pass on the balance ,if any to the Insured Member / Nominee / Legal Heir.

Warranties Policy will on named basis. Subject to nil claims and SI to commensurate with salaries. Entry age # 18 to 70years.

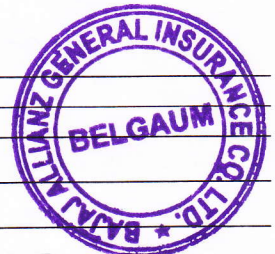
Special Conditions As per policy terms and conditions.

Comments Previous Policy Number: OG-21-1713-9902-00000002. Beneficiary will be employee.

Bank RM Employee Code : Y

Agency Code BAG10028453 **Channel Name :** ML
Agency Name : SACHIN A BHADALE
Contact No : 9035073212/0
Email - sachin24may@gmail.com

Premium Collection Details [Receipt No/Collection No/Amount] 1713-00205552 / 287828528 / Rs. 8,220.00 ,





*** If Premium paid through Cheque, the Policy is void ab-initio in case of dishonour of Cheque

*** This policy is subject to the standard policy wordings, warranties and conditions applicable for this product in addition to any specific Warranty or condition attached

For & On Behalf of Bajaj Allianz General Insurance Company Ltd.



This document is digitally signed, hence counter signature / stamp is not required

Regd Office : Bajaj Allianz House, Airport Road, Yerwada Pune-411006 (India), A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113, Corporate Identification Number U66010PN2000PLC015329.

Consolidated Stamp Duty of Rs.5/- paid towards Insurance Stamps vide Challan No. MH014271630202021M Defaced No. 0000144047202122 dated 12-APR-21 timing 13:29:05 of General Stamp Office, Mumbai, India.

Principal Location : Golden Heights, 4th Floor, No.1/2, 59th C Cross, 4th M Block, Rajajinagar, BANGALORE - 560010 PH:080-67195000 | Services Accounting Code : 997133 - Accident and health insurance services. No reverse charge is payable on these services.

In case of any claim, please contact our 24 Hour Call centre at 1800-102-5858 (Toll Free) / 91-020-30305858 (chargeable, add area code before this number in case of mobile call) or email us at 'Bagichelp@bajajallianz.co.in'.

287828528/-/10028453/0/-

Prefix your area code if you are calling from a Mobile Device.

A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113, Corporate Identification Number U66010PN2000PLC015329.

Generated by basavaraj hiremath01



Bajaj Allianz General Insurance Company Ltd.

Madiwale Arcade, 1st floor, Hasmi Manzil, Club Road, Belgaum - 590001 **Contact No:**
0831-4215475,4205320

RECEIPT

Receipt Number 1713-00205552

Receipt Date 18/09/2021

Business Channel ML

Received with thanks from HIRASUGAR INSTITUTE OF TECHNOLOGY

(Customer ID : 158920251) a total sum of Rupees Eight Thousand Two Hundred Twenty Only
by,

Instrument Type	Inst./Ref No	Instrument Date	Bank Name	Branch Name	Amount
Cheque	974489	15/09/2021	STATE BANK OF INDIA	SANKESHWAR	8,220

Total Amount **Rs.** **8,220.00**

Issuance of this receipt does not amount to acceptance of the risk by Bajaj Allianz General Insurance Company Limited. The insurance cover for the risk shall be as per the terms and conditions of the Insurance Policy if and when issued.

* Cheque/DD/PO receipt is valid subject to realisation of the instrument.



Consolidated Stamp Duty of Rs. 1 paid towards Revenue Stamps vide Challan No MH007157806202021M defaced number 0001482455202122 dated 05-JUL-21 timing 13:02:18 of General Stamp Office, Mumbai, India

This is a computer generated document,hence does not require any signature.

Regd.Office: Bajaj Allianz House, Airport Road, Yerawada, Pune, Maharashtra 411006

CIN:U66010PN2000PLC015329; E-mail: bagichelp@bajajallianz.co.in; Website:www.bajajallianz.com

BAJAJ ALLIANZ GENERAL INSURANCE CO. LTD.
Madiwale Arcade, 3935/26A,
1st Floor, Hasmi Manzil,
Club Road, Belagavi-590 001
☎: 0831-4215475



75
Azadi Ka
Amrit Mahotsav

UNITED INDIA INSURANCE COMPANY LIMITED

NIPANI BRANCH OFFICE 24, 1ST FLOOR, ASHOK NAGAR, NIPANI

BELGAUM - 591237 KARNATAKA

PH: (8338) 220310 FAX: EMAIL:

MICRO-INSURANCE PRODUCT-JANATA PERSONAL ACCIDENT - GROUP POLICY
UIN NO. IRDAI/HLT/UII/P-P/V.I/8/2015-16
POLICY NO:2401024721P113658265

PERIOD OF INSURANCE
From 00:00 Hrs of 17/03/2022
To Midnight of 16/03/2023



Insured

MR THE PRINCIPAL

HIRASUGAR INSTITUTE OF TECHNOLOGY, NIDASOSHI

591236

BELGAUM

KARNATAKA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name : SMT. MAHANANDA M. NAIKMANI
Agent Code : AGD0101164
Mobile/Landline Number/Email : 9448149242
maha_mn@rediff.com

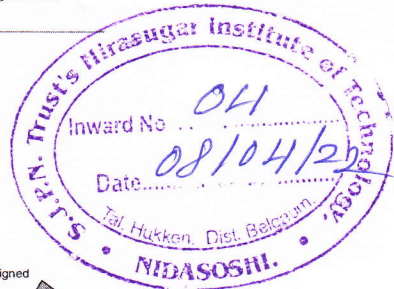
The genuineness of the policy can be verified through "Verify Your Policy" link at www.uilic.co.in.

For any Information, Service Requests, Claim intimation and Grievances please write to 240102@uilic.co.in

Download Customer App(www.uilic.co.in). REGD. & HEAD OFFICE, 24, WHITES ROAD, CHENNAI - 600014.

Website: <http://www.uilic.co.in>

Printed By : KIR52106 @ 29/03/2022 3:11:19 PM



This document is digitally signed

Signer: N MOHAN SANKAR
Date: Tue, Mar 29, 2022 3:17 PM IST
Location: United India Insurance Company Ltd
Reason: Signing Policy for UIIC



MICRO-INSURANCE PRODUCT-JANATA PERSONAL ACCIDENT - GROUP POLICY
UIN NO.IRDAI/HLT/UII/P-P/V.I/8/2015-16
SCHEDULE

Policy No.	2401024721P113658265	Prev. Pol. No.	2401024720P114839013
Name Of Insured / TO	MR THE PRINCIPAL / 23104303250		
Tel.(O)		Fax	
Business/Occupation	None	Tel.(R)	
Period of Insurance	From	Email	
		To	Midnight of 16/03/2023

Coinurance	UIIC 240102 : 100%
PREMIUM :	Thirty-five thousand eight hundred eighty rupees only

Insured Details : As Per Annexure Attached.

Total no of Person:	598	Total Sum Insured:	₹ 59,800,000.00
Policy Period:	1 Yr	Policy Variant:	Named
Special Condition:	ALL THE 598(FIVE HUNDRED NINETY EIGHT) MEMBERS MENTIONED IN THE LIST GIVEN BY "HIRASUGAR INSTITUTE OF TECHNOLOGY, NIDASOSHI" ARE COVERED FOR ONE LACK EACH FOR THE TERM ONE YEAR		
Underwriting Remarks:			

Net Premium:	35,880.00
CGST(0%):	0.00
SGST(0%):	0.00
UTGST(0%):	0.00
IGST(0%):	0.00
Stamp Duty:	5.00
Total:	35,880.00
Receipt No:	10124010221115456407
Receipt Date:	29/03/2022

Agency/Broker Code :	AGD0101164
Dev officer code :	

Customer GST/UIN No.:		Office GST No.:	29AAACU5552C1ZF
SAC Code:	997139	Invoice No. & Date:	47211113658265 & 29/03/2022
Amount Subject to Reverse Charges-NIL			

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT <https://pledge.cvc.nic.in>.

Date of Proposal and Declaration: 17/03/2022
IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO NIPANI 240102 on this 29th day of March 2022 .

For and On behalf of
United India Insurance Co. Ltd.

Duly Constituted Attorney(s)
Underwritten By - KRS2106 (BO UW CUM CASHIER)

Policy Stamps not affixed
Stamp here.
for want of Stock



Caringly yours

BAJAJ Allianz



* 3 2 2 6 8 3 6 0 9 *

Sept-22 to Sept-23

Bajaj Allianz General Insurance Company Ltd.
Bajaj Allianz House, Airport Road, Yerawada, Pune - 411006
GROUP PERSONAL ACCIDENT POLICY SCHEDULE
UIN: IRDA/NL-HLT/BAGI/P-P/V.I/151/13-14

DUPLICATE COPY

Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc. :

Madiwale Arcade, 1st floor., Hasmi Manzil, Club Road, , ,
Belgaum-590001 Phone No :0831-4215475

Policy No. OG-23-1713-9902-00000003

Product GROUP PERSONAL ACCIDENT

Period of Insurance From 00:00:00 27-SEP-22 To 26-SEP-23
Midnight

Policy Issued On 21-SEP-22

Co-Insurance Details Own Share: 100%

Insured Name HIRASUGAR INSTITUTE OF TECHNOLOGY

Insured Address NIDASOSHI, , PO Area - NIDASOSHI, , BELGAUM, KARNATAKA - 591236

Bank Details : No Details

No Details

GSTIN / UIN NA

Place of Supply/State 29 - Karnataka
Code/Name

Company GST No : 29AABC5730G1ZT

Invoice No : 360789271/1

Company PAN : AABC5730G

Description	Sum Insured (Rs)
TOTAL 132 MEMBERS COVERED	1,32,00,000.00

Highest Sum Insured 100000

Additional** Loading @ 0 %

Additional Discount@ 0 %

Base Premium 6,712.00

Special Discount 0

Net Premium 6,712.00

Terrorism** Surcharge 0.0

Stamp Duty

State GST (9%) 604.00

Central GST (9%) 604.00

Final Premium 7,920.00

*** All Premium figures are in Rupee.

On specific request and subject to terms and conditions, record of information exchange will be made available.

As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 30th September of the next financial year.

Scope of Cover As per the policy wording attached.

Risk Covered Group Personal Accident Risk Class II Basic : Accidental Death (Sum insured limited to 100 times of monthly salary or Rs. 1 lacs whichever is Less).

Special Perils As per policy terms and conditions.

Special Exclusions As per policy terms and conditions.

Subject to Clauses Cremation charges is covered up to 5000/-. Carriage of Dead body is covered up to 5000/-. Repatriation of Remains is covered up to 5000/-. Family Transportation is covered up to 5000/-. Children Education Bonus is covered upto maximum Rs. 5000 per child for maximum 2 children below age of 19years, applicable in the event of an admissible Accidental Death claim.

Warranties Upon mutual agreement between the Insurer and the Group manager the claim settlement can be as part of the overall service benefit and pass on the balance, if any to the Insured Member / Nominee done by the Insurer either in favour of the Group Manager or the Insured Member / Nominee / Legal Heir. However, wherever it has been agreed to settle the claim in favour of the Group Manager, the Insurer must seek an undertaking from the Group Manager that confirms that the final claim settlement will be done to the Insured Member / Nominee / Legal Heir within 15 days of claim settlement to the Group Manager as per policy t&c. The employer may utilize the insurance amount / Legal Heir. SI should commensurate with salary. Age Restriction Upto 70 years.

Special Conditions As per policy terms and conditions.

Comments Previous Policy Number: OG-22-1713-9902-00000002 Beneficiary will be employee.

Bank RM Employee Code : Y

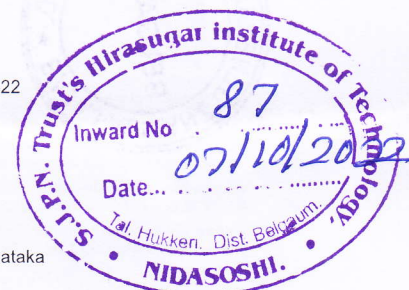
Agency Code BAG10028453

Channel Name : ML

Agency Name : SACHIN A BHADALE

Contact No : 9035073212/0

Email - sachin24may@gmail.com



BAJAJ ALLIANZ GENERAL INSURANCE CO. LTD
Madiwale Arcade, 3935/26A,
1st Floor, Hasmi Manzil.

Caringly yours

BAJAJ | Allianz



* 3 2 2 6 8 3 6 0 9 *

Premium Collection Details [Receipt No/Collection No/Amount] 1713-00220761 / 322683609 / Rs. 7,920.00 ,

*** If Premium paid through Cheque, the Policy is void ab-initio in case of dishonour of Cheque

*** This policy is subject to the standard policy wordings, warranties and conditions applicable for this product in addition to any specific warranty or condition attached

For & On Behalf of Bajaj Allianz General Insurance Company Ltd.



This document is digitally signed, hence counter signature / stamp is not required

Regd Office : Bajaj Allianz House, Airport Road, Yerwada Pune-411006 (India), A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113, Corporate Identification Number U66010PN2000PLC015329.

Consolidated Stamp Duty of Rs.5/- paid towards Insurance Stamps vide Challan No. MH002405964202122M Defaced No. 0001482221202122 dated 05-JUL-21 timing 12:58:03 of General Stamp Office, Mumbai, India.

Principal Location : Golden Heights, 4th Floor, No.1/2, 59th C Cross, 4th M Block, Rajajinagar, BANGALORE - 560010 PH:080-67195000 | Services Accounting Code : 997133 - Accident and health insurance services. No reverse charge is payable on these services.

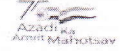
In case of any claim, please contact our 24 Hour Call centre at 1800-102-5858 (Toll Free) / 91-020-30305858 (chargeable, add area code before this number in case of mobile call) or email us at 'Bagichelp@bajajallianz.co.in'.

322683609/-110028453/0/-

Prefix your area code if you are calling from a Mobile Device.

A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113, Corporate Identification Number U66010PN2000PLC015329.

Generated by tanmay chandragiri02



UNITED INDIA INSURANCE COMPANY LIMITED

NIPANI BRANCH OFFICE 24, 1ST FLOOR, ASHOK NAGAR, NIPANI
BELGAUM - 591237 KARNATAKA
PH: (8338) 220310 FAX: EMAIL:

MICRO-INSURANCE PRODUCT-JANATA PERSONAL ACCIDENT - GROUP POLICY
UIN NO. IRDAI/HLT/UII/P-P/V.I/8/2015-16
POLICY NO: 2401024722P113317644

PERIOD OF INSURANCE
From 00:00 Hrs of 15/03/2023
To Midnight of 14/03/2024

Insured

HIRASUGAR INSTITUTE OF TECHNOLOGY NIDASOSHI
A/P. NIDASOSHI TQ. HUKKERI DIST. : BELGAUM, KARNATAKA
591236
BELGAUM
KARNATAKA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name	: SMT. MAHANANDA M. NAIKMANI
Agent Code	: AGD0101164
Mobile/Landline Number/Email	: 9448149242 maha_mn@rediff.com



The genuineness of the policy can be verified through "Verify Your Policy" link at www.uiic.co.in.

For any Information, Service Requests, Claim intimation and Grievances please write to 240102@uiic.co.in

Download Customer App(www.uiic.co.in). REGD. & HEAD OFFICE, 24, WHITES ROAD, CHENNAI - 600014.

Website: <http://www.uiic.co.in>

Printed By : KIR52106 @ 16/03/2023 5:23:53 PM

This document is digitally signed

Signer: AMAR KUMAR SINHA
Date: Thu, Mar 16, 2023 17:23:53 IST
Location: United India Insurance Company Ltd
Reason: Signing Policy for UIIC



MICRO-INSURANCE PRODUCT-JANATA PERSONAL ACCIDENT - GROUP POLICY
UIN NO. IRDAI/HLT/UII/P-P/V.I/8/2015-16
SCHEDULE

Policy No.	2401024722P113317644	Prev. Pol. No.	
Name Of Insured / ID	HIRASUGAR INSTITUTE OF TECHNOLOGY NIDASOSHI / 1918521427		
Tel.(O)		Fax	
Business/Occupation	None	Email	
Period of Insurance	From	00:00 Hours of 15/03/2023	To Midnight of 14/03/2024

Coinurance	UIC 240102 : 100%
PREMIUM :	Forty-three thousand six hundred twenty rupees only

Insured Details : As Per Annexure Attached.

Total no of Person:	727	Total Sum Insured:	₹ 72,700,000.00
Policy Period:	1 Yr	Policy Variant:	Named
Special Condition:	ALL THE 727(SEVEN HUNDRED TWENTY SEVEN) MEMBERS MENTIONED IN THE LIST GIVEN BY "HIRASUGAR INSTITUTE OF TECHNOLOGY NIDASOSHI" ARE COVERED FOR ONE LAKH EACH FOR THE TERM ONE YEAR.		
Underwriting Remarks:			

Net Premium:	₹ 43,620.00
CGST(0%):	0.00
SGST(0%):	0.00
UTGST(0%):	0.00
IGST(0%):	0.00
Stamp Duty:	5.00
Total:	₹ 43,620.00
Receipt No:	10124010222115412181
Receipt Date:	16/03/2023

Agency/Broker Code :	AGD0101164
BDIS Code :	BD52082

Customer GST/UDN No.:	
SAC Code:	999999
Amount Subject to Reverse Charges-RC:	

We hereby declare that though our aggregate turnover notified under sub-rule 1 sub-rule.

Anti Money Laundering Clause: In the event of 1 lakh, the insured will comply with the provisions as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION

Date of Proposal and Declaration: 15/03/2023
 IN WITNESS WHEREOF, the undersigned being

For and On behalf of
 United India Insurance Co. Ltd.

Duly Constituted Attorney(s)
 Underwritten By - KIR52106 (BO UIN CLM)



ACCIDENT - GROUP POLICY
2015-16

	Mobile
	Midnight of 14/03/2024

	₹ 72,700,000.00
	Named
S MENTIONED IN THE LIST GIVEN BY	
WARRANTY COVERED FOR ONE LAKH EACH FOR THE	

	43,620.00
	0.00
	0.00
	0.00
	0.00
	5.00
	43,620.00
10124010222115412181	
16/03/2023	
	AGD0101164
	BD52082

Customer GST/UIN No.:		Office GST No.:	29AAACU5552C1ZF
SAC Code:	997139	Invoice No. & Date:	47221113317644 & 16/03/2023
Amount Subject to Reverse Charges-NIL			

We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule.

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT <https://pledge.cvc.nic.in>.

Date of Proposal and Declaration: 15/03/2023

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO NIPANI 240102 on this 16th day of March 2023 .

For and On behalf of
United India Insurance Co. Ltd.

Duly Constituted Attorney(s)
Underwritten By - KIR52106 (BO UW CUM CASHIER)



Policy Stamps not affixed
for want of Stock





S J P N Trust's

Hirasugar Institute of Technology, Nidasoshi

Approved by AICTE, New Delhi, Permanently Affiliated to VTU, Belagavi

Recognized under 2(f) & 12B of UGC Act, 1956

Accredited at 'A' Grade by NAAC & Programmes Accredited by NBA: CSE & ECE

NAAC

Criterion-6

ESI Beneficiaries

Date: 21-02-2024

Employees State Insurance Corporation (ESI) Beneficiaries List

The following staff members are benefited/benefiting Employees State Insurance Corporation (ESI) from our Institute.

S.N.	Name of ESI Beneficiaries	Designation
1.	Shri. Sadashiv Ningappa Biranagaddi	Electrician
2.	Shri. Basavaraj Siddappa Sooji	Electrician
3.	Shri Shivanand Kallappa Jakati	Electrician
4.	Shri Chetan Jodatti	Instructor
5.	Shri Chandrakant Basaprabhu Patil	Mechanic
6.	Shri. Duradundi Mallappa Madihalli	Driver
7.	Shri Shivanand Annappa Biskop	Driver
8.	Shri Appasaheb Shankar Kankanawadi	Helper
9.	Shri Kadappa Maruti Kankanwadi	Helper
10.	Shri Mahadev Bharama Sankapal	Helper
11.	Shri Vittal Hanamantappa Kumbar	Helper
12.	Shri Anil Shankar Jadhav	Helper
13.	Shri Satyappa Shankar Jodatti	Helper
14.	Shri Rudrappa Shivalingappa Kagi	Mali
15.	Shri. Ghulappa Tolake	Peon
16.	Shri Ashok Dundappa Kumbar	Peon
17.	Shri Mallikarjun Yashavanth	Scurrility
18.	Shri Ramesh Chinchani	Scurrility
19.	Shri Yallappa Hanumantappa Naik	Scavenger



[Signature]
21/2/24
PRINCIPAL
Hirasugar Institute of Technology
Nidasoshi-591 236

Nidasoshi-591 236, Taq: Hukkeri, Dist: Belagavi, Karnataka, India.

Phone: +91-8333-278887, Fax: 278886, Web: www.hsit.ac.in, E-mail: principal@hsit.ac.in

From,

CONFIDENTIAL

FORM-10
(Reg. 52-A)



BRANCH OFFICE :
Employees' State Insurance Corporation

To,

Date 17/09/2022

M/s. _____

Name of I.P. Sri./Smt. Sadashiv

Insurance No. 5859232095 Department _____

Dear Sir/s,

The above named employee of your factory has submitted a certificate of incapacity for the period from 06/09/22 to 13/09/22 and has declared that he/she has not worked on any day during the above period. He/She has further declared that he/she has not received wages for any leave/holiday/weekly off/day off and was not on strike for the above period of incapacity.

