

SJPN 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, Faculty Name: Dr. Shreevijay Ittannavar
The Principal Designation: Associate Professor

HSIT, Nidasoshi. 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:

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

Sr. No.		Criterio	n	Max. Points	Points earned in Self appraisal	Points earned in HOD/Principal Appraisal	Remarks
A.	Teachin	g-Learning	(70)	e d			
A1.	No. of Cla	asses Engage	d	,			
F 6	Odd Sem.	BSP	50/40	10	10	10	2 4
	Odd Sern.	DSP	67/50	10	10	(0 .	۵
	Even Sem.	DSP	45/40	10 .	10	(0)	6000
	Even Sem.	DC	51/50	10	10	10	
			Average Total	10	10	10	
A2	Percentag	ge of Syllabu	s Covered		l b		
	· · ·	BSP	100	10.	10	10	
3	Odd Sem.	DSP	100	10 .	10	10	0
e	Even	DSP	98	10	10	10	1 500
	Sem.	DC	100	10	10 .	(0	0
1.5			Average Total	10	10	LO.	At 1
A3	University	y Results		30			
		BSP	67.16%	25	25	25 (FT)	7
1 x2 x*	Odd Sem.	DSP	95.65%	. 25	25	25	
8	Even	DSP	88.05%	25	25	25 (FT)	
5	Sem.	DC .	95.65%	25	25	25	2000
			Average Total	25	25	25	
A4	Feedback						
	Odd Sem.	BSP	96.5%	05	05	05	
31	ouu seili.	DSP	98%	05	05	05	0
	Even	DSP	97.25%	05	05	05	broad
	Sem.	DC	95.62%	05	05	05	62
7		* 5	Average Total	SUPSte o	05	05	

Nidasoshi Pin:591236

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ECE Self-Appraisal Form 2022-23

Rev.01/11.03.2019

Sr. No.	Criterion		Max. Points	Points earned in Self	Points earned in HOD/Principal Appraisal	Remarks
A5	Pedagogical Initiatives			appraisal		
		BSP	04	04	~ />	
	Instruction Material	DSP	04	04	04	-
1	(Hand written/Soft copy)	DSP	04	04		
		DC .	04	04	04	- al
		Average Total	-	04		- GADE
	Power Point Presentation	BSP	04	04	04	
		DSP	04	04	04	- M M.
0 8	x 329	DSP .	04	04	04	S. S.
12		DC	04	04	04	(0000)
	•	Average Total	04	04	04.	
	Working Models/Charts	BSP	04	04	04 V	
		DSP	04	04	04	4
		DSP	04	04	04	0
	2 6 2	DC	04	04	04.	1-000
		Average Total	04	04	04	Or-
	Audio/Video aids	BSP	04	04	04	
	(NPTEL/NDL/MOOCs etc.)	DSP	04	04	04	
	3.	DSP	04	04	04	
		DC ·	. 04	04	04	1 00
		Average Total	04	04	04	Good
	VTU Question Paper	BSP	04	00		
	