I shall be grateful for your confirmation on the form appended within 10 days of receipt of this form.

Your's faithfully,

Sadashiv Birangadi **BRANCH MANAGER**
Ins. No. 5859232095

Name of the insured person Sri./Smt. _____

Returned with the remarks that the employee in question has not worked for any day during the period from 06/09/2022 to 13/09/2022
It is further confirmed that :

- He/She had remained on leave with wages from to
 - He/She was remained on holiday with wages from to
 - He/She was weekly off with wages from to
 - He/She was on lay off with wages from to
 - He/She was on strike from to if the I.P. is paid any wages for any days during the above period subsequently the same will be notified to you in due course.
2. The day proceeding the first day of absence / was / was not a *holiday for the insured person.

*Strike out if not applicable

Birangadi



Name & Designation
Code No.

PRINCIPAL
Signature
NIDASOSHI-591236



Employees State Insurance Corporation



DO NOT MUTILATE THE QR CODE

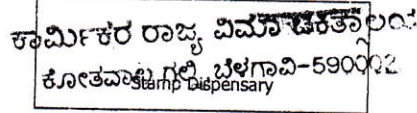
**REG. Form-7
(CONFIDENTIAL)**

FIRST/ INTERMEDIATE/ FINAL CERTIFICATE

K.S.R.T.C. Belgaum, KA (ESIS Disp.)

(Regulation 57, 58, 59)

Serial No ESICDSKNBEKSR02202679



Signature or Thumb Impression of the I.P. _____

Employer's Code No. _____

Branch Office _____

Ins. No. 5859232095

Date of First Certificate of Spell of
Sickness or Disablement 06-Jun-2022

Name Mr. SADASHIV BIRANAGADDI S/W/D/o _____

Certified that I Have Examined you today and that in my opinion:

Attestation by Med. Officer	<p>(i)* You now need medical treatment attendance & abstention from work on medical grounds by the reason of (diagnosis) Fracture of femur, part unspecified, right side, right sid,</p> <p>(ii)* You have continued to need medical attendance & abstention from work on medical grounds upto and including this day by reason of (diagnosis)</p> <p>(iii)* In my opinion you will be fit to resume work tomorrow/on <u>14-Sep-2022</u></p>
--------------------------------	--

Any other remarks _____, DOA: 06-Jun-2022, DOD: 13-Jun-2022
by the Medical Officer

NOTE: The date of fitness must in no case be later than the third day after the date of the examination in case of First and Final Certificate.

Date: 13-Sep-2022

Signature _____

Insurance Medical Officer

Name in Block Letter

DR. SANJU SHIVAPPA LAMANI

ಇದಕ್ಕೆ ವಿಮಾ ವೈದ್ಯಾಧಿಕಾರಿ

ಕಾ. ರಾ. ವಿಮಾ ಬೆಕೆಟ್ಟಾಲಯ

ಕೋತವಾಲಗಲ್ಲಿ, ತಾ.ಶ್ಯಾ. ಜಿ.ಕೆ

ಬೆಳಗಾವಿ-590 002

IMPORTANT:

- Any person who makes false statement or representation for the Purpose of obtaining benefit whether for himself/ some other person shall be punishable with imprisonment upto 6 months or fine upto Rs. 2,000/- of both.
- This form should be completed and submitted WITHOUT DELAY to the appropriate Branch Office to escape penal deduction of benefit under regulation 64 read with regulation 99 of ESI (Gene'al) Regulation 1950.
- Insured person must sign, with date, the claim form to avoid delay and inconvenience.

Print Date: 13-Sep-2022

दिनांक: 14/09/2022

ಉಂದೆ:

ನವಾರೋಬ್ ಬರನಗಟ್ಟಿ
ಇಕ್ಕಿ ಯುವ
ಎಚ್.ಸಿ.ಬಿ ನಿಡನೋರೆ

१३

ಪ್ರಾಂಶುಪಾಲರು
ಹಿರಾಕುಂದಿ ಅಂಚುತೆ ಪುಡಿವಿಡ್ವಲಯ
ನಿಡ ಕುಲಿ.

విషయం: ESI నెటిడు వేర్వేరుగా ప్రైవేట్-10 యంత్రాలు
ESI శిక్షణా పాఠశాల కేంద్రం పాఠశాల
కూర్చు

உதயசூரியன்

ಯನ್ಮೋ
ನಾನು ಕ್ಷೇಮವಾಗಿರುತ್ತೇನೆ ಎಂಬುದನ್ನು ತಿಳಿಸುತ್ತಿದ್ದೇನೆ. ನಾನು ದೂರ
06/06/2022 ರಂದು ಮೂರು ವರ್ಷಗಳ ಹಿಂದೆ ಬಾಲ್ಯದ
ಗಾಯನ ಮಾಡಿದ್ದೇನೆ. ಕೆಳಕಂಡ ದಿನಾಂಕ 06/06/2022
ರಂದು 13/09/2022 ರಂದು ಮೂರು ವರ್ಷಗಳ ಹಿಂದೆ
ಮಾಡಿದ್ದೇನೆ.

ಶ್ರೀಮತೇ,
 ಶ್ರೀಮತೇ ಎಸ್‌ಐ ಸರ್ವತೋಮುಖವಾಗಿ 10 ನೇ
 ವರ್ಗಕ್ಕೆ ಏರ್ಪಡಿಸಿದ ಕಾರಣದಿಂದ ಎಸ್‌ಐ ಶ್ರೇಣಿಯಲ್ಲಿ
 ಉಳಿದವರನ್ನು ಹಾಗೆ ಮಾಡಬೇಕು ಎಂದು
 ಬಯಸುತ್ತೇನೆ,
 ಶ್ರೀಮತೇ

ಬಿರಂಗೋಡಿ
(ನವಾಬ್ ಅರಸನು)

From,

CONFIDENTIAL

FORM-10
(Reg. 52-A)



BRANCH OFFICE :
Employees' State Insurance Corporation

To,

Date 19/08/2022

M/s. _____

Name of I.P. Sri./Smt. Padalpur

Insurance No. 5859232095 Department _____

Dear Sir/s,

The above named employee of your factory has submitted a certificate of incapacity for the period from 01/08/2022 to 15/08/2022 and has declared that he/she has not worked on any day during the above period, He/She has further declared that he/she has not received wages for any leave/holiday/weekly off/lay off and was not on strike for the above period of incapacity.

I shall be grateful for your confirmation on the form appended within 10 days of receipt of this form.

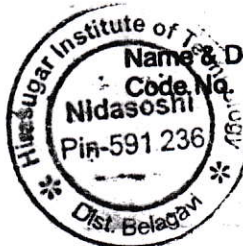
Your's faithfully,

Sadhshiva Birangaddi ⁽¹⁾ BRANCH MANAGER
Name of the insured person Sri/Smt. _____ Ins. No. 5859232095

Returned with the remarks that the employee in question has not worked for any day during the period from 06/06/2022 to 16/08/2022
It is further confirmed that :

- He/She had remained on leave with wages from _____ to _____
 - He/She was remained on holiday with wages from _____ to _____
 - He/She was weekly off with wages from _____ to _____
 - He/She was on lay off with wages from _____ to _____
 - He/She was on strike from _____ to _____ if the I.P. is paid any wages for any days during the above period subsequently the same will be notified to you in due course.
2. The day proceeding the first da of absence / was / was not a *holiday for the insured person.

S. Birangaddi
*Strike out if not applicable.



PRINCIPAL
Signature
Hirasugar Institute of Technology
NIDASOSHI-591236

೨೦೨

ಗೆ

ನರಸೀಪುರ ನಂ. ಬಿರಂಗಡೆ
ಭೂಕೃಷಿ, ಸಂ. ೨

ಪ್ರಾಚಾರ್ಯರು
ಎಚ್. ಎಸ್. ೩
ನಿರ್ದೇಶನ

ಮೊದಲ :- ೬೨೨ ನವರ ಕೃಷಿ
ಪ್ರಾಚಾರ್ಯರು ೬೨೨ ಭೂಕೃಷಿ
ಕೃಷಿ ಅನುಸಾರ ಕೃಷಿ

ಮಾನ್ಯ

ನರಸೀಪುರ ನಂ. ಬಿರಂಗಡೆ
ಅನುಸಾರ ಕೃಷಿ ಅನುಸಾರ ನಾಂ 6.6.2022 ರಿಂದ
16.8.22 ವರೆಗೆ ಕೃಷಿ ನಾಂ ಅನುಸಾರ ಕೃಷಿ
6.6.2022 ರಿಂದ 16.8.22 ವರೆಗೆ ಕೃಷಿ ಅನುಸಾರ
ಅನುಸಾರ ಕೃಷಿ ಅನುಸಾರ ೬೨೨ ಭೂಕೃಷಿ
ಅನುಸಾರ ಕೃಷಿ ಅನುಸಾರ ಅನುಸಾರ

ನರಸೀಪುರ

೦೫/೮/೨೨
೧೯/೮

೦೫/೦೮/೨೦೨೨

ನರಸೀಪುರ
ನರಸೀಪುರ ನಂ. ಬಿರಂಗಡೆ
Biringadd

From,

CONFIDENTIAL

FORM-10
(Reg. 52-A)



BRANCH OFFICE :
Employees' State Insurance Corporation

To,

Date 5/8/2023

M/s. _____

Name of I.P. Sri./Smt. Basavaraj S. Soudi
Insurance No. 585323/19578 Department _____

Dear Sir/s,

The above named employee of your factory has submitted a certificate of incapacity for the period from 27/5/23 to 4/8/23 and has declared that he/she has not worked on any day during the above period, He/She has further declared that he/she has not received wages for any leave/holiday/weekly off/day off and was not on strike for the above period of incapacity.

I shall be grateful for your confirmation on the form appended within 10 days of receipt of this form.

Your's faithfully,

[Signature]
BRANCH MANAGER

Name of the insured person Sri/Smt Basavaraj S. Soudi Ins. No. _____

Returned with the remarks that the employee in question has not worked for any day during the period from 27/5/2023 to 4/8/2023
It is further confirmed that :

- He/She had remained on leave with wages from _____ to _____
 - He/She was remained on holiday with wages from _____ to _____
 - He/She was weekly off with wages from _____ to _____
 - He/She was on lay off with wages from _____ to _____
 - He/She was on strike from _____ to _____ if the I.P. is paid any wages for any days during the above period subsequently the same will be notified to you in due course.
2. The day proceeding the first day of absence / was / was not a "holiday for the insured person.

*Strike out if not applicable.

Name & Designation PRINCIPAL Signature
Code No. Hirasagar Institute of Technology
NIDASOSHI-591236/

ಪ್ರಾಂಶುಪಾಲರು
 ತಿರ್ತುಗೂರು ಪ್ರಾಂತ್ಯಕ ಹಾಜಿ -
 ಬದ್ವಾಲಯ ನಿರ್ದೇಶನ
 ಬೆಂಗಳೂರು

ಬೆಂಗಳೂರು - ಇ.ಎಸ್.ಪಿ. ಬಿ ರೂರಾ ಪೊಲೀಸರು
 ಪ್ರಾಚಾರ್ಯರು ಇ.ಎಸ್.ಪಿ. ಬಿ ಬೆಂಗಳೂರು
 ಪೊಲೀಸರು ಅನುಮತಿಸಿ - ಪೊಲೀಸರು ರೂರಾ

ಬೆಂಗಳೂರು
 ಈ ಪೀಠಕ ಅನಂತರ ಪ್ರಾಚಾರ್ಯರು ಬಿ.ಎಸ್.ಪಿ.
 ಬೆಂಗಳೂರು ಅನಂತರ ಪೊಲೀಸರು ಬಿ.ಎಸ್.ಪಿ.
 - ರೂರಾ ಇ.ಎಸ್.ಪಿ. ಬಿ ರೂರಾ ಪೊಲೀಸರು ಪ್ರಾಂಶುಪಾಲರು
 ಪೊಲೀಸರು ಅನಂತರ ಇ.ಎಸ್.ಪಿ. ಬಿ ರೂರಾ ಪೊಲೀಸರು
 ಪ್ರಾಚಾರ್ಯರು ಅನಂತರ ಈ ಪೊಲೀಸರು ಪೊಲೀಸರು
 ಪ್ರಾಂಶುಪಾಲರು ರೂರಾ ಅನಂತರ ಪೊಲೀಸರು ರೂರಾ
 ಬೆಂಗಳೂರು

ಪ್ರಾಂಶುಪಾಲರು

ಪೊಲೀಸರು ನಿರ್ದೇಶನ
 ಬೆಂಗಳೂರು: 7.8.2023

ಪ್ರಾಂಶುಪಾಲರು

ಪ್ರಾಂಶುಪಾಲರು

ಪ್ರಾಂಶುಪಾಲರು, ಬೆಂಗಳೂರು, ಬಿ.ಎಸ್.ಪಿ.
 ಬೆಂಗಳೂರು

ಪ್ರಾಂಶುಪಾಲರು



DR. PRABHAKAR KORE HOSPITAL

&

MEDICAL RESEARCH CENTRE
NEHRUNAGAR, BELAGAVI - 590010.
KARNATAKA - INDIA

ಕೆ.ಎಲ್.ಇ. ಸಂಸ್ಥೆಯ

ಡಾ. ಪ್ರಭಾಕರ ಕೋರೆ ಆಸ್ಪತ್ರೆ ಮತ್ತು
ವೈದ್ಯಕೀಯ ಸಂಶೋಧನಾ ಕೇಂದ್ರ

ನೆಹರು ನಗರ, ಬೆಳಗಾವಿ - 590 010, ಕರ್ನಾಟಕ



Phone : 0831 - 2473777 (16 Lines)

Fax : 0831 - 2470732

E-mail : medicaldirector@klehospital.org

Website : http://www.klehospital.org

KLES/Dr.PK/HOSP/MRD/MC/2023-24/1345

DATE: 06-06-2023

MEDICAL CERTIFICATE

This is to certify that the patient by name BASAVARAJ SIDDAPPA SOOJI aged 42 Years (I.P.NO.1191696) was admitted under the care of Dr.Prashant B Bastawadi in this hospital on 27-05-2023 and discharged on 06-06-2023. His clinical diagnosis is RECURRENT SHOULDER DISLOCATION for which he underwent ARTHROSCOPIC REPAIR on 31-05-2023.

He is advised rest from 06-06-2023 to 06-08-2023 & to be reviewed after the rest period.

Endorsement as per consultation record dated 06-06-2023.



Sr. Medical Officer
KLES Dr. Prabhakar Kore Hospital
& MRC, Nehru Nagar, Belagavi



Employees State Insurance Corporation

(Deposit this certificate within 3 days with the appropriate Branch Office to avoid possible loss of benefit under Regulation 64)



DO NOT MUTILATE THE QR CODE

FIRST/ INTERMEDIATE/ FINAL CERTIFICATE

K.S.R.T.C. Belgaum, KA (ESIS Disp.)

(Regulation 57, 58, 59)

Serial No. ESICDSKNBEKSR02301791

REG. Form-7
(CONFIDENTIAL)

Date of First Certificate of Spell of
Sickness or Disablement 27-May-2023

Name Mr. BASAVARAJ SIDDAPPA S/W/D/o
SOOJI

Signature or Thumb Impression of the I.P.

Employer's Code No.

Branch Office

Ins. No. 5859231958

certified that I Have Examined you today and that in my opinion:

Attestation by Med. Officer	(i)* You now need medical treatment attendance & abstention from work on medical ground by the reason of (diagnosis) _____
	(ii)* You have continued to need medical attendance & abstention from work on medical grounds upto and including this day by reason of (Fracture of unspecified body region, Rt shoulder bankarts & amp; Hillsacha lesion + chip # of Glenoid labrum, Rt shoulder bankarts & amp; Hillsacha lesion + chip # of Glenoid labrum
	(iii)* In my opinion you will be fit to resume work tomorrow/on _____

Any other remarks
by the Medical
Officer

, DOA: 27-May-2023, DOD: 06-Jun-2023

NOTE: The date of fitness must in no case be later than the third day after the date of the examination in case of First and Final certificate.

Date: 07-Jun-2023

Signature

Insurance Medical Officer

Name in Block Letter DR. SANJU SHIVAPPA LAMANI

IMPORTANT:

- Any person who makes false statement or representation for the Purpose of obtaining benefit whether for himself/ some other person shall be punishable with imprisonment upto 6 months or fine upto Rs. 2,000/- of both.
- This form should be completed and submitted WITHOUT DELAY to the appropriate Branch Office to escape penal deduction of benefit under regulation 64 read with regulation 99 of ESI (General) Regulation 1950.
- Insured person must sign, with date, the claim form to avoid delay and inconvenience.

ಇದೇ ವಿಮಾ ವೈದ್ಯಾಧಿಕಾರಿ

ಕಾ. ರಾ. ವಿಮಾ ಹಿತಾಸಕ್ತರು

ಕೊಡವಾಲಗಲ್ಲಿ, ಶಾಸ್ತ್ರಿ ಚೌಕ.

ಬೆಲೆಗಾ 590.0002

Rubber Stamp

Date: 07-Jun-2023

From,



CONFIDENTIAL

FORM-10
(Reg. 52-A)

BRANCH OFFICE :

Employees' State Insurance Corporation

To,

Date 10/6/2022

M/s.

Name of I.P. Sri/Smt. Durdundi mallappa

Insurance No. 5859231972 Department

Dear Sir/s,

The above named employee of your factory has submitted a certificate of incapacity for the period from 16/11/2021 to 10/6/2022 and has declared that he/she has not worked on any day during the above period. He/She has further declared that he/she has not received wages for any leave/holiday/weekly off/lay off and was not on strike for the above period of incapacity.

I shall be grateful for your confirmation on the form appended within 10 days of receipt of this form.

Your's faithfully,

Durdundi M Madihalli

BRANCHMANAGER

Name of the insured person Sri/Smt.

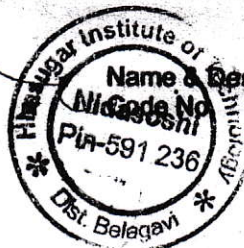
Ins. No.

Returned with the remarks that the employee in question has not worked for any day during the period from 11-5-2022 to 10/06/2022

It is further confirmed that :

- He/She had remained on leave with wages from.....to.....
 - He/She was remained on holiday with wages from.....to.....
 - He/She was weekly off with wages from.....to.....
 - He/She was on lay off with wages from.....to.....
 - He/She was on strike from.....to.....if the I.P. is paid any wages for any days during the above period subsequently the same will be notified to you in due course.
2. The day proceeding the first day of absence / was / was not a "holiday" for the insured person.

*Strike out if not applicable.



PRINCIPAL

Signature
Prasad Institute of Technology
UNIDASOSHI - 591 236



Employees State Insurance Corporation

(Deposit this certificate within 3 days with the appropriate
Branch Office to avoid possible loss of benefit under Regulation 64)



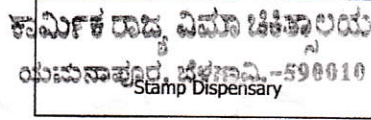
DO NOT MUTILATE THE QR CODE

**REG. Form-7
(CONFIDENTIAL)**

FIRST/ INTERMEDIATE/ FINAL CERTIFICATE

Yamunapura, KA (ESIS Disp.)

(Regulation 57, 58, 59)



Serial No ESICDSKNBEYAM02200728

Signature or Thumb Impression of the I.P. [Signature]

Employer's Code No. _____

Branch Office _____

Date of First Certificate of Spell of

Sickness or Disablement 16-Apr-2022

Name Mr. DURADUNDI MALLAPPA
MADIHALLI

S/W/D/o _____

Ins. No. 5859231972

Certified that I Have Examined you today and that in my opinion:

Attestation by Med. Officer	<p>(i)* You now need medical treatment attendance & abstention from work on medical grounds by the reason of (diagnosis) Disorder of skin and subcutaneous tissue, unspecified</p> <p>(ii)* You have continued to need medical attendance & abstention from work on medical grounds upto and including this day by reason of (diagnosis)</p> <p>(iii)* In my opinion you will be fit to resume work tomorrow/on <u>11-Jun-2022</u></p>
--------------------------------	---

Any other remarks
by the Medical
Officer

, DOA: 16-Apr-2022, DOD: 30-Apr-2022

NOTE: The date of fitness must in no case be later than the third day after the date of the examination in case of First and Final Certificate.

Date: 08-Jun-2022

Signature _____

Insurance Medical Officer

Name in Block Letter

DR. AMIT RAYAN GOUDAR

Rubber Stamp

IMPORTANT:

1. Any person who makes false statement or representation for the Purpose of obtaining benefit whether for himself/ some other person shall be punishable with imprisonment upto 6 months or fine upto Rs. 2,000/- of both.
2. This form should be completed and submitted WITHOUT DELAY to the appropriate Branch Office to escape penal deduction of benefit under regulation 64 read with regulation 99 of ESI (General) Regulation 1950.
3. Insured person must sign, with date, the claim form to avoid delay and inconvenience.

Print Date: 08-Jun-2022



Employees State Insurance Corporation

(Deposit this certificate within 3 days with the appropriate Branch Office to avoid possible loss of benefit under Regulation 64)



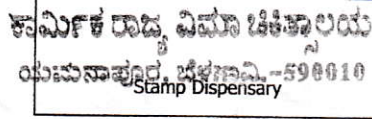
DO NOT MUTILATE THE QR CODE

**REG. Form-7
(CONFIDENTIAL)**

FIRST/ INTERMEDIATE/ FINAL CERTIFICATE

Yamunapura, KA (ESIS Disp.)

(Regulation 57, 58, 59)



Serial No ESICDSKNBEYAM02200728

Signature or Thumb Impression of the I.P. [Signature]

Employer's Code No. _____

Branch Office _____

Date of First Certificate of Spell of

Sickness or Disablement 16-Apr-2022

Name Mr. DURADUNDI MALLAPPA
MADIHALLI

S/W/D/o _____

Ins. No. 5859231972

Certified that I Have Examined you today and that in my opinion:

Attestation by Med. Officer	<p>(i)* You now need medical treatment attendance & abstention from work on medical grounds by the reason of (diagnosis) Disorder of skin and subcutaneous tissue, unspecified</p> <p>(ii)* You have continued to need medical attendance & abstention from work on medical grounds upto and including this day by reason of (diagnosis)</p> <p>(iii)* In my opinion you will be fit to resume work tomorrow/on <u>11-Jun-2022</u></p>
-----------------------------	--

Any other remarks
by the Medical
Officer

, DOA: 16-Apr-2022, DOD: 30-Apr-2022

NOTE: The date of fitness must in no case be later than the third day after the date of the examination in case of First and Final Certificate.

Date: 08-Jun-2022

Signature _____

Insurance Medical Officer

Name in Block Letter

DR. AMIT RAYAN GOUDAR

Rubber Stamp

IMPORTANT:

1. Any person who makes false statement or representation for the Purpose of obtaining benefit whether for himself/ some other person shall be punishable with imprisonment upto 6 months or fine upto Rs. 2,000/- of both.
2. This form should be completed and submitted WITHOUT DELAY to the appropriate Branch Office to escape penal deduction of benefit under regulation 64 read with regulation 99 of ESI (General) Regulation 1950.
3. Insured person must sign, with date, the claim form to avoid delay and inconvenience.

Print Date: 08-Jun-2022

ಇವ

ಮುರಮಂಡಿ ಬ್ಲ. ಮದಿಹಳ್ಳ
ಬ್ರಾಂಚ

ಗೆ

ಪ್ರಾಂಶುಪಾಲರು

ವಿಚ್. ಆಯ ಟಿ.

ನಿರ್ದೇಶಕರು

ವಿಷಯ:- E.S.I ನವರು ಕೆಟ್ಟಿರುಳ
ಲಿಖಿತ ಕುರಿತು E.S.I ಇಲಾಖೆಗೆ
ಕೊಡಲು ಅನುಮತಿ ಕೊಡುವ ಕುರಿತು.

ಸರ್,

ನಾನು ಮುರಮಂಡಿ ಬ್ಲ. ಮದಿಹಳ್ಳ ತಾಲ್ಲೂಕು

ಅನುಲಿಪಿತಕ್ಕಿಲ್ಲದವನಂದರೆ ನಾನು 11/05/22 ರಿಂದ 10/06/22

ಯವರೆಗೆ ಬೆಂಗಳೂರು ಸ್ವತಂತ್ರವಾದ ಲಿಫ್ಟ್ ಕಾಲಿಗೆ ಗಾಯ

ಯಾದಿಕ್ಕೊಡಿಸಿದ್ದು ಜುಲೈ 11/05/22 ರಿಂದ 10/06/22 ಯವರೆಗೆ

ಪ್ರಾರ್ಥನೆ ಹಾಕಲು ಬಾಡಲು ದೇಶದ್ದಾರೆ ಮತ್ತು E.S.I. ಇಲಾಖೆಯವರು

ಉದಾ ಲಿಖಿತ ಕೆಟ್ಟಿರುತ್ತಾರೆ ಪಂಚಾಯತ್‌ನಿಂದ ಲಿಖಿತ ಅವನ್ನು

ತುಂಬಿಸಿ E.S.I. ನವರಿಗೆ ಕೊಡಲು ಅನುಮತಿ ಕೊಡುವಾಗ

ಬೇಕಾದ ಈ ಬಗ್ಗೆಯಲ್ಲಿ ತಾಲ್ಲೂಕು ಅನುಲಿಪಿತಕ್ಕಿಲ್ಲದವನು

ದನ್ಯವಾದಗಳೊಂದಿಗೆ

ಸ್ಥಳ:- ನಿರ್ದೇಶಕರು

ದಿನಾಂಕ:- 10/06/22

ಇವ ತಾಲ್ಲೂಕು ಬೆಂಗಳೂರು

Charitha
(ಮುಖ್ಯ ಬ. ಮದಿಹಳ್ಳ)

05/05
10/06

From,



CONFIDENTIAL

FORM-10
(Reg. 52-A)

BRANCH OFFICE :

Employees' State Insurance Corporation

To,

Date 11-05-2022

M/s.

Name of I.P. Sri/Smt. Gurudandi

Insurance No. 5859231972 Department mallappe madihali

Dear Sir/s,

The above named employee of your factory has submitted a certificate of incapacity for the period from 16/4/22 to 10/5/22 and has declared that he/she has not worked on any day during the above period. He/She has further declared that he/she has not received wages for any leave/holiday/weekly off/lay off and was not on strike for the above period of incapacity.

I shall be grateful for your confirmation on the form appended within 10 days of receipt of this form.

Your's faithfully,

Name of the insured person Sri/Smt Gurudandi M. Madihali

BRANCH MANAGER

Ins. No. 5859231972

Returned with the remarks that the employee in question has not worked for any day during the period from 16-04-2022 to 10-05-2022 ✓
It is further confirmed that : 16-04-2022

- a) He/She had remained on leave with wages from.....to.....
b) He/She was remained on holiday with wages from.....to.....
c) He/She was weekly off with wages from.....to.....
d) He/She was on lay off with wages from.....to.....
e) He/She was on strike from.....to.....if the I.P. is paid any wages for any days during the above period subsequently the same will be notified to you in due course.
2. The day proceeding the first day of absence / was / was not a "holiday for the insured person.

*Strike out if not applicable.

Name & Designation
Code No.

Signature

PRINCIPAL

Strasugar Institute of Technology
NIDASOSHI-591226



EMPLOYEES STATE INSURANCE CORPORATION



DO NOT MUTILATE THE QR CODE

(Deposit this certificate within 3 days with the appropriate Branch Office to avoid possible loss of benefit under Regulation 64)

SPECIAL INTERMEDIATE CERTIFICATE

Yamunapura, KA (ESIS Disp.)

(Regulation 61 and 89-B)

REG. Form-8
(CONFIDENTIAL)

Serial No ESICDSKNBEYAM02200542

Signature or Thumb Impression of the I.P.

Employer's Code No.

Branch Office

Ins. No. 5859231972

Date of First Certificate of Spell of

Sickness or Disablement: 16-Apr-2022

To Mr. DURADUNDI MALLAPPA S/W/D/o
MADIHALLI

Certified that I have examined you 11-May-2022 today and that in my opinion you have continued to need medical treatment and have remained incapable to work up to and including this day by reason of Burn of unspecified degree of hip and lower limb, except ankle and foot

I further certify that by judging your present condition it is found that your sickness is of such a character that it will be unnecessary to see you for the purpose of treatment more frequently than once in 3 weeks, and you will require medical treatment and will remain incapable to work at least up to the end of 31-May-2022 weeks from this date

I propose to issue certificates in this form at the interval stated above, so long as your condition does not require more frequent attendance. In my opinion you should now/ need not be referred to a Medical Board to determine if you are permanently disabled.

Attestation by Med. Officer

Any other remarks by the Medical Officer

, DOA: 16-Apr-2022, DOD: 30-Apr-2022

Date: 10-May-2022

Signature

Insurance Medical Officer with rubber stamp

Name in Block letter DR. AMIT RAYAN GOUDAR

INSURANCE MEDICAL OFFICER
ESI DISPENSARY
Yamanapur, Belagavi.

ಇಂಥ,

ದಾರಿದ್ರ್ಯಾಂತ್ರಿ. ಉ. ಲಾಂಛನ

ದ್ರಿವಿಶಿ

ನೆ,

ಪ್ರಾಂಶಾಲ್ಪಿಲಕಾ,

ಉಚ್ಚ. ಸಿಂ. 10

19/5/2022

ಅರ್ಜಿಯ:- E. S. I. ವಲಂ ಕೈದಿಗಳು

ಅರ್ಜಿ ಕೂಡ E. S. I. ಇಲಾಖೆ

ಕೈದಿಗಳು ಲಿಂಗಾಂಶ ಕೈದಿಗಳು ಕೂಡ

ಎಂ

ಎನ್ ದಾರಿದ್ರ್ಯಾಂತ್ರಿ. ಉ. ಲಾಂಛನ

ಅನಂತಕೈದಿಗಳಾದವರೊಂದಿಗೆ ಎನ್ 16/04/22

ಕೂಡಾ ಅರ್ಜಿ ಕೂಡ ಕೈದಿಗಳು ಕೂಡ

ಅರ್ಜಿ ಕೂಡ 16/04/22 ಕೂಡ 31/05/22

ಅರ್ಜಿ ಕೂಡ ಅರ್ಜಿ ಕೂಡ ಅರ್ಜಿ ಕೂಡ

E. S. I. ಇಲಾಖೆಯಿಂದ ಲಿಂಗಾಂಶ ಕೈದಿಗಳು

ಅರ್ಜಿ ಕೂಡ ಅರ್ಜಿ ಕೂಡ ಅರ್ಜಿ ಕೂಡ

ಅರ್ಜಿ ಕೂಡ ಅರ್ಜಿ ಕೂಡ ಅರ್ಜಿ ಕೂಡ

ಅರ್ಜಿ ಕೂಡ ಅರ್ಜಿ ಕೂಡ ಅರ್ಜಿ ಕೂಡ

ಅರ್ಜಿ ಕೂಡ ಅರ್ಜಿ ಕೂಡ

19/5/2022

10/05/2022

ಅರ್ಜಿ ಕೂಡ ಅರ್ಜಿ ಕೂಡ

ಅರ್ಜಿ ಕೂಡ ಅರ್ಜಿ ಕೂಡ

05/05/2022
11/5

From,

CONFIDENTIAL

FORM-10
(Reg. 52-A)



BRANCH OFFICE :
Employees' State Insurance Corporation

To,

Date 25/10/2023

M/s. _____

Name of I.P. Sri./Smt. Rudraappa

Insurance No. 5859232093 Department _____

Dear Sir/s,

The above named employee of your factory has submitted a certificate of incapacity for the period from 01/09/2023 to 25/10/2023 and has declared that he/she has not worked on any day during the above period. He/She has further declared that he/she has not received wages for any leave/holiday/weekly off/lay off and was not on strike for the above period of incapacity.

I shall be grateful for your confirmation on the form appended within 10 days of receipt of this form.

Your's faithfully,

Rudraappa Shivalingappa

BRANCH MANAGER

Name of the insured person Sri/Smt Kagin

Ins. No. 5859232093

Returned with the remarks that the employee in question has not worked for any day during the period from 01/09/2023 to 25/10/2023
It is further confirmed that :

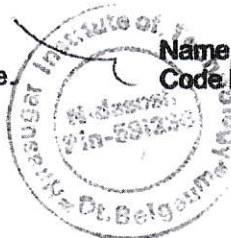
- He/She had remained on leave with wages from.....to.....
 - He/She was remained on holiday with wages from.....to.....
 - He/She was weekly off with wages from.....to.....
 - He/She was on lay off with wages from.....to.....
 - He/She was on strike from.....to.....if the I.P. is paid any wages for any days during the above period subsequently the same will be notified to you in due course.
2. The day proceeding the first day of absence / was / was not a *holiday for the Insured person.

*Strike out if not applicable.

Name & Designation

Code No.

Signature



PRINCIPAL
Nidasoshi Institute of Technology
NIDASOSHI-591236



Employees State Insurance Corporation

(Deposit this certificate within 3 days with the appropriate Branch Office to avoid possible loss of benefit under Regulation 64)



DO NOT MUTILATE THE QR CODE

FIRST/ INTERMEDIATE/ FINAL CERTIFICATE

K.S.R.T.C. Belgaum, KA (ESIS Disp.)

(Regulation 57, 58, 59)

REG. Form-7
(CONFIDENTIAL)

Serial No ESICDSKNBEKSR02303202

Signature or Thumb Impression of the I.P.

Employer's Code No.

Branch Office

Ins. No. 5859232093

Date of First Certificate of Spell of Sickness or Disablement

01-Sep-2023

Name Mr. Rudrappa Shivalingappa S/W/D/o Kagi

Certified that I Have Examined you today and that in my opinion:

ಕಾರ್ಮಿಕರ ರಾಜ್ಯ ವಿಮಾ ಬೆಂಕಿ
ಕೋತವಾಲಗಲ್ಲಿ ಬೆಂಕಿ-590002

(i)* You now need medical treatment attendance & abstention from work on medical ground by the reason of (diagnosis)

(ii)* You have continued to need medical attendance & abstention from work on medical grounds upto and including this day by reason of (

Fracture of unspecified body region, Rt proximal # of Humerus, Rt proximal # of Humeru,

Attestation by Med. Officer

(iii)* In my opinion you will be fit to resume work tomorrow/en

Any other remarks by the Medical Officer

NA - Needed abstention, on 2/10/23, DOA: 01-Sep-2023, DOD: 12-Sep-2023

NOTE: The date of fitness must in no case be later than the third day after the date of the examination in case of First and Final Certificate.

Date: 03-Oct-2023

Signature

Insurance Medical Officer

Name in Block Letter

DR. SANJU SHIVAPPA LAMANI

ಕಾರ್ಮಿಕ ವಿಮಾ ವೈದ್ಯಾಧಿಕಾರಿ
ಕಾ. ರಾ. ವಿಮಾ ಬೆಂಕಿ
ಕೋತವಾಲಗಲ್ಲಿ ಶಾಸ್ತ್ರಿ ಬಾಕಿ,
ಬೆಂಗಳೂರು-590 002.

IMPORTANT:

- Any person who makes false statement or representation for the Purpose of obtaining benefit whether for himself/ some other person shall be punishable with imprisonment upto 6 months or fine upto Rs. 2,000/- of both.
- This form should be completed and submitted WITHOUT DELAY to the appropriate Branch Office to escape penal deduction of benefit under regulation 64 read with regulation 99 of ESI (General) Regulation 1950.
- Insured person must sign, with date, the claim form to avoid delay and inconvenience.



DR. PRABHAKAR KORE HOSPITAL

MEDICAL RESEARCH CENTRE
NEHRUNAGAR, BELAGAVI-590010.
KARNATAKA - INDIA

ಕೆ.ಎಲ್.ಇ. ಸಂಸ್ಥೆಯು

ಡಾ. ಪ್ರಭಾಕರ ಕೋರೆ ಆಸ್ಪತ್ರೆ ಮತ್ತು
ವೈದ್ಯಕೀಯ ಸಂಶೋಧನಾ ಕೇಂದ್ರ

ನಹರು ನಗರ, ಬೆಳಗಾವಿ - 590 010, ಕರ್ನಾಟಕ

Phone : 0831 - 2473777 (16 Lines)

Fax : 0831 - 2470732

E-mail : medicaldirector@klehospital.org

Website : http://www.klehospital.org



KLES/Dr.PK/HOSP/MRD/MC/2023-24/ 3685

DATE: 12-09-2023

MEDICAL CERTIFICATE

This is to certify that the patient by name RUDRAPPA SHIVALINGAPPA KAGI aged 43 Years (I.P.NO.10004374) was admitted under the care of Dr.Prashant B Bastawadi in this hospital on 01-09-2023 and discharged on 12-09-2023. His clinical diagnosis is RIGHT PROXIMAL FRACTURE.

He is advised rest from 12-09-2023 to 12-11-2023 & to be reviewed after the rest period.

Endorsement as per consultation record dated 12-09-2023.



[Signature]
Sr. Medical Officer
KLES Dr. Prabhakar Kore Hospital
& MRC, Nehru Nagar, Belagavi

[Signature]
Medical Superintendent,
ESI-Hospital
Nehru Nagar, BELAGAVI.

MRD/pvj

From,



CONFIDENTIAL

FORM-10
(Reg. 52-A)

BRANCH OFFICE :
Employees' State Insurance Corporation

To,

Date 29/02/2024

M/s. _____

Name of I.P. Sri./Smt. Vittal.

Insurance No. 5859232113

Department _____

Dear Sir/s,

The above named employee of your factory has submitted a certificate of incapacity for the period from 20/01/24 to 11/2/24 and has declared that he/she has not worked on any day during the above period, He/She has further declared that he/she has not received wages for any leave/holiday/weekly off/lay off and was not on strike for the above period of incapacity.

I shall be grateful for your confirmation on the form appended within 10 days of receipt of this form.

Your's faithfully,

Name of the insured person Sri/Smt

Vittal H. Kumbhar

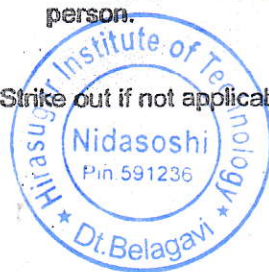
BRANCH MANAGER

Ins. No. 5859232113

Returned with the remarks that the employee in question has not worked for any day during the period from 20/01/2024 to 01/03/2024
It is further confirmed that :

- He/She had remained on leave with wages from to
 - He/She was remained on holiday with wages from to
 - He/She was weekly off with wages from to
 - He/She was on lay off with wages from to
 - He/She was on strike from to if the I.P. is paid any wages for any days during the above period subsequently the same will be notified to you in due course.
2. The day proceeding the first day of absence / was / was not a "holiday for the Insured person.

*Strike out if not applicable.



Name & Designation

Code PRINCIPAL

Signature

Hirasugar Institute of Technology

Nidasoshi-591 236

Employees State Insurance Corporation

(Deposit this certificate within 3 days with the appropriate Branch Office to avoid possible loss of benefit under Regulation 64)



DO NOT MUTILATE THE QR CODE

REG. Form-7
(CONFIDENTIAL)

FIRST/ INTERMEDIATE/ FINAL CERTIFICATE

K.S.R.T.C. Belgaum, KA (ESIS Disp.)

(Regulation 57, 58, 59)

ಕಾರ್ಮಿಕರ ರಾಜ್ಯ ವಿಮಾ ಚಿಕಿತ್ಸಾಲಯ
ಕೋತಮಾಲ ಗಲ್ಲಿ, ಬೆಳಗಾವಿ-590002
Stamp Dispensary

Serial No ESICDSKNBEKSR02400646

Signature or Thumb Impression of the I.P.

Employer's Code No.

Branch Office

Ins. No. 5859232113

Date of First Certificate of Spell of
Sickness or Disablement 20-Jan-2024

Name Mr. Vittal Hanamantappa Kumbhar S/W/D/o

Certified that I Have Examined you today and that in my opinion:

- (i)* You now need medical treatment attendance & abstention from work on medical grounds by the reason of (diagnosis)
Chronic ischaemic heart disease, unspecified, Acute upper respiratory infection, unspecified, Low back pain, IHD-Unstable angina CAD-single vessel disease direct stenting to proximal, IHD-Unstable angina CAD-single vessel disease direct stenting to proximal No Remarks, No Remarks No Remarks, No Remark,
- (ii)* You have continued to need medical attendance & abstention from work on medical grounds upto and including this day by reason of (diagnosis)
- (iii)* In my opinion you will be fit to resume work tomorrow/on 02-Mar-2024 ✓

Attestation by Med.
Officer

ny other remarks
y the Medical
fficer
, DOA: 20-Jan-2024, DOD: 27-Jan-2024

OTE: The date of fitness must in no case be later than the third day after the date of the examination in case of
rst and Final Certificate.

ate: 28-Feb-2024

Signature

Insurance Medical Officer

Name in Block Letter

DR. SANJU SHIVAPPA LAMANI

ಆದೇಶಿತ ವಿಮಾ ವೈದ್ಯಾಧಿಕಾರಿ

ಕಾ. ರಾ. ವಿಮಾ ಚಿಕಿತ್ಸಾಲಯ

ಕೋತಮಾಲ ಗಲ್ಲಿ, ಬೆಳಗಾವಿ-590002

ಬೆಳಗಾವಿ-590 002.

IMPORTANT:

Any person who makes false statement or representation for the Purpose of obtaining benefit whether for himself/ some other person shall be punishable with imprisonment upto 6 months or fine upto Rs. 2,000/- of both.

This form should be completed and submitted WITHOUT DELAY to the appropriate Branch Office to escape penal deduction of benefit under regulation 64 read with regulation 99 of ESI (General) Regulation 1950.

Insured person must sign, with date, the claim form to avoid delay and inconvenience.



Print Date: 28-Feb-2024



EMPLOYEES' STATE INSURANCE CORPORATION
e-Pehchan Card



PERSONAL DETAILS

Name of IP : Vittal Hanamantappa Kumbar Insurance No. : 5859232113
Date of Birth : 11/06/1981 UHID : KA01.0006104559
Gender : Male UAN : NA
Mobile Number : 9901429761 ABHA Number : NA
Email ID : NA ABHA Address : NA
Registration Date : 02/02/2020 Aadhaar : Verified

REGISTRATION DETAILS

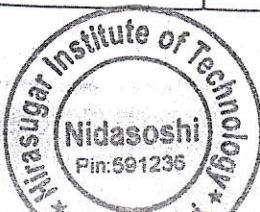
Marital Status : Married Name of Father / Husband : Hanumantappa
Type Of Disability : NA
Present Address : S/o vittal kumbar
oni,nidasoshi,Dist:Belgaum,Karnataka,591236
Permanent Address : S/o vittal kumbar
oni,nidasoshi,Dist:Belgaum,Karnataka,591236
Dispensary / IMP for IP : K.S.R.T.C. Belgaum, KA (ESIS Disp.)
Dispensary / IMP for Family : K.S.R.T.C. Belgaum, KA (ESIS Disp.)

CURRENT EMPLOYER DETAILS

Employer's Code No. : 58005127730001304 Name of Employer : SRIMAN NIRANJAN
JAGADGURU PANCHAM SRI
Sub Unit's Code : 58585127730011304 Date of Appointment : 01/02/2020
Address of Employer : CHIKKODI,Dist:BelgaumKarnataka591236
Branch Office : BO - Belgaum, Branch Manager, Branch Office, ESI Corporation, No. 7/B-1, Kangrali

FAMILY DETAILS

Name	Relation with IP	Date of Birth	UHID/ABHA Number	ABHA Address	UAN/ Aadhaar	Is Residing with IP	State/District
Rekha Vittal Kumbar	Spouse	12/02/1985	KA01.0006104560/N A		Verified	Yes	Karnataka / Belgaum



From, *Jane*



CONFIDENTIAL

AGC **FORM-10**
(Reg. 52-A)

BRANCH OFFICE :
Employees' State Insurance Corporation

To, _____

M/s. _____

Date 8/6/2022

Name of I.P. Sri/Smt. Ghulappa

Insurance No. 5859231975 Department _____

Dear Sir/s,

The above named employee of your factory has submitted a certificate of incapacity for the period from 18/4/22 to 1/6/22 and has declared that he/she has not worked on any day during the above period. He/She has further declared that he/she has not received wages for any leave/holiday/weekly off/lay off and was not on strike for the above period of incapacity.

I shall be grateful for your confirmation on the form appended within 10 days of receipt of this form.

Your's faithfully,

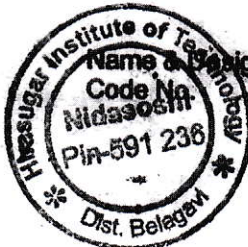
[Signature]

Name of the insured person Sri/Smt. Ghulappa S Tolake **BRANCH MANAGER**
Ins. No. 5859231975

Returned with the remarks that the employee in question has not worked for any day during the period from 18/4/2022 to 01/06/2022
It is further confirmed that :

- He/She had remained on leave with wages from to
 - He/She was remained on holiday with wages from to
 - He/She was weekly off with wages from to
 - He/She was on lay off with wages from to
 - He/She was on strike from to if the I.P. is paid any wages for any days during the above period subsequently the same will be notified to you in due course.
2. The day proceeding the first day of absence / was / was not a "holiday" for the insured person.

*Strike out if not applicable.



PRINCIPAL
[Signature]
Nidasoshi - 591 236



Employees State Insurance Corporation

(Deposit this certificate within 3 days with the appropriate Branch Office to avoid possible loss of benefit under Regulation 64)



DO NOT MUTILATE THE QR CODE

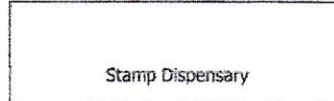
**REG. Form-7
(CONFIDENTIAL)**

FIRST/ INTERMEDIATE/ FINAL CERTIFICATE

Yamunapura, KA (ESIS Disp.)

(Regulation 57, 58, 59)

Serial No ESICDSKNBEYAM02200687



Stamp Dispensary

Signature or Thumb Impression of the I.P. _____

Employer's Code No. _____

Branch Office _____

Ins. No. 5859231975

Date of First Certificate of Spell of Sickness or Disablement 18-Apr-2022

Name Mr. GHULAPPA TOLAKE S/W/D/o _____

Certified that I Have Examined you today and that in my opinion:

Attestation by Med. Officer	<p>(i)* You now need medical treatment attendance & abstention from work on medical ground by the reason of (diagnosis) _____</p> <p>(ii)* You have continued to need medical attendance & abstention from work on medical grounds upto and including this day by reason of (<u>Unspecified abdominal hernia without obstruction or gangrene</u>)</p> <p>(iii)* In my opinion you will be fit to resume work tomorrow/on _____</p>
-----------------------------	--

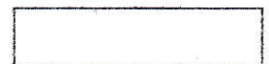
Any other remarks by the Medical Officer 26 april to 1 june needs abs, DOA: 18-Apr-2022, DOD: 25-Apr-2022

NOTE: The date of fitness must in no case be later than the third day after the date of the examination in case of First and Final Certificate.

Date: 02-Jun-2022

Signature _____

Insurance Medical Officer



Rubber Stamp

IMPORTANT:

Name in Block Letter DR. AMIT RAYAN GOUDAR

1. Any person who makes false statement or representation for the Purpose of obtaining benefit whether for himself/ some other person shall be punishable with imprisonment upto 6 months or fine upto Rs. 2,000/- of both.
2. This form should be completed and submitted WITHOUT DELAY to the appropriate Branch Office to escape penal deduction of benefit under regulation 64 read with regulation 99 of ESI (General) Regulation 1950.
3. Insured person must sign, with date, the claim form to avoid delay and inconvenience.



Print Date: 02-Jun-2022



ಕೆ.ಎಲ್.ಇ. ಸಂಸ್ಥೆಯು

ಡಾ. ಪ್ರಭಾಕರ ಕೋರೆ ಆಸ್ಪತ್ರೆ ಮತ್ತು
ವೈದ್ಯಕೀಯ ಸಂಶೋಧನಾ ಕೇಂದ್ರ

ನಿಹರು ನಗರ, ಬೆಳಗಾವಿ - 590 010, ಕರ್ನಾಟಕ



MEDICAL RESEARCH CENTRE
NEHRUNAGAR, BELAGAVI-590010.
KARNATAKA - INDIA

Phone : 0831 - 2473777 (16 Lines)
Fax : 0831 - 2470732
E-mail : medicaldirector@klehospital.org
Website : http://www.klehospital.org

KLES/Dr.PK/HOSP/MRD/MC/2022-23/958

DATE: 26-05-2022

MEDICAL CERTIFICATE

In continuation of previous medical Certificate, No KLES/Dr.PK/HOSP/MRD/MC/22-23/834 dated 19-05-2022 the patient by name GHULAPPA SIDDAVVA TOLAKE Aged 46 years (I.P.NO.1111041) under the care of Dr.V.M.Pattanshetti, a case of RIGHT INGUINAL ABSCESS for which he underwent INCISIONAL & DRAINAGE. He was advised rest from 13-05-2022 to 23-05-2022.

As per clinical examination he is further advised rest from 24-05-2022 to 31-05-2022 & to be reviewed after the rest period.

Endorsement as per consultation record dated 26-05-2022.

Sr. Medical Officer
KLES Dr. Prabhakar Kore Hospital
& MRC, Nehru Nagar, Belagavi



MRD/ank

To
The principal
HSIT Nidasoshi
From
Sujata Huddar
Asst professor
EEE department
HSIT Nidasoshi

Through HOD EEE department
Subject:- Regarding extension of maternity leave.

Respected Sir I Sujata Huddar working as
Asst professor in EEE department of this Institute
applying for extension of maternity leave from
07/10/2019 to till 31/12/2019. I will report back
to the duty on 01/01/2020. kindly do the needful
and sanction maternity leave.

Thanking you

yours faithfully

Sujata Huddar

Date:- 12/12/2019
09/10/2019
place:- Nidasoshi

Permitted
CSR/SS.

Je
12/12/19

ERT
Personnel file

12/12/2019

File's
to the Principal
for consideration
12/12/19



Godhinga Cross, SANKESHWAR.
Tal. Hukkeri, Dist. Belgavi

Dr. (Sou.) Surekha N. Haval

M.D., D.G.O. (BOM)
Reg. No. K.M.C. No. 34160

Dr. (Sou.) Supriya P. Haval

M.B.B.S., D.G.O.
Reg. No. K.M.C. No. 107893

Consultant Obstetrician & Gynaecologist

Ph.: 08333-273451, 273452

Date : 6/8/19

Certificate

This is to certify that Sujata Huddar (Tanodi)
has delivered a male baby on 9/7/2019 at 7.18 AM,
in this hospital.

(Signature)

Dr. Supriya P. Haval

M.B.B.S., D.G.O.
Consultant Obstetrician & Gynaecologist
Rukmini, Multispeciality
Hospital, Sankeshwar
KMC - 107893

Maternity Leave letter

7

To
The principal
HSIT Nidasoshi

From
Sujata Huddar
Asst professor
EEE Department
HSIT Nidasoshi

Through HOD EEE department
Subject :- Regarding Maternity leave

Respected Sir I Sujata Huddar working as
Asst. professor in EEE department of this institute
applying for maternity leave from 09/07/2019 to
till December 2019. I will report back to the duty
in the month of December 2019 tentatively. kindly
do the needful and sanction maternity leave.

Thanking you

yours faithfully

Sujata Huddar

Date :- 08/07/2019

Place :- Nidasoshi.

FWC's
To,
The Principal
for needful
[Signature] 9/7

[Signature]
10/7
Keep in G/B
for approval

Month: July - 2019

[illegible][illegible]

ATTENDANCE

SSD ESTC SRO Hubballi

REGISTER

14

Leave

Shriman Niranjan Jagadguru Pancham
HIRASUGAR INSTITUTE OF ATTENDANCE

[illegible]

Sri Nijalingeshwar Mahaswamigal Trust's
TECHNOLOGY NIDASOSHI.
REGISTER

Month: Sept 2019

16

[illegible]

Shriman Niranjan Jagadguru Pancham

Sri Nijalingeshwar Mahaswamikal Trust's

Month: Oct. 2019

18

Sl. No	Name of the Staff	Designation		1	2	3	4	5	6	7	8	9	10
1	Dr B V Madigond	Professor HOD											
2	sri S B Patil	Asst. Prof	9										
3	" V.B Dhare	"	6 1/2										
4	" S D Hirekadi	"	3										
5	smt. H R Z'inge	"	9										
6	sri M. P. Yanagimath	"	4 1/2										
7	" O B Heddurshetti	"	8										
8	" A U Neshti	"	4										
9	" P M Musoni	"	8										
10	" S S Birade	"	9 1/2										
4	" K B Negalur	"	11										
12	SMT. S G Huddar	"		Maternity Leave									

[illegible]

Shriman Niranjan Jagadguru Pancham
HIRASUGAR INSTITUTE OF ATTENDANCE

[illegible]

Sri Nijalingeshwar Mahaswamigal Trust's
TECHNOLOGY NIDASOSHI.
REGISTER

Month: November-2019

[illegible]

Shriman Niranjan Jagadguru Pancham
HIRASUGAR INSTITUTE OF ATTENDANCE

[illegible]

Sri Nijalingeswar Mahaswamigal Trust's
TECHNOLOGY NIDASOSHI.
REGISTER

Month: December

22

[illegible]

Caringly yours

BAJAJ Allianz



Bajaj Allianz General Insurance Company Ltd.
Bajaj Allianz House, Airport Road, Yerawada, Pune - 411006
GROUP PERSONAL ACCIDENT POLICY SCHEDULE
UIN: IRDA/NL-HLT/BAGI/P-P/V.I/151/13-14

Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc. :

Madiwale Arcade, 1st floor,, Hasmi Manzil, Club Road, , Belgaum-590001 Phone No :0831-4215475

Policy No. OG-21-1713-9902-00000002
 Product GROUP PERSONAL ACCIDENT
 Period of Insurance ☒ From 00:01:00 28-AUG-20 To 27-AUG-21 ☒ Midnight Policy Issued On 09-SEP-20
 Co-Insurance Details Own Share: 100%
 Insured Name HIRASUGAR INSTITUTE OF TECHNOLOGY
 Insured Address NIDASOSHI, , PO Area - NIDASOSHI, , BELGAUM, KARNATAKA - 591236
 Bank Details : No Details No Details
 GSTIN / UIN NA Place of Supply/State 29 - Karnataka
 Code/Name
 Company GST No : 29AABCB5730G1ZT Invoice No : 208324403/1
 Company PAN : AABCB5730G

Description	Sum Insured (Rs)
149 - Total members covered.	1,49,00,000.00

Highest Sum Insured 100000
 Additional** Loading @ 0 %
 Additional Discount@ 0 %
 Base Premium 7,577.00
 Special Discount 0
 Net Premium 7,577.00
 Terrorism** Surcharge 0
 Stamp Duty
 State GST (9%) 682.00
 Central GST (9%) 682.00
 Final Premium 8,941.00

*** All Premium figures are in Rupee.

On specific request and subject to terms and conditions, record of information exchange will be made available.

As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 30th September of the next financial year.

Scope of Cover As per the policy wording attached.
 Risk Covered Group Personal Accidental Policy. Risk class - II. Coverage - Basic cover.
 Special Perils As per the policy wordings attached.
 Special Exclusions As per the policy wordings attached.
 Subject to Clauses Cremation charges is covered up to 5000/-, Carriage of Dead body is covered up to 5000/-, Repatriation of Remains is covered up to 5000/-, Family Transportation is covered up to 5000/-, Children Education Bonus is covered up to maximum Rs. 5000 per child for maximum 2 children below age of 19 years, applicable in the event of an admissible Accidental Death claim.
 Warranties Basic:- Death + Children Education Bonus (Sum insured limited to 100 times of monthly salary or Rs. 1 lakhs whichever is Less).
 Special Conditions As per the policy wordings attached.
 Comments Previous Policy Number: OG-20-1713-9902-00000002. Beneficiary will be corporate.
 Bank RM Employee Code : Y

Agency Code BAG10028453 Channel Name : ML

Agency Name : SACHIN A BHADALE

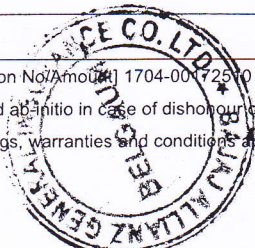
Contact No : 9035073212/0

Email - sachin24may@gmail.com

Premium Collection Details [Receipt No/Collection No/Amount] 1704-00172510 / 205457803 / Rs. 8,940.00 ,

*** If Premium paid through Cheque, the Policy is void ab initio in case of dishonour of Cheque

*** This policy is subject to the standard policy wordings, warranties and conditions applicable for this product in addition to any specific warranty or condition attached



Caringly yours

BAJAJ Allianz



This is the Digital Print and Original Policy would follow and the Original policy, duly countersigned, to be relied on for all legal purposes.
For & On Behalf of Bajaj Allianz General Insurance Company Ltd.



Authorized Signatory
null

Stamp
Duty Rs. 5

This document is digitally signed, hence counter signature / stamp is not required

Regd Office : Bajaj Allianz House, Airport Road, Yerwada Pune-411006 (India), A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113, Corporate Identification Number U66010PN2000PLC015329.

Consolidated Stamp Duty of Rs.5/- paid towards Insurance Stamps vide Challan No. MH013770432201920M Defaced No. 0000433117202021 Order No.CSD/22/2020/1432/2020 Order Dated 09.06.2020 Defaced date dated 09-JUN-20 timing 12:23:03 of General Stamp Office, Mumbai, India.

Principal Location : Golden Heights, 4th Floor, No.1/2, 59th C Cross, 4th M Block, Rajajinagar, BANGALORE - 560010 PH:080-67195000 | Services Accounting Code : 997133 - Accident and health insurance services. No reverse charge is payable on these services.

In case of any claim, please contact our 24 Hour Call centre at 1800-22-5858, 1800-102-5858 (Toll Free) / 91-020-30305858 (chargeable, add area code before this number in case of mobile call) or email us at 'Bagichelp@bajajallianz.co.in'.

205457803/-10028453/-/-

Prefix your area code if you are calling from a Mobile Device.

A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113, Corporate Identification Number U66010PN2000PLC015329.

Generated by sachin bhadale@general bajajallianz co in



ಕರ್ನಾಟಕ ಸರ್ಕಾರ
ಸಹಕಾರ ಇಲಾಖೆ

ಕ್ರ : ಎಆರ್‌9 ಆರ್‌ಎಸ್‌ಆರ್ /ಯುಒಜಿ/36108/2007-08

ಸಹಕಾರ ಸಂಘಗಳ ಸಹಾಯಕ ನಿಬಂಧಕರು
ಬೆಳಗಾವಿ ಉಪವಿಭಾಗ, ಬೆಳಗಾವಿ
ಇವರ ಕಾರ್ಯಾಲಯ
ತಾ : ೨೮-೦೬-೨೦೦೭.

ನೋಂದಣಿ ಪ್ರಮಾಣ ಪತ್ರ
(ಕ.ಸಾ.ಸಂ ಕಾಯ್ದೆ ಕಲಂ 6 (1) ರ ಕೆಳಗೆ ಕೊಡಲಾಗಿದೆ)

ಸಹಕಾರ ಸಂಘಗಳ ಸಹಾಯಕ ನಿಬಂಧಕರು, ಬೆಳಗಾವಿ ಉಪವಿಭಾಗ, ಬೆಳಗಾವಿ ಇವರು ಈ ಮೂಲಕ ಅಧಿಸೂಚಿಸುವುದೇನೆಂದರೆ,
ಹೀರಾ ಶುಗರ ಇನ್‌ಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ ಕೋ. ಆಪ್ ಕ್ರೆಡಿಟ್ ಸೊಸೈಟಿ ಲಿ,
ನಿಡಸೋಸಿ, ತಾ: ಹುಕ್ಕೇರಿ ಜಿ: ಬೆಳಗಾವಿ ಇದನ್ನು ಕರ್ನಾಟಕ ಸಹಕಾರ ಸಂಘಗಳ ಕಾಯ್ದೆ 1959 ರ ಕಲಂ 7 ರ ಅನ್ವಯ
ನೋಂದಣಿ ಮಾಡಲಾಗಿದೆ.



ಸ್ಥಳ : ಬೆಳಗಾವಿ

ದಿನಾಂಕ ೨೮-೦೬-೨೦೦೭

(ಕೆ.ವಿ.ಬೇದ್ರೆ)

ಸಹಕಾರ ಸಂಘಗಳ ಸಹಾಯಕ ನಿಬಂಧಕರು
ಬೆಳಗಾವಿ ಉಪವಿಭಾಗ ಬೆಳಗಾವಿ

ಹಿರಾಶುಗರ ಇನ್‌ಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ,

ನಿಡಸೋಸಿ. 591 236

ತಾ. ಹುಕ್ಕೇರಿ ಜಿ. ಬೆಳಗಾವಿ

ಸಾಲ ಬೇಡುವ ಅರ್ಜಿ

(ಅಲ್ಪಾವಧಿ ಹಾಗೂ ಮಧ್ಯಮಾವಧಿಯ)

ಗೆ,

ಅಧ್ಯಕ್ಷರು,

ಹಿರಾ ಶುಗರ ಇನ್‌ಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ

ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.

ಮಾನ್ಯರೇ,

ನಾನು ಶ್ರೀ/ಶ್ರೀಮತಿ ಬಿ.ನಿ.ಎ. ಅಂಜನಾ. ಕೀರ್ತಿ ಈ ಮೇಲಿನ ಸಂಘದ ಅ/ಬ ಸದಸ್ಯನಾಗಿದ್ದು ರೂ. 200,000/- ಗಳ ಸಾಲವನ್ನು ನನ್ನ ಗೃಹ ಕರ್ತವ್ಯದ ಉದ್ದೇಶಕ್ಕೆ ಮಂಜೂರ ಮಾಡಬೇಕೆಂದು ವಿನಂತಿಸಿಕೊಳ್ಳುತ್ತೇನೆ. ನಾನು ಈ ಹಣವನ್ನು ಬಡ್ಡಿಯೊಂದಿಗೆ 60 ತಿಂಗಳುಗಳಲ್ಲಿ ಹಿಂತಿರುಗಿಸುತ್ತೇನೆ. ನನ್ನ ಮೂಲ ವೇತನದ ಪ್ರತಿವಸ್ತು ಅರ್ಜಿಯೊಂದಿಗೆ ಲಗತ್ತಿಸಿರುತ್ತೇನೆ.

ಈ ಕೆಳಗಿನ ವ್ಯಕ್ತಿಗಳು ಜಂಟಿಯಾಗಿ ನನ್ನ ಸಾಲದ ಹಣ ಪೂರ್ತಿಯಾಗಿ ಮರುಪಾವತಿಯಾಗುವವರೆಗೆ ಜಾಮೀನುದಾರರಾಗಿರುತ್ತಾರೆ.

ಅ.ನಂ.	ಹೆಸರು	ಸಹಿ
1)	ಅಶ್ವಿನಿ. (ಅ.ನಿ.ಕೆ. ರಾಜೇಶ್)	<u>[Signature]</u>
2)	ಪ್ರಶಾಂತ. ದೀಪಾ. ಬಿ.ಎ.ಕೆ.ಎಂ.	<u>[Signature]</u>
3)	ನಿಖಿಲ್. ದೀಪಾ. ಬಿ.ಎ.ಕೆ.ಎಂ.	<u>[Signature]</u>

ಸ್ಥಳ:

ದಿನಾಂಕ: 08/11/22

[Signature]
ಇತಿ ತಮ್ಮ ವಿಶ್ವಾಸಿ,

ಕಮೀಟಿಯ ಶರಾ

ಅರ್ಜಿ ಸ್ವೀಕರಿಸಿದ ದಿನಾಂಕ _____ ಅರ್ಜಿ ಕ್ರಮಾಂಕ _____
ಮಂಜೂರಾದ ದಿನಾಂಕ _____ ಚೆಕ್ ನಂ. 088737 ಹಣ ಮುಟ್ಟುವ ಕೊನೆಯ ದಿನಾಂಕ _____
ಶರಾ : ಮಂಜೂರಾದ ಹಣ ರೂ. 200,000/- (ರೂಪಾಯಿ Two lakh only)
ಮಂಜೂರ ಮಾಡಲಾಗಿದೆ.
ಸಭೆ ನಂ. 08 ಠರಾವು ನಂ. 04 ದಿನಾಂಕ _____

ಗೌರವ ಕಾರ್ಯದರ್ಶಿ

ಹಿರಾಶುಗರ ಇನ್‌ಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.

[Signature]
ಅಧ್ಯಕ್ಷರು

ಕರಾರು ಶರಾ

ಗೆ,

ಅಧ್ಯಕ್ಷರು,

ಹಿರಾ ಶುಗರ ಇನ್‌ಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ

ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.

ಮಾನ್ಯರೇ,

ನಾನು ಶ್ರೀ/ಶ್ರೀಮತಿ Bravara Thyappa Rao ರೂ. 200,000/- (ರೂಪಾಯಿ Two lakh only) ನ್ನು ಸಾಲವಾಗಿ ಈ ಮೇಲೆ ಹೆಸರಿಸಿದ ಸಂಘದಿಂದ ಸ್ವೀಕರಿಸಿರುತ್ತೇನೆ. ಸಾಲಕ್ಕೆ ವಿಧಿಸಿರುವ ಬಡ್ಡಿ ದರ % ವನ್ನು ನಾನು ಸಂಘದ ನಿಯಮಾವಳಿಗಳಿಗೆ ಬದ್ಧನಾಗಿದ್ದು ಸಾಲವನ್ನು ಕಂತಿನ ರೂಪದಲ್ಲಿ 60 ದಿನಾಂಕದೊಳಗೆ ಮರುಪಾವತಿ ಮಾಡುವುದರಲ್ಲಿ ವಚನ ಬದ್ಧನಾಗಿರುತ್ತೇನೆ ನನ್ನ ಪ್ರತಿ ತಿಂಗಳ ಕಂತಿನ ಹಣವನ್ನು ನನ್ನ ಪ್ರತಿ ತಿಂಗಳ ವೇತನದಲ್ಲಿ ಕಡಿತಗೊಳಿಸಲು ಒಪ್ಪಿಗೆ ಪತ್ರ ಕೊಟ್ಟಿರುತ್ತೇನೆ ಹಾಗೂ ಅರ್ಜಿಯ ಹಿಂಬದಿಯಲ್ಲಿ ಸೂಚಿಸಿರುವ ನಿಯಮಾವಳಿಗೆ ಸಹ ಬದ್ಧನಾಗಿರುತ್ತೇನೆ ಅಂತಾ ಬರಕೊಟ್ಟ ಕರಾರು ಪತ್ರ.

ಸ್ಥಳ:

ದಿನಾಂಕ: 08/11/22

[Signature]
ಇತಿ ತಮ್ಮ ವಿಶ್ವಾಸಿ,

S.B. Kori

ಮಾ|| ಅಧ್ಯಕ್ಷರು,

ಖರ್ಚಿನ ಪಾವತಿ

ಹೀರಾಶುಗರ ಇನ್‌ಸ್ಟಿಟ್ಯೂಟ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ ಕೋ-ಆಪ್.

ಕ್ರೆಡಿಟ್ ಸೊಸಾಯಿಟಿ ಲಿ; ನಿಡಸೋಸಿ.

ನಾನು Shri. B. T. Kari

ಮು. _____ ಬರಕೊಡುವ ಪಾವತಿ ಏನೆಂದರೆ ನನಗೆ ನಿಮ್ಮ ಕಡೆಯಿಂದ
ಕೆಳಗೆ ಬರೆದ ಪ್ರಕಾರ ಹಣ ರೋಖಿ ಮುಟ್ಟಿತು.

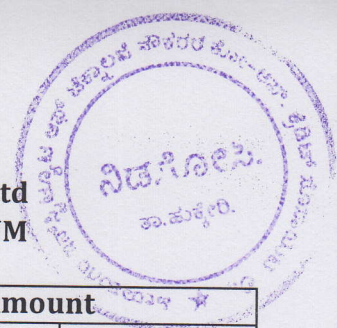
ತಪಶೀಲು	ರೂ.	ವೈಸೆ
ಸಾಲ ತಾ 08/11/22 ಬಾಂಡ ಪ್ರಕಾರ ಚೆಕ್ ನಂ. 088738 ಪ್ರಕಾರ ರೂ. ಶೇಅರ ಬಾಬತ ರೂ. ಶೇವು ಪರತ ಶೇಅರ ಪರತ ಇತರ ಅಕ್ಷರದಲ್ಲಿ ರೂ. <u>Two lacs only</u>	2,00,000	
ಒಟ್ಟು -	2,00,000	-

ತಾರೀಖು 08-11-2022

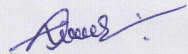
ಹಣ ಪಡೆದವರ ಸಹಿ

ಗೌರವ ಕಾರ್ಯದರ್ಶಿ

HIRASUGAR INSTITUTE EMPLOYEES Co- Op- Credit Society Ltd
Nidasoshi TAL HUKKERI
DIST.BELAGUM
BALANCE SHEET AS 31/03/2022



Liabilities	Amount		Assets	Amount	
Member Share Capital		5164600.00	Cash In hand	21283.00	21283.00
Funds		1182599.00	Bank Accounts		845935.00
Reserve Fund	1038707.00		BDCC Bank A/C no 10657	2141.00	
Co op Education	51439.00		KVG Bank No 00112	843794.00	
Charity Fund	1809.00				
Share Equilisation Fund	16031.00		Loans		6121872.00
Bad Debt Fund	53638.00		Member Salary Loans	6121872.00	
Dead Stock					
Depreciation Fund	9270.00				
Satakara nidhi	11705.00		Dead Stock	10305.00	10305.00
Deposits		19710.00			
Fixed Deposit	19710.00				
Other Paybles		43260.00			
Deposit Interest	13324.00				
Bonus	4000.00				
Audit Fees	6230.00				
Dividend	22964.00				
Dividend 19-20	14436.00				
Net Profit		571532.00			
21-22	571532.00				
Grand Total		6999395.00	Grand Total		6999395.00


 Secretary

Hirasugar Institute of Technology
 Employees Co-op Credit Society Ltd,
 Nidasoshi, Tq.: Hukkeri, Dt.: Belagavi.

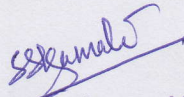

 Chairman

Hirasugar Institute of Technology
 Employees Co-op Credit Society Ltd,
 Nidasoshi, Tq.: Hukkeri, Dt.: Belagavi.

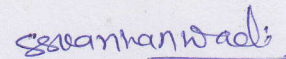
Board of Directors:



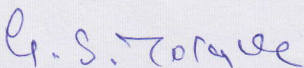
Hirasugar Institute of Technology
 Employees Co-op Credit Society Ltd,
 Nidasoshi, Tq.: Hukkeri, Dt.: Belagavi.



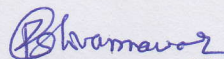
Hirasugar Institute of Technology
 Employees Co-op Credit Society Ltd,
 Nidasoshi, Tq.: Hukkeri, Dt.: Belagavi.



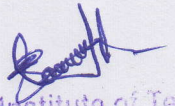
Hirasugar Institute of Technology
 Employees Co-op Credit Society Ltd,
 Nidasoshi, Tq.: Hukkeri, Dt.: Belagavi.



Hirasugar Institute of Technology
 Employees Co-op Credit Society Ltd,
 Nidasoshi, Tq.: Hukkeri, Dt.: Belagavi.

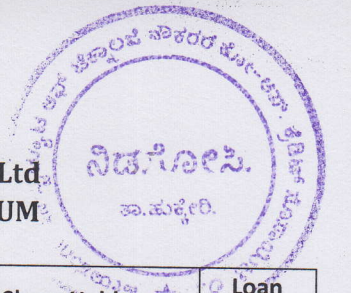


Hirasugar Institute of Technology
 Employees Co-op Credit Society Ltd,
 Nidasoshi, Tq.: Hukkeri, Dt.: Belagavi.



Hirasugar Institute of Technology
 Employees Co-op Credit Society Ltd,
 Nidasoshi, Tq.: Hukkeri, Dt.: Belagavi.

HIRASUGAR INSTITUTE EMPLOYEES Co- Op- Credit Society Ltd
Nidasoshi TAL HUKKERI
DIST.BELAGUM
LOAN BALANCE SHEET AS ON 31/03/2022



Sl.N	A/C NO	Name of the Share Holder	Loan Balance	Sl.N	A/C NO	Name of the Share Holder	Loan Balance
1.	2	Shri. Shrishail Babu Chougala	183970	41.	90	Shri. Kadappa Kankanwadi	43526
2.	3	Shri. S M Badakar	133644	42.	103	Shri. Pramod Subhash Desai	80391
3.	4	Shri.Vishwanath Hiremath	182947	43.	104	Smt. Sushila Shankar Kankanwadi	176354
4.	5	Shri Nijalingayya Achari	90847	44.	105	Shri. Anand Kedari Badakar	136882
5.	6	Shri Basappa Koli	98350	45.	106	Shri Vittal H Kumbar	75902
6.	7	Shri Rajashekar Chinchani	92068	46.	107	Shri Virupakshi M Bhumannavar	150344
7.	9	Shri. Rajeshwar Shivannavar	31865	47.	109	Shri. Mohan Gholapa	181149
8.	11	Shri Irappa Bhimappa Madyali	123882	48.	110	Shri.Chetan Jodatti	108752
9.	12	Shri Paresch Dundappa Pimpalgavi	139476	49.	116	Shri. Prakash Mugali	10186
10.	14	Shri Dundappa Badiger	155296	50.	117	Shri Satayya Kamate	177770
11.	15	Shri Rudrappa Shivalingappa Kagi	162563	51.	122	Shri Mallikarjun Padmannavar	7458
12.	16	Shri Ghulappa Tolake	114172	52.	123	Shri.Shreemant Alagouda Patil	59338
13.	17	Shri Chandrakant Basaprabhu Patil	105781	53.	124	Shri. Girimallappa Dhodagoudar	8987
14.	18	Shri Suresh Balakrishatna Shinde	181678	54.	126	Shri Dayanand Konakeri	56033
15.	19	Shri Marthand Kadalagi	125453	55.	127	Shri. S I Shivayogimath	112586
16.	20	Shri.Tatyasaheb Patil	185824	56.	128	Shri. Shashikant Walki	134673
17.	21	Shri.Mallikarjun Yashavanth	144046	57.	129	Shri.Mahatesh Kurni	17614
18.	23	Shri Annappa Huddar	48448	58.	130	Shri Mahadev Sankapal	88765
19.	31	Shri Appasaheb S Kankanavadi	59470	Total Loan Balance as on 31-03-2022: 6121872/-			
20.	32	Shri.Niranjan Wani	135256				
21.	33	Shri Bharamappa Dundappa Gurav	146090				
22.	37	Shri. S S Dange	10124				
23.	38	Shri Virupakshi Tippanna Yaduri	95756				
24.	40	Shri. V K Badakar	158398				
25.	41	Shri Shivanand Babu Sarawadi	137304				
26.	47	Shri Rajeshwar B Chinchani	106102				
27.	48	Shri Mahadev Dundappa Banti	108474				
28.	55	Shri. Dayanand Kamate	140646				
29.	60	Shri.Basavaraj Siddappa Sooji	36410				
30.	62	Shri Ashok Dundappa Kumbar	139308				
31.	64	Shri.Veerbhadrha Nijappa Biskop	27495				
32.	67	Shri Gangadhar Mallappa Hirekodi	50279				
33.	72	Shri.Satyappa Shankar Jodatti	98075				
34.	73	Shri.Duradundi Mallappa Madihalli	70263				
35.	74	Shri Mahesh Basagouda Patil	42770				
36.	76	Shri . Manjunath S Hanagadakar	111409				
37.	84	Shri. Mahesh Doddamani	132921				
38.	86	Shri Chidanand Shankar Sooji	104384				
39.	88	Shri Darshan Nilkanthrao Inamdar	186145				
40.	89	Shri Shivanand Kalayi	97773				

Hon ble SECRETARY

Hirasugar Institute of Technology
Employees Co-op Credit Society Ltd,
Nidasoshi, Tq: Hukkeri, Dt.: Belagavi.

PRESIDENT

Hirasugar Institute of Technology
Employees Co-op Credit Society Ltd,
Nidasoshi, Tq: Hukkeri, Dt.: Belagavi.

ಹಿರಾಶುಗರ ಇನ್‌ಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ,
ನಿಡಸೋಸಿ. 591 236 ತಾ. ಹುಕ್ಕೇರಿ ಜಿ. ಬೆಳಗಾವಿ

ಸಾಲ ಬೇಡುವ ಅರ್ಜಿ
(ಅಲ್ಪಾವಧಿ ಹಾಗೂ ಮಧ್ಯಮಾವಧಿಯ)

ಗೆ,

ಅಧ್ಯಕ್ಷರು,

ಹಿರಾ ಶುಗರ ಇನ್‌ಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ

ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.

ಮಾನ್ಯರೇ,

ನಾನು ಶ್ರೀ/ಶ್ರೀಮತಿ ಸುರೇಶ್ ಬಾಳಕೃಷ್ಣ ಶಿಂದೆ ಈ ಮೇಲಿನ ಸಂಘದ ಅ/ಬ
 ಸದಸ್ಯನಾಗಿದ್ದು, ರೂ. 1,90,000/- ಗಳ ಸಾಲವನ್ನು ನನ್ನ ಗೃಹ ಕರ್ತವ್ಯದ ಉದ್ದೇಶಕ್ಕೆ ಮಂಜೂರ ಮಾಡಬೇಕೆಂದು
 ವಿನಂತಿಸಿಕೊಳ್ಳುತ್ತೇನೆ. ನಾನು ಈ ಹಣವನ್ನು ಬಡ್ಡಿಯೊಂದಿಗೆ 60 ತಿಂಗಳುಗಳಲ್ಲಿ ಹಿಂತಿರುಗಿಸುತ್ತೇನೆ. ನನ್ನ ಮೂಲ
 ವೇತನದ ಪ್ರತಿವನ್ನು ಅರ್ಜಿಯೊಂದಿಗೆ ಲಗತ್ತಿಸಿರುತ್ತೇನೆ.

ಈ ಕೆಳಗಿನ ವ್ಯಕ್ತಿಗಳು ಜಂಟಿಯಾಗಿ ನನ್ನ ಸಾಲದ ಹಣ ಪೂರ್ತಿಯಾಗಿ ಮರುಪಾವತಿಯಾಗುವವರೆಗೆ ಜಾಮೀನುದಾರರಾಗಿರುತ್ತಾರೆ.

ಅ.ನಂ.	ಹೆಸರು	ಸಹಿ
1)	ಮಲ್ಲಿಕಾರ್ಜುನ ಬಸವಾಚಾರಿ ಯಶವಂತ	
2)	ಲಾಡೇಬ್ ಬಸವಾಚಾರಿ ಸಂಕೇತಾಚಾರಿ	
3)	ಸೇತೇಶ್ ಹೋಡೆ ಶಂಕರ ಜೋಶಿ	

ಸ್ಥಳ:

ದಿನಾಂಕ: 16/12/21

ಇತಿ ತಮ್ಮ ವಿಶ್ವಾಸಿ,

ಕಮೀಟಿಯ ಶರಾ

ಅರ್ಜಿ ಸ್ವೀಕರಿಸಿದ ದಿನಾಂಕ _____ ಅರ್ಜಿ ಕ್ರಮಾಂಕ _____
 ಮಂಜೂರಾದ ದಿನಾಂಕ _____ ಚೆಕ್ ನಂ. _____ ಹಣ ಮುಟ್ಟುವ ಕೊನೆಯ ದಿನಾಂಕ _____
 ಶರಾ : ಮಂಜೂರಾದ ಹಣ ರೂ. 2,90,000 (ರೂಪಾಯಿ One Lakh ninety thousand only)
 ಮಂಜೂರ ಮಾಡಲಾಗಿದೆ.
 ಸಭೆ ನಂ. 09 ಶರಾವು ನಂ. 03 ದಿನಾಂಕ _____

ಗೌರವ ಕಾರ್ಯದರ್ಶಿ

ಅಧ್ಯಕ್ಷರು

ಹಿರಾಶುಗರ ಇನ್‌ಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.

ಕರಾರು ಶರಾ

ಗೆ,

ಅಧ್ಯಕ್ಷರು,

ಹಿರಾ ಶುಗರ ಇನ್‌ಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ

ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.

ಮಾನ್ಯರೇ,

ನಾನು ಶ್ರೀ/ಶ್ರೀಮತಿ ಸುರೇಶ್ ಬಾಳಕೃಷ್ಣ ಶಿಂದೆ ರೂ. 1,90,000/-
 (ರೂಪಾಯಿ One Lakh ninety thousand only) ನ್ನು ಸಾಲವಾಗಿ ಈ ಮೇಲೆ
 ಹೆಸರಿಸಿದ ಸಂಘದಿಂದ ಸ್ವೀಕರಿಸಿರುತ್ತೇನೆ. ಸಾಲಕ್ಕೆ ವಿಧಿಸಿರುವ ಬಡ್ಡಿ ದರ % ವನ್ನು ನಾನು ಸಂಘದ ನಿಯಮಾವಳಿಗಳಿಗೆ ಬದ್ಧನಾಗಿದ್ದು, ಸಾಲವನ್ನು
 ಕಂತಿನ ರೂಪದಲ್ಲಿ 60 ದಿನಾಂಕದೊಳಗೆ ಮರುಪಾವತಿ ಮಾಡುವವರಲ್ಲಿ ವಚನ ಬದ್ಧನಾಗಿರುತ್ತೇನೆ. ನನ್ನ ಪ್ರತಿ ತಿಂಗಳ ಕಂತಿನ
 ಹಣವನ್ನು ನನ್ನ ಪ್ರತಿ ತಿಂಗಳ ವೇತನದಲ್ಲಿ ಕಡಿತಗೊಳಿಸಲು ಒಪ್ಪಿಗೆ ಪತ್ರ ಕೊಟ್ಟಿರುತ್ತೇನೆ ಹಾಗೂ ಅರ್ಜಿಯ ಹಿಂಬದಿಯಲ್ಲಿ ಸೂಚಿಸಿರುವ
 ನಿಯಮಾವಳಿಗೆ ಸಹ ಬದ್ಧನಾಗಿರುತ್ತೇನೆ ಅಂತಾ ಬರಕೊಟ್ಟ ಕರಾರು ಪತ್ರ.

ಸ್ಥಳ: ನಿಡಸೋಸಿ

ದಿನಾಂಕ: 16/12/2021

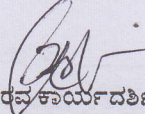
ಇತಿ ತಮ್ಮ ವಿಶ್ವಾಸಿ,


Suresh.B. Shinde

ಈ ಕೆಳಗೆ ಜಂಟಿಯಾಗಿ ಸಹಿ ಮಾಡಿರುವ ಜಾಮೀನುದಾರರಾದ ನಾವುಗಳು ಸಂಘದ ಎಲ್ಲ ನಿಯಮಾವಳಿಗಳಿಗೆ ಬದ್ಧರಾಗಿರುತ್ತೇವೆ.

ಜಾಮೀನುದಾರರ ಸಹಿ

ಅ.ನಂ.	ಹೆಸರು	ಸಹಿ
1)	ತುಲ್ಲರಾಬು ಬಸವಾಣ್, ಯಶವಂತ್	
2)	ಯಾದೇವ ಬರವಾಣ್ ಸಂತೆತಾಳ್ಕೆ	
3)	ನೀಲೇಶ್, ಶಂಕರ್, ಜೋಡಣ್ಕೆ	


ಗೌರವ್ ಕಾರ್ಯದರ್ಶಿ


ಅಧ್ಯಕ್ಷರು

ಹಿರಾ ಶುಗರ ಇನ್ಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.

- ನಿಯಮಾವಳಿಗಳು -

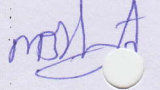
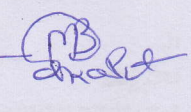
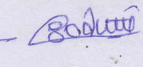
- 1) ಸಾಲ ಪಡೆದುಕೊಳ್ಳುವ ಸದಸ್ಯನು ಸಂಘದ ಸದಸ್ಯನಾಗಬೇಕು.
- 2) ಸಂಘದ ಸದಸ್ಯನು ಕನಿಷ್ಠ ಪಕ್ಷ 100/- ಗಳ- ಶೇರ ಹೊಂದಿರಬೇಕು.
- 3) ಸಾಲದ ಮಿತಿಯನ್ನು ಸದಸ್ಯನ ಸಂಬಳದ ಆಧಾರದ ಮೇಲೆ ಸಾಲ ಮಂಜೂರ ಮಾಡುವ ಕಮೀಟಿ ಸದಸ್ಯರ ನಿಗದಿಪಡಿಸುವರು.
- 4) ಸಾಲದ ಅವಧಿ ಗರಿಷ್ಠ 48-ತಿಂಗಳುಗಳವರೆಗೆ.
- 5) ಸಾಲವನ್ನು ಪಡೆದುಕೊಂಡ ಸದಸ್ಯರು ಸಾಲವನ್ನು ಪೂರ್ತಿ ತುಂಬುವವರೆಗೆ ಮರಳಿ ಸಾಲವನ್ನು ಕೊಡುವದಿಲ್ಲ.
- 6) ನಾನು ಸಂಘದ ಪೋಟ ನಿಯಮಾವಳಿಗಳಿಗನುಸರಿಸಿ ನಡೆದುಕೊಳ್ಳಲು ಒಪ್ಪಿರುತ್ತೇನೆ.
- 7) ಸಂಬಳ ಪ್ರಮಾಣ ಪತ್ರ ಹಾಗೂ ರೂ. 20/- ಅಥವಾ 50/- ರ ಮುಚ್ಚಳಿಕೆ ಪತ್ರವನ್ನು ನಿಯಮಾವಳಿಗನುಸಾರವಾಗಿ ಸಲ್ಲಿಸುವದಾಗಬೇಕು.
- 8) ಸಾಲಗಾರನು ಸರಿಯಾದ ಕಂತುಗಳಿಂದ ಸಾಲ ತುಂಬದಿದ್ದಲ್ಲಿ ಜಾಮೀನುದಾರರಾದ ನಾವು ಜವಾಬ್ದಾರಿದ್ದು, ಸದರಿ ಸಾಲದ ಮೊತ್ತ ಹಾಗೂ ಬಡ್ಡಿ ಭರಣಾ ಮಾಡಲು ನಮ್ಮ ವೇತನಗಳಲ್ಲಿ ಸಾಲ ಮುಟ್ಟುವವರೆಗೆ ಕಡಿತ ಮಾಡಲು ಸಂಪೂರ್ಣ ಒಪ್ಪಿಕೊಂಡಿರುತ್ತೇವೆ.
- 9) ಬ-ಕ್ಲಾಸ್ ಸಾಲಗಾರರಿಗೆ ಸಂಘದ ಯಾವುದೇ ಚಟುವಟಿಕೆಗಳಲ್ಲಿ ಯಾವುದೇ ತರಹದ ಹಕ್ಕು ಇರುವದಿಲ್ಲ.

ಸ್ಥಳ: ನಿಡಸೋಸಿ

ದಿನಾಂಕ: 14/12/2024

ಸಾಲಗಾರನ ಸಹಿ

ಜಾಮೀನುದಾರರ ಹೆಸರು ಮತ್ತು ಸಹಿ:

1. ತುಲ್ಲರಾಬು ಬಸವಾಣ್, ಯಶವಂತ್ — 
2. ಯಾದೇವ ಬರವಾಣ್ ಸಂತೆತಾಳ್ಕೆ — 
- 3) ನೀಲೇಶ್, ಶಂಕರ್, ಜೋಡಣ್ಕೆ — 



ಹಿರಾಸುಗರ ತಾಂತ್ರಿಕ ಮಹಾವಿದ್ಯಾಲಯ, ನಿಡಸೋಸಿ
Hirasugar Institute of Technology
Nidasoshi - 591 236, Karnataka State

Prof. S. C. Kamate Ph. D.
Principal

Phone : (08333) 278887

Fax : (08333) 278886

Ref. No: HSIT/NDS/Account/2021-22/ 2166

Date : 17 DEC 2021

SALARY CERTIFICATE

This is to certify that Sri. Suresh Balakrishatna Shinde is working as a 'Driver' in this Institute. His salary for the month of Novemeber-2021 is as under:

Payment		Deductions:	
Basic	7275	P.F.	1458
DA (62%)	4511	L.I.C.	651
HRA (5%)	364	Share Amount & Loan	4100
	0	ESIC	92
Total Payment	12,150	Total Deduction	6,301
Deductions	6,301		
Net Payment	5,849		

This certificate is issued on the request of the employee for availing Society/ Bank loan.


PRINCIPAL
Hirasugar Institute of Technology
NIDASOSHI - 591 236



सत्यमेव जयते

INDIA NON JUDICIAL

Government of Karnataka

Rs. 20

e-Stamp

Certificate No.

: IN-KA81637695712443T

Certificate Issued Date

: 16-Dec-2021 12:20 PM

Account Reference

: NONACC (FI)/ kaksfcl08/ NIDASOSHI/ KA-BL

Unique Doc Reference

: SUBIN-KAKAKSFCL0809994842212188T

Purchased by

: SURESH BALAKRISHNA SHINDE

Description of Document

: Article 12 Bond

Description

: LOAN PURPOSE

Consideration Price (Rs.)

: 0
(Zero)

First Party

: SURESH BALAKRISHNA SHINDE

Second Party

: HIT EMPLOYEES CO OP CR SOC NIY NIDASOSHI

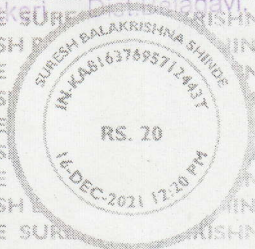
Stamp Duty Paid By

: SURESH BALAKRISHNA SHINDE

Stamp Duty Amount (Rs.)

: 20
(Twenty only)

सत्यमेव जयते



Statutory Alert:

1. The authenticity of this Stamp certificate should be verified at www.shclstamp.com or using e-Stamp Mobile App of Stock Holding. Any discrepancy in the details on this Certificate and as available on the website / Mobile App renders it invalid.
2. The onus of checking the legitimacy is on the users of the certificate.
3. In case of any discrepancy please inform the Competent Authority.

Sir

ಮೆ|| ಅಧ್ಯಕ್ಷರು,

ಖರ್ಚಿನ ಪಾವತಿ

ಹೀರಾಶುಗರ ಇನ್‌ಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ ಕೋ-ಆಪ್.

ಕೆ.ಡಬ್ಲ್ಯು ಸೊಸಾಯಿಟಿ ಲಿ; ನಿಡಸೋಸಿ.

ನಾನು

ಮು. ಬರಕೊಡುವ ಪಾವತಿ ಏನೆಂದರೆ ನನಗೆ ನಿಮ್ಮ ಕಡೆಯ ಕೆಳಗೆ ಬರೆದ ಪ್ರಕಾರ ಹಣ ರೋಖ ಮುಟ್ಟಿತು.

ತಪಶೀಲು	ರೂ.
ಸಾಲ ತಾ 16/12/21 ಬಾಂಡ ಪ್ರಕಾರ ಚೆಕ್ ನಂ. 075986 ಪ್ರಕಾರ ರೂ. ಶೇಖರ ಬಾಬತ ರೂ. ಶೇಖರ ಪರತ ಶೇಖರ ಪರತ ಇತರ ಅಕ್ಷರದಲ್ಲಿ ರೂ. One Lakh Ninety Thousand only ಒಟ್ಟು -	1,90,000 1,90,000

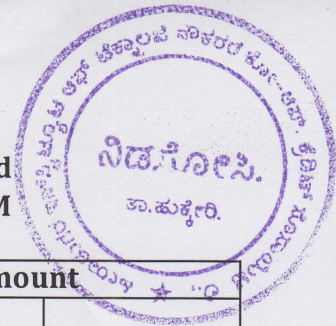
ತಾರೀಖು 16-12-2021
ಹಣ ವಹಿದವರ ಸಹಿ

ಗೌರವಾನ್ವಿತರಾಗಿ


HIRASUGAR INSTITUTE EMPLOYEES Co- Op- Credit Society Ltd
Nidasoshi TAL HUKKERI


DIST.BELAGUM

BALANCE SHEET AS 31/03/2023




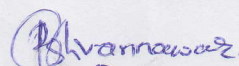
Liabilities	Amount		Assets	Amount	
Member Share Capital		5571000.00	Cash In hand	0.00	0.00
Funds		1310391.00	Bank Accounts		1209345.00
Reserve Fund	1208336.00		BDCC Bank A/C no 10657	2141.00	
Co op Education	8572.00		KVG Bank No 00112	1207204.00	
Charity Fund	1809.00				
Share Equilisation Fund	16031.00		Loans		6278781.00
Bad Debt Fund	53638.00		Member Salary Loans	6278781.00	
Dead Stock					
Depriciation Fund	10300.00				
Satakara nidhi	11705.00		Dead Stock	10305.00	10305.00
Deposits		19710.00			
Fixed Deposit	19710.00				
Other Paybles		43260.00			
Deposit Interest	13324.00				
Bonus	4000.00				
Audit Fees	7500.00				
Dividend 19-20	14436.00				
ITR Filing Fees	4000.00				
Net Profit		554070.00			
22-23	554070.00				
Grand Total		7498431.00	Grand Total		7498431.00


Secretary

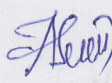

Chairman

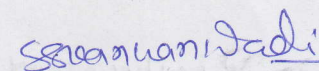
Board of Directors:

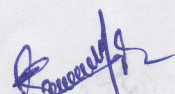

Hirasugar Institute of Technology
Employees Co-op Credit Society Ltd,
Nidasoshi, Tq.: Hukkeri, Dt.: Belagavi.


Hirasugar Institute of Technology
Employees Co-op Credit Society Ltd,
Nidasoshi, Tq.: Hukkeri, Dt.: Belagavi.

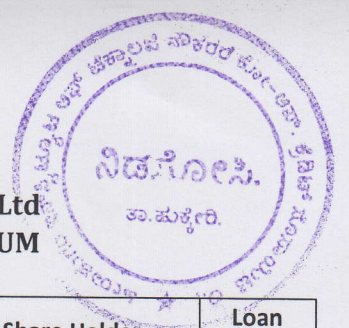

Hirasugar Institute of Technology
Employees Co-op Credit Society Ltd,
Nidasoshi, Tq.: Hukkeri, Dt.: Belagavi.


Hirasugar Institute of Technology
Employees Co-op Credit Society Ltd,
Nidasoshi, Tq.: Hukkeri, Dt.: Belagavi.


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Employees Co-op Credit Society Ltd,
Nidasoshi, Tq.: Hukkeri, Dt.: Belagavi.


Hirasugar Institute of Technology
Employees Co-op Credit Society Ltd,
Nidasoshi, Tq.: Hukkeri, Dt.: Belagavi.

HIRASUGAR INSTITUTE EMPLOYEES Co- Op- Credit Society Ltd
Nidasoshi TAL HUKKERI
DIST.BELAGUM
LOAN BALANCE SHEET AS ON 31/03/2023



Sl.N	A/C NO	Name of the Share Holder	Loan Balance	Sl.N	A/C NO	Name of the Share Holder	Loan Balance
1.	2	Shri. Shrishail Babu Chougala	148620	41.	90	Shri. Kadappa Kankanwadi	9775
2.	3	Shri. S M Badakar	187715	42.	100	Shri Arun Sankeshwari	92370
3.	4	Shri.Vishwanath Hiremath	125563	43.	103	Shri. Pramod Subhash Desai	34540
4.	5	Shri Nijalingayya Achari	170630	44.	104	Smt. Sushila Shankar Kankanwadi	141602
5.	6	Shri Basappa Koli	188403	45.	105	Shri. Anand Kedari Badakar	181264
6.	7	Shri Rajashekar Chinchani	101365	46.	106	Shri Vittal H Kumbar	128339
7.	9	Shri. Rajeshwar Shivannavar	81046	47.	107	Shri Virupakshi M Bhumannavar	112616
8.	11	Shri Irappa Bhimappa Madyali	127179	48.	110	Shri.Chetan Jodatti	177206
9.	12	Shri Paresh Dundappa Pimpalgavi	179227	49.	116	Shri. Prakash Mugali	00
10.	14	Shri Dundappa Badiger	169913	50.	117	Shri Satayya Kamate	142730
11.	15	Shri Rudrappa Shivalingappa Kagi	133569	51.	122	Shri Mallikarjun Padmannavar	171495
12.	16	Shri Ghulappa Tolake	93686	52.	123	Shri.Shreemant Alagouda Patil	181254
13.	17	Shri Chandrakant Basaprabhu Patil	70897	53.	124	Shri. Girimallppa Dhodagoudar	00
14.	18	Shri Suresh Balakrishatna Shinde	149148	54.	126	Shri Dayanand Konakeri	40180
15.	19	Shri Marthand Kadalagi	174742	55.	128	Shri. Shashikant Walki	94446
16.	20	Shri.Tatyasaheb Patil	150299	56.	129	Shri.Mahatesh Kurni	14965
17.	21	Shri.Mallikarjun Yashavanth	115136	57.	130	Shri Mahadev Sankapal	68714
18.	23	Shri Annappa Huddar	31111	58.	132	Smt. Sunita Shivaputrappa Malaj	163671
19.	31	Shri Appasaheb S Kankanavadi	18617	Total Loan Balance as on 31-03-2023: 62,78,781/-			
20.	32	Shri.Niranjan Wani	151675				
21.	33	Shri Bharamappa Dundappa Gurav	171282				
22.	37	Shri. S S Dange	00				
23.	38	Shri Virupakshi Tippanna Yaduri	76833				
24.	40	Shri. V K Badakar	180198				
25.	41	Shri Shivanand Babu Sarawadi	97396				
26.	47	Shri Rajeshwar B Chinchani	184550				
27.	48	Shri Mahadev Dundappa Banti	68756				
28.	55	Shri. Dayanand Kamate	171535				
29.	60	Shri.Basavaraj Siddappa Sooji	39498				
30.	62	Shri Ashok Dundappa Kumbar	158269				
31.	64	Shri.Veerbhadrha Nijappa Biskop	105620				
32.	67	Shri Gangadhar Mallappa Hirekodi	21772				
33.	72	Shri.Satyappa Shankar Jodatti	103428				
34.	73	Shri.Duradundi Mallappa Madihalli	43846				
35.	74	Shri Mahesh Basagouda Patil	33135				
36.	76	Shri . Manjunath S Hanagadakar	48124				
37.	84	Shri. Mahesh Doddamani	96177				
38.	86	Shri Chidanand Shankar Sooji	85670				
39.	88	Shri Darshan Nilkanthrao Inamdar	129068				
40.	89	Shri Shivanand Kalayi	139916				

Signature
Hon'ble SECRETAR'
Hirasugar Institute of Technology
Employees Co-op Credit Society Ltd,
Nidasoshi, Tq. Hukkeri, DL: Belagavi.

Signature
PRESIDENT
Hirasugar Institute of Technology
Employees Co-op Credit Society Ltd,
Nidasoshi, Tq. Hukkeri, DL: Belagavi.

ಹಿರಾಶುಗರ ಇನ್‌ಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ,
ನಿಡಸೋಸಿ. 591 236 ತಾ. ಹುಕ್ಕೇರಿ ಜಿ. ಬೆಳಗಾವಿ

ಸಾಲ ಬೇಡುವ ಅರ್ಜಿ
(ಅಲ್ಪಾವಧಿ ಹಾಗೂ ಮಧ್ಯಮಾವಧಿಯ)

ಗೆ,
 ಅಧ್ಯಕ್ಷರು,
 ಹಿರಾ ಶುಗರ ಇನ್‌ಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ
 ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.
 ಮಾನ್ಯರೇ,

ನಾನು ಶ್ರೀ/ಶ್ರೀಮತಿ ನಿರಂಜನಾ ಎಸ್. ದೊಡ್ಡಾ ಈ ಮೇಲಿನ ಸಂಘದ ಅ/ಬ
 ಸದಸ್ಯನಾಗಿದ್ದು ರೂ. 2,00,000/- ಗಳ ಸಾಲವನ್ನು ನನ್ನ ಗೃಹ ಕರ್ತವ್ಯದ ಉದ್ದೇಶಕ್ಕೆ ಮಂಜೂರ ಮಾಡಬೇಕೆಂದು
 ವಿನಂತಿಸಿಕೊಳ್ಳುತ್ತೇನೆ. ನಾನು ಈ ಹಣವನ್ನು ಬಡ್ಡಿಯೊಂದಿಗೆ 60 ತಿಂಗಳುಗಳಲ್ಲಿ ಹಿಂತಿರುಗಿಸುತ್ತೇನೆ. ನನ್ನ ಮೂಲ
 ವೇತನದ ಪತ್ರವನ್ನು ಅರ್ಜಿಯೊಂದಿಗೆ ಲಗತ್ತಿಸಿರುತ್ತೇನೆ.

ಈ ಕೆಳಗಿನ ವ್ಯಕ್ತಿಗಳು ಜಂಟಿಯಾಗಿ ನನ್ನ ಸಾಲದ ಹಣ ಪೂರ್ತಿಯಾಗಿ ಮರುಪಾವತಿಯಾಗುವವರೆಗೆ ಜಾಮೀನುದಾರರಾಗಿರುತ್ತಾರೆ.

ಅ.ನಂ.	ಹೆಸರು	ಸಹಿ
1	ಅಶೋಕ ನರಸಿಂಹ ರಾವ್	ಎ.ವಿ. ಕೊಂಬಾರ
2	ಅಶ್ವತ್ಥ. ಅಶ್ವತ್ಥ. ರಾಜ್	
3	ಅಶ್ವತ್ಥ. ಶಾಂತ. ಗಿ.ಇ.ಡಿ	ಶಾಂತ

ಸ್ಥಳ:

ದಿನಾಂಕ: 17/05/20

no nathanna
 ಇತಿ ತಮ್ಮ ವಿಶ್ವಾಸಿ,

ಕಮೀಟಿಯ ಶರಾ

ಅರ್ಜಿ ಸ್ವೀಕರಿಸಿದ ದಿನಾಂಕ _____ ಅರ್ಜಿ ಕ್ರಮಾಂಕ _____
 ಮಂಜೂರಾದ ದಿನಾಂಕ _____ ಚೆಕ್ ನಂ. 088778 ಹಣ ಮುಟ್ಟುವ ಕೊನೆಯ ದಿನಾಂಕ _____
 ಶರಾ : ಮಂಜೂರಾದ ಹಣ ರೂ. 2,00,000/- (ರೂಪಾಯಿ Two Lakh only)
 ಮಂಜೂರ ಮಾಡಲಾಗಿದೆ.
 ಸಭೆ ನಂ. 02 ಕರಾವಳಿ ನಂ. 09 ದಿನಾಂಕ _____

ಗೌರವ ಕಾರ್ಯದರ್ಶಿ

ಅಧ್ಯಕ್ಷರು

ಹಿರಾಶುಗರ ಇನ್‌ಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.

ಕರಾರು ಶರಾ

ಗೆ,
 ಅಧ್ಯಕ್ಷರು,
 ಹಿರಾ ಶುಗರ ಇನ್‌ಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ
 ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.

ಮಾನ್ಯರೇ,

ನಾನು ಶ್ರೀ/ಶ್ರೀಮತಿ ನಿರಂಜನಾ ಎಸ್. ದೊಡ್ಡಾ ರೂ. 2,00,000
 (ರೂಪಾಯಿ Two Lakh only) ನ್ನು ಸಾಲವಾಗಿ ಈ ಮೇಲೆ
 ಹೆಸರಿಸಿದ ಸಂಘದಿಂದ ಸ್ವೀಕರಿಸಿರುತ್ತೇನೆ. ಸಾಲಕ್ಕೆ ವಿಧಿಸಿರುವ ಬಡ್ಡಿ ದರ % ವನ್ನು ನಾನು ಸಂಘದ ನಿಯಮಾವಳಿಗಳಿಗೆ ಬದ್ಧನಾಗಿದ್ದು, ಸಾಲವನ್ನು
 ಕಂತಿನ ರೂಪದಲ್ಲಿ 60 ದಿನಾಂಕದೊಳಗೆ ಮರುಪಾವತಿ ಮಾಡುವದರಲ್ಲಿ ವಚನ ಬದ್ಧನಾಗಿರುತ್ತೇನೆ ನನ್ನ ಪ್ರತಿ ತಿಂಗಳ ಕಂತಿನ
 ಹಣವನ್ನು ನನ್ನ ಪ್ರತಿ ತಿಂಗಳ ವೇತನದಲ್ಲಿ ಕಡಿತಗೊಳಿಸಲು ಒಪ್ಪಿಗೆ ಪತ್ರ ಕೊಟ್ಟಿರುತ್ತೇನೆ ಹಾಗೂ ಅರ್ಜಿಯ ಹಿಂಬದಿಯಲ್ಲಿ ಸೂಚಿಸಿರುವ
 ನಿಯಮಾವಳಿಗೆ ಸಹ ಬದ್ಧನಾಗಿರುತ್ತೇನೆ ಅಂತಾ ಬರಕೊಟ್ಟ ಕರಾರು ಪತ್ರ.

ಸ್ಥಳ:

ದಿನಾಂಕ: 17/05/20

no nathanna
 ಇತಿ ತಮ್ಮ ವಿಶ್ವಾಸಿ,

ಈ ಕೆಳಗೆ ಜಂಟಿಯಾಗಿ ಸಹಿ ಮಾಡಿರುವ ಜಾಮೀನುದಾರರಾದ ನಾವುಗಳು ಸಂಘದ ಎಲ್ಲ ನಿಯಮಾವಳಿಗಳಿಗೆ ಬದ್ಧರಾಗಿರುತ್ತೇವೆ.

ಜಾಮೀನುದಾರರ ಸಹಿ

ಅ.ನಂ.	ಹೆಸರು	ಸಹಿ
1	ಆರ್ಕೇಶ್. ದಾಸವ್ವ. ಕುಂಬಾರ	ಎ.ಡಿ.ಕುಂಬಾರ
2	ಬಿ.ಎ.ಎಲ್. ಆರ್ಕೇಶ್. ಕುಂಬಾರ	ಆರ್ಕೇಶ್
3	ಆರ್ಕೇಶ್. ಕುಂಬಾರ, ಗೌಡ	ಆರ್ಕೇಶ್

ಗೌರವ ಕಾರ್ಯದರ್ಶಿ

ಅಧ್ಯಕ್ಷರು

ಹಿರಾ ಶುಗರ ಇನ್ಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.

- ನಿಯಮಾವಳಿಗಳು -

- 1) ಸಾಲ ಪಡೆದುಕೊಳ್ಳುವ ಸದಸ್ಯನು ಸಂಘದ ಸದಸ್ಯನಾಗಿರಬೇಕು.
- 2) ಸಂಘದ ಸದಸ್ಯನು ಕನಿಷ್ಠ ಪಕ್ಷ 100/- ಗಳ- ಶೇರ ಹೊಂದಿರಬೇಕು.
- 3) ಸಾಲದ ಮಿತಿಯನ್ನು ಸದಸ್ಯನ ಸಂಬಳದ ಆಧಾರದ ಮೇಲೆ ಸಾಲ ಮಂಜೂರ ಮಾಡುವ ಕಮೀಟಿ ಸದಸ್ಯರ ನಿಗದಿಪಡಿಸುವರು.
- 4) ಸಾಲದ ಅವಧಿ ಗರಿಷ್ಠ 48-ತಿಂಗಳುಗಳವರೆಗೆ.
- 5) ಸಾಲವನ್ನು ಪಡೆದುಕೊಂಡ ಸದಸ್ಯರು ಸಾಲವನ್ನು ಪೂರ್ತಿ ತುಂಬುವವರೆಗೆ ಮರಳಿ ಸಾಲವನ್ನು ಕೊಡುವದಿಲ್ಲ.
- 6) ನಾನು ಸಂಘದ ಪೋಟಿ ನಿಯಮಾವಳಿಗಳಿಗನುಸರಿಸಿ ನಡೆದುಕೊಳ್ಳಲು ಒಪ್ಪಿರುತ್ತೇನೆ.
- 7) ಸಂಬಳ ಪ್ರಮಾಣ ಪತ್ರ ಹಾಗೂ ರೂ. 20/- ಅಥವಾ 50/- ರ ಮುಚ್ಚಳಕ್ಕೆ ಪತ್ರವನ್ನು ನಿಯಮಾವಳಿಗನುಸಾರವಾಗಿ ಸಲ್ಲಿಸುವದಾಗಬೇಕು.
- 8) ಸಾಲಗಾರನು ಸರಿಯಾದ ಕಂತುಗಳಿಂದ ಸಾಲ ತುಂಬದಿದ್ದಲ್ಲಿ ಜಾಮೀನುದಾರರಾದ ನಾವು ಜವಾಬ್ದಾರಿದ್ದು ಸದರಿ ಸಾಲದ ಮೊತ್ತ ಹಾಗೂ ಬಡ್ಡಿ ಭರಣಾ ಮಾಡಲು ನಮ್ಮ ವೇತನಗಳಲ್ಲಿ ಸಾಲ ಮುಟ್ಟುವವರೆಗೆ ಕಡಿತ ಮಾಡಲು ಸಂಪೂರ್ಣ ಒಪ್ಪಿಕೊಂಡಿರುತ್ತೇವೆ.
- 9) ಬ-ಕ್ಲಾಸ್ ಸಾಲಗಾರರಿಗೆ ಸಂಘದ ಯಾವುದೇ ಚಟುವಟಿಕೆಗಳಲ್ಲಿ ಯಾವುದೇ ತರಹದ ಹಕ್ಕು ಇರುವದಿಲ್ಲ.

ಸ್ಥಳ:

ದಿನಾಂಕ:

15/05/2020

ಸಾಲಗಾರನ ಸಹಿ

ಜಾಮೀನುದಾರರ ಹೆಸರು ಮತ್ತು ಸಹಿ:

1. ಆರ್ಕೇಶ್. ದಾಸವ್ವ. ಕುಂಬಾರ

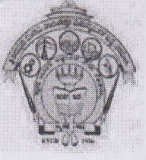
ಎ.ಡಿ.ಕುಂಬಾರ

2. ಬಿ.ಎ.ಎಲ್. ಆರ್ಕೇಶ್. ಕುಂಬಾರ

ಆರ್ಕೇಶ್

3. ಆರ್ಕೇಶ್. ಕುಂಬಾರ, ಗೌಡ

ಆರ್ಕೇಶ್



ಹಿರಾಸುಗರ ತಾಂತ್ರಿಕ ಮಹಾವಿದ್ಯಾಲಯ, ನಿಡಸೋಸಿ

Hirasugar Institute of Technology

Nidasoshi – 591 236, Karnataka State

Prof. S. C. Kamate Ph. D.
Principal

Phone : (08333) 278887
Fax : (08333) 278886

Ref. No: HSIT/NDS/Account/2022-23/

Date : 13-05-2022

SALARY CERTIFICATE

This is to certify that Mr. Nijalingayya Achari is working as a 'Helper' in this Institute. His salary for the month of April-2022 is as under:

Payment		Deductions:	
Basic	15600	P.F.	1800
DA (6%)	936	L.I.C.	731
	0	PT	200
HRA (5%)	780	Share Amount & Laon	2700
	0	ESIC	131
Total Payment	17,316	Total Deduction	5,562
Deductions	5,562		
Net Payment	11,754		

This certificate is issued on the request of the employee for applying society/bank loan.


PRINCIPAL
Hirasugar Institute of Technology
NIDASOSHI – 591 236



INDIA NON JUDICIAL

Government of Karnataka

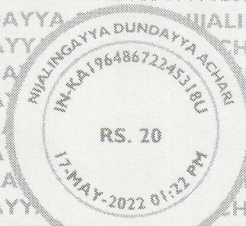
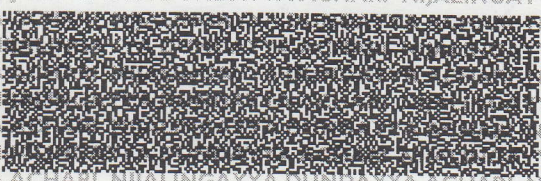
Rs. 20

e-Stamp

Certificate No.	: IN-KA19648672245318U
Certificate Issued Date	: 17-May-2022 01:22 PM
Account Reference	: NONACC (FI)/ kaksfcl08/ NIDASOSHI/ KA-BL
Unique Doc. Reference	: SUBIN-KAKAKSFCL0866581667692307U
Purchased by	: NIJALINGAYYA DUNDAYYA ACHARI
Description of Document	: Article 12 Bond
Description	: LOAN PURPOSE
Consideration Price (Rs.)	: 0 (Zero)
First Party	: NIJALINGAYYA DUNDAYYA ACHARI
Second Party	: H I T EMPLOYEES CO OP CR SOC NIY NIDASOSHI
Stamp Duty Paid By	: NIJALINGAYYA DUNDAYYA ACHARI
Stamp Duty Amount(Rs.)	: 20 (Twenty only)

सत्यमेव जयते

ಶ್ರೀಮದಾಂಧಿಪ್ಪಟಪ್ಪನಾಚಾರಿ
ಸಾಧಾರ್ಣ ಸಹಕಾರಿ, ನಿರತಮೂಲಿ
ಶ್ರೀಮದಾಂಧಿಪ್ಪಟಪ್ಪನಾಚಾರಿ



Please write or type below this line

Statutory Alert:

1. The authenticity of this Stamp certificate should be verified at 'www.shcilestamp.com' or using e-Stamp Mobile App of Stock Holding. Any discrepancy in the details on this Certificate and as available on the website / Mobile App renders it invalid.
2. The onus of checking the legitimacy is on the users of the certificate.
3. In case of any discrepancy please inform the Competent Authority.

ಮ|| ಅಧ್ಯಕ್ಷರು.

ಖರ್ಚಿನ ಪಾವತಿ

ಹೀರಾಪುರ ಇನ್‌ಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಜಿ ನೌಕರರ ಕೋ-ಆಪ್.

ಕ್ರ. ೧೪ ಸೋನಾಯಿಟಿ ರಿ; ನಿಡಸೋಸಿ.

ನಾನು Shri. N. S. Acharya D. Acharya

ಮು. _____ ಬರಕೊಡುವ ಪಾವತಿ ಏನೆಂದರೆ ನನಗೆ ನಿಮ್ಮ ಕಡೆಯ
ಕೆಳಗೆ ಬರೆದ ಪ್ರಕಾರ ಹಣ ರೋಖಿ ಮುಟ್ಟು.

ಕವಶೀಲು	ರೂ.
ಸಾಲ ಕಾ 18/05/92 ಬಾಂಡ ಪ್ರಕಾರ	
ಚೆಕ್ ನಂ. 088708 ಪ್ರಕಾರ ರೂ.	2,00,000
ಶೇಕರ ಬಾಕಿ ರೂ.	
ಶೇಕರ ಪರಿಶ	
ಶೇಕರ ಪರಿಶ	
ಶೇಕರ	
ಅಕ್ಷರದ ರೂ. <u>Two lakh only</u>	
ಒಟ್ಟು -	2,00,000

ಕಾರಿ|| 18-05-2002 N. S. Acharya

ಹಣ ವಸೂಲಿ ಸಹಿ

ಗೌರವಾನ್ವಿತರಾಗಿ



कर्मचारी भविष्य निधि संगठन
Employees' Provident Fund Organization


भविष्य निधि भवन, १४, भीकाजी कामा प्लेस, नई दिल्ली - ११००६६
Bhavishya Nidhi Bhawan, 14, Bhikaji Cama Place, New Delhi - 110066

Generated On 08/03/2023 13:24:

Payment Confirmation Receipt

TRRN No :	2422303003149
Challan Status :	Payment Confirmed
Challan Generated On :	08-MAR-2023 10:36:08
Establishment ID :	GBHBL0027127000
Establishment Name :	HIRASUGAR INSTITUTE OF TECHNOLOGY
Challan Type :	Monthly Contribution Challan
Total Members :	137
Wage Month :	FEB-2023
Total Amount (Rs) :	4,61,312
Account-1 Amount (Rs) :	2,99,104
Account-2 Amount (Rs) :	9,226
Account-10 Amount (Rs) :	1,43,756
Account-21 Amount (Rs) :	9,226
Account-22 Amount (Rs) :	0
Payment Confirmation Bank :	State Bank of India
CRN :	002080323341935
Payment Date :	08-MAR-2023
Payment Confirmation Date :	08-MAR-2023
Total PMRPY Benefit :	0




PRINCIPAL
Hirasugar Institute of Technology
NIDASOSHI-591236



**COMBINED CHALLAN OF A/C NO. 01, 02, 10, 21 & 22 (With
EMPLOYEES' PROVIDENT FUND ORGANISATION)**

TRRN 2422303003149

ECR Id 85792642

LIN : 1981253066

Establishment Code & Name GBHBL0027127000 HIRASUGAR INSTITUTE OF TECHNOLOGY
Address : NIDASOSHI, TAL HUKERI, NIDASOSHI, BELGAUM, KARNATAKA

Dues for the wage month of February 2023

	EPF	EPS	EDLI
Total Subscribers :	133	125	133
Total Wages :	18,45,249	17,25,249	18,45,249

SL.	PARTICULARS	A/C.01 (Rs.)	A/C.02 (Rs.)	A/C.10 (Rs.)	A/C.21 (Rs.)	A/C.22 (Rs.)	TOTAL
1	Administration Charges	0	9,226	0	0	0	9,226
2	Employer's Share Of	77,674	0	1,43,756	9,226	0	230,656
3	Employee's Share Of	2,21,430	0	0	0	0	221,430
Grand Total : Four Lakh Sixty-One Thousand Three Hundred Twelve Rupees Only							4,61,312

(This is a system generated challan on 08-MAR-2023 10:36, the particulars shown in this challan are populated from the Electronic Challan Cum Return (ECR) uploaded by the establishment for the specified month and year.

Note :- The following amounts are being remitted directly by Government of India on account of PMRPY / ABRY.

	PMRPY	ABRY
A) A/C no 1 (Employer share) (Rs.) -	0	0
B) A/C no 10 (Pension fund) (Rs.) -	0	0
C) A/C no 1 (Employee share) (Rs.) -	0	0
D) Total (A + B + C) (Rs.) -	0	0
E) Total remittance by Employer (Rs.) -	4,61,312	
F) Total amount of uploaded ECR (D + E) (4,61,312	



[Signature]
PRINCIPAL
Hirasugar Institute of Technology
NIDASOSHI-591236



**COMBINED CHALLAN OF A/C NO. 01, 02, 10, 21 & 22 (With
EMPLOYEES' PROVIDENT FUND ORGANISATION)**

TRRN 2422303003149

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Grand Total : Four Lakh Sixty-One Thousand Three Hundred Twelve Rupees Only							4,61,312

(This is a system generated challan on 08-MAR-2023 10:36, the particulars shown in this challan are populated from the Electronic Challan Cum Return (ECR) uploaded by the establishment for the specified month and year.

Note :- The following amounts are being remitted directly to Government of India on account of PMRPY / ABRY.

	PMRPY	ABRY
A) A/C no 1 (Employer share) (Rs.) -	0	0
B) A/C no 10 (Pension fund) (Rs.) -	0	0
C) A/C no 1 (Employee share) (Rs.) -	0	0
D) Total (A + B + C) (Rs.) -	0	0
E) Total remittance by Employer (Rs.) -	4,61,312	
F) Total amount of uploaded ECR (D + E) (4,61,312	



[Signature]
PRINCIPAL
Hirasugar Institute of Technology
NIDASOSHI-591236



EMPLOYEE'S PROVIDENT FUND
ELECTRONIC CHALLAN CUM RETURN (ECR)

Name of Establishment	HIRASUGAR INSTITUTE OF TECHNOLOGY		
Establishment Id	GBHBL0027127000	LIN	1981253066
Wage Month	FEB-2023	Return Month	MAR-2023
Contribution Rate (%)	12	ECR Type	ECR
Salary Disbursement Date	06-MAR-2023	Uploaded Date Time	08-MAR-2023 10:32
Exemption Status	Unexempted	TRRN Number	
Remarks	February	ECR Id	85792642
Total Members	137		
Contribution and Remittance Details (In Rupees) :			
Total EPF Contribution Remitted	2,21,430	Total EPS Contribution Remitted	1,43,756
Total EPF-EPS Contribution Remitted	77,674	Total Refund Advance	0
PMRPY Upfront Benefit Details (In Rupees) :			
Total PMRPY Upfront EPF Amount	0	Total PMRPY Upfront EPS Amount	0
PMRPY benefit remarks	NA		
ABRY Upfront Benefit Details (In Rupees) :			
Total ABRY benefit Amount	Employee EPF Share	Employer EPS Share	Employer EPF Share
	0	0	0
ABRY benefit remarks	Establishment is not eligible for ABRY benefit as employee count [137] is less than required employee count of 156 from base month.		

Member Details :-

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
1	100080979707	AMIT NESHTI	AMIT NESHTI	43,380	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
2	100082239928	ANAND KEDARI BADA KAR	ANAND KEDARI BADA KAR	16,283	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
3	100084684455	ANIL SHANKAR JADHAV	ANIL SHANKAR JADHAV	12,302	12,302	12,302	12,302	1,476	1,025	451	0	0	-	-	-	N.A.
4	100060836201	ANITA KAMANURI	ANITA KAMANURI	18,954	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
5	100086916917	ANNAPPA BHISTE	ANNAPPA BHISTE	16,283	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
6	100086916940	ANNAPPA GOUDADI	ANNAPPA GOUDADI	10,089	10,089	10,089	10,089	1,211	840	371	0	0	-	-	-	N.A.
7	100086914077	ANNAPPA HUDDAR	ANNAPPA HUDDAR	12,312	12,312	12,312	12,312	1,477	1,026	451	0	0	-	-	-	N.A.
8	100088624054	APPASAHEB PATIL	APPASAHEB PATIL	17,940	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
9	100088630049	APPASAHEB SHANKAR KANKANAVADI	APPASAHEB SHANKAR KANKANAVADI	17,940	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
10	100090466436	ARUN KALLPPA TALWAR	ARUN KALLPPA TALWAR	16,740	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
11	100090335449	ARUN SANKESHWARI	ARUN SANKESHWARI	31,510	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
12	100091108910	ARUNA A DAPTARDAR	ARUNA ANIL DAPTARDAR	53,326	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
13	100093288528	ASHOK BENNOLI	ASHOK BENNOLI	12,877	12,877	12,877	12,877	1,545	1,073	472	0	0	-	-	-	N.A.
14	100093371480	ASHOK DUK JAPPA KUMBAR	ASHOK DUNDAPPA KUMBAR	11,970	11,970	11,970	11,970	1,436	997	439	0	0	-	-	-	N.A.
15	100108452480	BASAPPA KOLI	BASAPPA KOLI	17,538	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
16	100108478268	BASAVANNI HUNCHAYALI	BASAVANNI HUNCHAYALI	10,089	10,089	10,089	10,089	1,211	840	371	0	0	-	-	-	N.A.
17	100108567940	BASAVARAJ SIDDAPPA SOOJI	BASAVARAJ SIDDAPPA SOOJI	16,283	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
18	100108577146	BASAVARAJ V MADIGGOND	BASAVARAJ V MADIGGOND	1,25,299	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
19	100110650923	BHARAMAPPA DUNDAPPA GURAV	BHARAMAPPA DUNDAPPA GURAV	17,940	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
20	101006407530	BHAVALING ALIAS PRATIMA KHOT	BHAVALING ALIAS PRATIMA KHOT	36,583	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
21	100123292042	CHANDRAKANT BASAPRABHU PATIL	CHANDRAKANT BASAPRABHU PATIL	12,036	12,036	12,036	12,036	1,444	1,003	441	0	0	-	-	-	N.A.
22	100124913624	CHETAN JODATTI	CHETAN JODATTI	15,114	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
23	100125467188	CHIDANAND RAYAPPA RAMANI	CHIDANAND RAYAPPA RAMANI	15,114	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
24	100125467560	CHIDANAND SHANKAR SOOJI	CHIDANAND SHANKAR SOOJI	13,231	13,231	13,231	13,231	1,588	1,102	486	0	0	-	-	-	N.A.
25	100129896071	DARSHAN NILKANTHRAO INAMDAR	DARSHAN NILKANTHRAO INAMDAR	61,320	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
26	100130418756	DATTATRAY MAHADEV KUMBHAR	DATTATRAY MAHADEV KUMBHAR	54,098	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
27	100130445546	DATTATRAYA GOPALRAO KULKARNI	DATTATRAYA GOPALRAO KULKARNI	26,220	15,000	0	15,000	1,800	0	1,800	0	0	-	-	-	N.A.
28	100130817578	DAYANAND KAMATE	DAYANAND KAMATE	15,295	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
29	100872445504	DAYANAND KONAKERI	DAYANAND KONAKERI	10,861	10,861	10,861	10,861	1,303	905	398	0	0	-	-	-	N.A.
30	100141615577	DUNDAPPA BADIGER	DUNDAPPA BADIGER	19,780	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
31	100141695759	DURDUNDI MADIHALLI	DURDUNDI MADIHALLI	52,638	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
32	100141639004	DURADUNDI MALLAPPA MADIHALLI	DURADUNDI MALLAPPA MADIHALLI	12,877	12,877	12,877	12,877	1,545	1,073	472	0	0	-	-	-	N.A.
33	100150117588	GANAPATI DUNDAPPA BASAPURI	GANAPATI DUNDAPPA BASAPURI	12,312	12,312	12,312	12,312	1,477	1,026	451	0	0	-	-	-	N.A.
34	100150909505	GANGADHAR MALLAPPA HIREKODI	GANGADHAR MALLAPPA HIREKODI	17,135	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
35	100153219717	GHULAPPA TOLAKE	GHULAPPA TOLAKE	11,760	11,760	11,760	11,760	1,411	980	431	0	0	-	-	-	N.A.
36	100153531756	GIRIMALLAPPA DODDAGOUDA R	GIRIMALLAPPA DODDAGOUDA R	18,368	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
37	100693906768	GIRISH ZULAPI	GIRISH ZULAPI	25,920	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
38	100927516665	GURURAJ SHIDLINGAPPA SOLABANNAVA	GURURAJ SHIDLINGAPPA	28,922	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.

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		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
		R	SOLABANNA VAR													
39	100163715039	HEMALATA RAOSAHEB ZINAGE	HEMALATA RAOSAHEB ZINAGE	65,056	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
40	101901104979	IRANNA NARAYAN KAMBAR	IRANNA NARAYAN KAMBAR	18,000	15,000	0	15,000	1,800	0	1,800	0	0	-	-	-	N.A.
41	100167737335	IRAPPA BHIMAPPA MADYALI	IRAPPA BHIMAPPA MADYALI	10,443	10,443	10,443	10,443	1,253	870	383	0	0	-	-	-	N.A.
42	100384325513	JAYANNA LAZARAIH BOLLARAPU	JAYANNA LAZARAIH BOLLARAPU	16,330	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
43	100185095015	KADAPPA KANKANAWADI	KADAPPA KANKANAWADI	12,863	12,863	12,863	12,863	1,544	1,071	473	0	0	-	-	-	N.A.
44	100186357634	KALLAPPA M AKKOLI	KALLAPPA MALLAPPA AKKOLI	76,300	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
45	100190955578	KARVEER BHAIKU MANWADE	KARVEER BHAIKU MANWADE	97,974	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
46	100192436502	KESHAV NEGALUR	KESHAV NEGALUR	39,975	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
47	100196948844	KRISHNAPPA HADIMANI	KRISHNAPPA HADIMANI	9,912	9,912	9,912	9,912	1,189	826	363	0	0	-	-	-	N.A.
48	100383697048	LAXMI JAYANNA BOLLARAPU	LAXMI JAYANNA BOLLARAPU	16,330	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
49	100212962827	MAHADEV BHARAMA SANKAPAL	MAHADEV BHARAMA SANKAPAL	13,231	13,231	13,231	13,231	1,588	1,102	486	0	0	-	-	-	N.A.
50	100213027545	MAHADEV BYALI	MAHADEV BYALI	16,330	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
51	100212973042	MAHADEV DUNDAPPA BANTI	MAHADEV DUNDAPPA BANTI	13,110	13,110	13,110	13,110	1,573	1,092	481	0	0	-	-	-	N.A.
52	100213390612	MAHANTESH MURIGEPPA SHIVASHIMPI	MAHANTESH MURIGEPPA SHIVASHIMPI	71,920	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
53	101911884551	MAHANTESH PATIL	MAHANTESH PATIL	8,684	8,684	8,684	8,684	1,042	723	319	0	0	-	-	-	N.A.
54	100214365808	MAHESH BASAGOUDA PATIL	MAHESH BASAGOUDA PATIL	14,868	14,868	14,868	14,868	1,784	1,239	545	0	0	-	-	-	N.A.
55	100214958171	MAHESH DODDAMANI	MAHESH DODDAMANI	11,063	11,063	11,063	11,063	1,328	922	406	0	0	-	-	-	N.A.
56	100214510899	MAHESH GHULAPPA HUDDAR	MAHESH GHULAPPA HUDDAR	74,078	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
57	100214843986	MAHESH PADADAYYA	MAHESH PADADAYYA	56,236	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.


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		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
		YENAGIMATH	YENAGIMATH													
58	100215234381	MAHESHWAR ADIVEPPA HIPPARAGI	MAHESHWAR ADIVEPPA HIPPARAGI	48,800	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
59	100875499931	MALAGOWDA JAYAGOWDA PATIL	MALAGOWDA JAYAGOWDA PATIL	8,700	8,700	8,700	8,700	1,044	725	319	0	0	-	-	-	N.A.
60	100451874388	MALLIKARJUN PADMANNAVAR	MALLIKARJUN PADMANNAVAR	10,855	10,855	10,855	10,855	1,303	904	399	0	0	-	-	-	N.A.
61	10132846935	MALLIKARJUN SATTIGERI	MALLIKARJUN SATTIGERI	13,147	13,147	13,147	13,147	1,578	1,095	483	0	0	-	-	-	N.A.
62	100216522160	MALLIKARJUN YASHAVANTH	MALLIKARJUN YASHAVANTH	11,760	11,760	11,760	11,760	1,411	980	431	0	0	-	-	-	N.A.
63	100220408532	MANJUNATH SHANKAR HANAGADKAR	MANJUNATH SHANKAR HANAGADKAR	72,026	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
64	100222384038	MANOJKUMAR CHITALE	MANOJKUMAR CHITALE	0	0	0	0	0	0	0	28	0	-	-	-	N.A.
65	100223602059	MARTAND KADALAGI	MARTAND KADALAGI	16,330	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
66	100229872410	MOHAN SHANKAR FUTANE	MOHAN SHANKAR FUTANE	53,325	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
67	100677750967	MOUNESHWAR SHRISHAIL BADIGER	MOUNESHWAR SHRISHAIL BADIGER	10,000	10,000	10,000	10,000	1,200	833	367	0	0	-	-	-	N.A.
68	100236557023	MUBARAK AKABAR ATTAR	MUBARAK AKABAR ATTAR	17,118	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
69	100247436738	NAGANAGOUD A K HONNAGOUDAR	NAGANAGOUD A K HONNAGOUDAR	58,372	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
70	100254910682	NIJALINGAYYA DUNDAYYA ACHARI	NIJALINGAYYA DUNDAYYA ACHARI	17,940	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
71	100256242829	NIRANJAN WANI	NIRANJAN WANI	9,912	9,912	9,912	9,912	1,189	826	363	0	0	-	-	-	N.A.
72	100258606056	NYAMATULLA PATEL	NYAMATULLA PATEL	54,597	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
73	100261316479	ONKAR BASAVARAJ HEDDURSHETTI	ONKAR BASAVARAJ HEDDURSHETTI	53,326	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.

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		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
74	100267988573	PARESH DUNDAPPA PIMPALGAVI	PARESH DUNDAPPA PIMPALGAVI	15,295	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
75	100275818577	PRAKASH KALLAPPA MUGALI	PRAKASH KALLAPPA MUGALI	23,575	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
76	100276938248	PRAMOD SUBHASH DESAI	PRAMOD SUBHASH DESAI	30,348	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
77	100277007121	PRAMOD V PATIL	PRAMOD V PATIL	41,174	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
78	100277549523	PRASANNA PATIL	PRASANNA PATIL	41,215	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
79	101725270852	PREETHI RAVINDRA PATIL	PREETHI RAVINDRA PATIL	21,600	15,000	0	15,000	1,800	0	1,800	0	0	-	-	-	N.A.
80	101908381454	PURNIMA I SAVADATTI	PURNIMA I SAVADATTI	21,600	15,000	0	15,000	1,800	0	1,800	0	0	-	-	-	N.A.
81	100818864095	RAGHAVENDRA RAMAKANT MAGGAVI	RAGHAVENDRA RAMAKANT MAGGAVI	74,078	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
82	101176220637	RAHUL AJIT PALAKAR	RAHUL AJIT PALAKAR	0	0	0	0	0	0	0	28	0	-	-	-	N.A.
83	100298409650	RAJASHEKHAR SHIVALINGAPPA KAPASHI	RAJASHEKHAR SHIVALINGAPPA KAPASHI	13,231	13,231	13,231	13,231	1,588	1,102	486	0	0	-	-	-	N.A.
84	100294869270	RAJENDRA BARDOL	RAJENDRA BARDOL	20,040	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
85	100297065083	RAJESHWAR SHIVANNAVAR	RAJESHWAR SHIVANNAVAR	16,330	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
86	101913408024	RAMAPPA GARDI	RAMAPPA GARDI	8,684	8,684	8,684	8,684	1,042	723	319	0	0	-	-	-	N.A.
87	100304298137	RAMESH CHINCHANI	RAMESH CHINCHANI	12,312	12,312	12,312	12,312	1,477	1,026	451	0	0	-	-	-	N.A.
88	100316226207	RUDRAPPA SHIVALINGAPPA KAGI	RUDRAPPA SHIVALINGAPPA KAGI	10,266	10,266	10,266	10,266	1,232	855	377	0	0	-	-	-	N.A.
89	100123450154	S.M. CHANDRAKANTH	S.M. CHANDRAKANTH	28,922	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
90	100326211602	SACHIN SHETIGOUDE PATIL	SACHIN SHETIGOUDE PATIL	57,576	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
91	100326207928	SACHIN SUBHASH CHOUGALE	SACHIN SUBHASH CHOUGALE	12,567	12,567	12,567	12,567	1,508	1,047	461	0	0	-	-	-	N.A.
92	100326526561	SADASHIV BIRANAGADDI	SADASHIV BIRANAGADDI	12,302	12,302	12,302	12,302	1,476	1,025	451	0	0	-	-	-	N.A.

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		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
93	100335602827	SANNAPPA C KAMATE	SANNAPPA C KAMATE	1,96,381	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
94	100337429045	SANTOSH SHIVAMURTI KARASHETTI	SANTOSH SHIVAMURTI KARISHETTI	11,505	11,505	11,505	11,505	1,381	958	423	0	0	-	-	-	N.A.
95	100451650632	SATAYYA KAMATE	SATAYYA KAMATE	11,106	11,106	11,106	11,106	1,333	925	408	0	0	-	-	-	N.A.
96	100341679364	SATTEPPA KOTEPAGOL	SATTEPPA KOTEPAGOL	32,315	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
97	100341679551	SATTEPPA SHANKAR JODATTI	SATYAPPA SHANKAR JODATTI	11,063	11,063	11,063	11,063	1,328	922	406	0	0	-	-	-	N.A.
98	100682057760	SHASHIKANT WALKI	SHASHIKANT WALKI	33,12	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
99	100352158298	SHIVALING S DHANGE	SHIVALING S DHANGE	29,900	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
100	100352415215	SHIVANAGOU D A NINGANAGOUA TOPANNAVAR	SHIVANAGO UDA NINGANAGO UDA TOPANNAVAR	1,15,318	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
101	100352273825	SHIVANAND BABU SARAWADI	SHIVANAND BABU SARAWADI	38,952	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
102	100352272026	SHIVANAND BISKOP	SHIVANAND BISKOPA	10,438	10,438	10,438	10,438	1,253	869	384	0	0	-	-	-	N.A.
103	100352277786	SHIVANAND D KALAI	SHIVANAND D KALAI	10,841	10,841	10,841	10,841	1,301	903	398	0	0	-	-	-	N.A.
104	100352272061	SHIVANAND GOUDADI	SHIVANAND GOUDADI	53,326	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
105	100352277740	SHIVANAND HIREKODI	SHIVANAND HIREKODI	66,746	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
106	100352284713	SHIVANAND KALLAPPA JAKATI	SHIVANAND KALLAPPA JAKATI	17,538	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
107	100352304572	SHIVANAND MANJARAGI	SHIVANAND MANJARAGI	59,534	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
108	100352428138	SHIVAPPA BASAPPA KHOT	SHIVAPPA BASAPPA KHOT	10,620	10,620	10,620	10,620	1,274	885	389	0	0	-	-	-	N.A.
109	100352510965	SHIVARAM BADA KAR	SHIVARAM BADA KAR	10,266	10,266	10,266	10,266	1,232	855	377	0	0	-	-	-	N.A.
110	101402294991	SHREEDEVI S BEESANAKOPPA	SHREEDEVI S BEESANAKOPPA	21,600	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
111	100058683827	SHREEMANT ALAGOUDA PATIL	SHREEMANT ALAGOUDA PATIL	34,804	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.

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		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
112	100353455415	SHREEVIJAY SIDDHALINGAP P ITTANNAVAR	SHREEVIJAY SIDDHALING APPA ITTANNAVAR	44,881	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
113	100362520122	SRINATH PATIL	SHRINATH L PATIL	45,677	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
114	100354408820	SHRISHAIL BABU CHOUGALA	SHRISHAIL BABU CHOUGALA	25,530	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
115	100358857881	SNEHAL THABAJ	SNEHAL THABAJ	33,528	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
116	100363822753	SUBHASH B BEELUR	SUBHASH B BEELUR	22,295	15,000	0	15,000	1,800	0	1,800	0	0	-	-	-	N.A.
117	101888678081	SUDARSHAN VIJAYAKUMAR JORE	SUDARSHAN VIJAYAKUMAR JORE	21,600	15,000	0	15,000	1,800	0	1,800	0	0	-	-	-	N.A.
118	100451547212	SUJATA HUDDAR	SUJATA HUDDAR	0	0	0	0	0	0	0	28	0	-	-	-	N.A.
119	101847639032	SUJATA ISHWAR MANE	SUJATA ISHWAR MANE	33,480	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
120	100366745901	SUJATA SHIVAPPA KAMATE	SUJATA SHIVAPPA KAMATE	59,534	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
121	100681899371	SUNITA SHIVAPUTRAPPA MALAJ	SUNITA SHIVAPUTRAPPA MALAJ	55,229	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
122	100373614842	SURESH BALAKRISHATNA SHINDE	SURESH BALAKRISHATNA SHINDE	15,645	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
123	100376243092	SUSHILA SHANKAR KANKANWADI	SUSHILA SHANKAR KANKANWADI	35,880	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
124	100389978429	TATYASAHEB PATIL	TATYASAHEB PATIL	23,575	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
125	100399161764	VAGEESHAPAN DITARADHYA V GURUWADAYAR	VAGEESHAP ANDITHARADHYA V GURUWODEYAR	30,705	15,000	0	15,000	1,800	0	1,800	0	0	-	-	-	N.A.
126	100401483714	VEERBHADRA NIJAPPA BISKOP	VEERBHADRA NIJAPPA BISKOP	10,266	10,266	10,266	10,266	1,232	855	377	0	0	-	-	-	N.A.
127	100405595925	VIKAS BHIMSING DHERE	VIKAS BHIMSING DHERE	0	0	0	0	0	0	0	28	0	-	-	-	N.A.
128	101490412266	VINAYAK VISHWANATH MENASI	VINAYAK VISHWANATH MENASI	13,000	13,000	13,000	13,000	1,560	1,083	477	0	0	-	-	-	N.A.
129	100032094341	VIRUPAKSHI MALLAPPA BHUMANNANAVAR	VIRUPAKSHI MALLAPPA BHUMANNANAVAR	40,121	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
130	100409701776	VIRUPAKSHI TIPPANNA YADDURI	VIRUPAKSHI TIPPANNA YADDURI	15,985	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
131	100409701070	VIRUPAXI BADA KAR	VIRUPAXI BADA KAR	25,530	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
132	100409701321	VIRUPAXI GOPAL BADIGER	VIRUPAXI GOPAL BADIGER	31,510	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
133	100410595376	VISHWANATH HIREMATH	VISHWANATH HIREMATH	32,315	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
134	101884048864	VISHWANATH IRAGOUDA PATIL	VISHWANATH IRAGOUDA PATIL	21,600	15,000	0	15,000	1,800	0	1,800	0	0	-	-	-	N.A.
135	100410878306	VITTAL HANAMANTAPP A KUMBAR	V. TAL HANAMANTA PPA KUMBAR	10,855	10,855	10,855	10,855	1,303	904	399	0	0	-	-	-	N.A.
136	100411276205	VIVEK MADHUKAR MUTALIK	VIVEK MADHUKAR MUTALIK	16,283	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
137	100414756583	YALLAPPA HANUMANTAPP A NAIK	YALLAPPA HANUMANTA PPA NAIK	14,663	14,663	14,663	14,663	1,760	1,221	539	0	0	-	-	-	N.A.


PRINCIPAL
 Sarasagar Institute of Technology
 NIDASOSHI-591236

Note:

1) UANs are prefixed with Asterisk sign (*) in case AADHAAR is not seeded /unverified

2) EPS Contribution Remitted is prefixed with Hash sign (#) when Member's age is more than 58 years.


Please ensure that this is the case of "Deferred Pension".

PMRPY Benefit Not Given Remarks :-

Reason Code	Reason Name
EC10001	ECR already filed for this member
EC10002	Parallel Employment: ECR already filed for this
EC10003	Benefit already availed for this member
EC10004	Gross/EPF wages greater than 15,000/-
EC10005	Mismatch in EPF and EPS wages
EC10006	Mismatch in Due and Remitted values
EC10007	UAN Deactivated

ABRY Benefit Not Given Remarks :-

Reason Code	Reason Name
GK10001	EPF wages are greater than or equal to 15,000/-
GK10002	Mismatch in EPF and EPS wages
GK10003	EPF contribution remitted is greater than due remittance
GK10004	EPS contribution remitted is greater than due remittance
GK10005	(EPF - EPS) difference contribution remitted is greater than due
GK10006	EPS contribution remitted is greater than due remittance
GK10007	Aadhaar not seeded

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		R & D
		Research Scholars
		2023-24

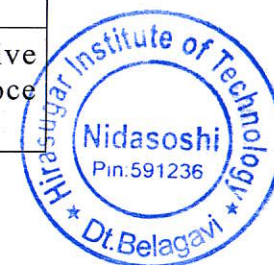
6.3: Faculty Empowerment Strategies.

Hirasugar Institute of Technology is continuously motivating and providing an avenue for career development to upgrade qualification and Skills of our Teaching & non-teaching faculties.. The List of faculties who are pursuing/awarded PhD till date.

List of Research Scholars

Sl. No.	Name	Registration Year	Topic	Guide	Research Centre	Status
1	Mr. Mahantesh M. Shivashimpi	2015	Effect of Combustion Chamber Shapes, Injector Nozzle Geometry and EGR on the Performance and Emission Characteristics of Single Cylinder Biodiesel Fueled C.I. Engine	Dr.S.A.Alur	HSIT, Nidasoshi	Degree Awarded
2	Mr. Shivanand A. Goudadi	2021	Study of the Effect of Natural Fibers in Biocompatible Materials for Structure /Packaging Applications	Dr.K.M.Akkoli	HSIT, Nidasoshi	Provisional Registration Completed
3	Mr. Darshan N Inamdar	2016	Experimental Investigation on Shot Peening	Dr. U. M. Daivagna	VTU, RRC Belagavi	Comprehensive Viva- Voce Completed
4	Mr. Maheshwar A. Hipparagi	2017	Tensile and Fatigue Behaviour of 9255 Austempered Steel	Dr. Padmayya Naik	Anjman Institute of Technology, Bhatkal	Comprehensive Viva- Voce Completed

Nidasoshi, Taq: Hukkeri, Dist: Belgaum, Karnataka - 591 236
 Phone:+91-8333-278887, Fax:278886, Web:www.hsit.ac.in Mail:principal@hsit.ac.in






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HSIT
R & D
Research Scholars
2023-24

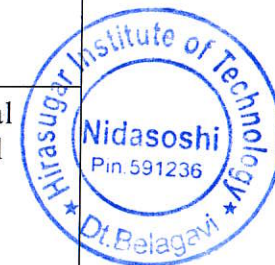
5	Mr. S. M. Chandrakanth	2020	Behaviour of Saturation Effects, Pressure and Temperature Variation on Subgrade Soil Strength	Dr. Adarsh S. Chatra	BEC, Bagalkot	Provisional Registration Completed
6	Mr. Keshav Negalur	2021	Power Electronics and Power System	Dr. Basavaraj V. Madiggond	HSIT, Nidasoshi	Provisional Registration Completed
7	Mr. Mahesh Yenagimath	2017	Synchrophasor Based Data Mining For Power System Fault Detection and Situation Awareness	Dr. Shekhappa Ankaliki	SDMCET, Dharwad	Comprehensive Viva- Voce Completed
8	Mr. Mahesh Huddar	2017	An Intelligent Multimodal Sentiment Analysis and Emotion Detection Framework for Multimedia Reviews	Dr. Sanjeev S Sannakki	KLS GIT Belagavi	Degree Awarded
9	Mr. Shivananad Manjaragi	2016	Secured Vertical Handover System For 5G Wireless Networks	Dr. S. V. Saboji	BEC, Bagalkot	Degree Awarded
10	Mr. Shreevijay Ittannavar	2016	Breast Cancer Detection Using Image Processing	Dr. R. H. Havaladar	KLEMSSCET, Belagavi	Degree Awarded
11	Mrs. S. S. Kamate	2017	Design and Implementation of High Performance Analog to Digital Converter with Power Gating For Ultra Low Power Operation	Dr. H. P. Rajani	KLEMSSCET, Belagavi	Comprehensive Viva- Voce Completed



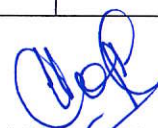
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						R & D
						Research Scholars
						2023-24

12	Mr. S. L. Patil	2013	On Derived Graphs	Dr. Sudhir R Jog	KLS GIT Belagavi	Degree Awarded
13	Mr. Shashikant Walki	2016	Development Some Novel Dyes for Dye Sensitized Solar Cells Applications	Prof. K. M. Mahadevan	Kuvempu University	Degree Awarded
14	Mr. Virupakshi M. Bhumannavar	2013	Experimental and Theoretical Studies on Linear and Nonlinear Optical Properties of Chalcone Derivatives	Dr. Parutagouda S. Patil	KLE Institute of Technology, Hubballi	Open Seminar-2 Com
15	Sujata Huddar	2023	Design and implementation of heuristic algorithm based optimal placement and sizing of DG for loss minimization and voltage profile improvement in power system.	Dr. Basavaraj V. Madiggond	HSIT, Nidasoshi	Provisional Registered
16	Amit Uday Neshti	2023	Machine Learning Based Condition Monitoring And Fault Diagnosis Of Synchronous And Asynchronous Machines	Dr. Basavaraj V. Madiggond	HSIT, Nidasoshi	Provisional Registered




Dean R & D


IOAC Coordinator


Principal

Dean Research & Development

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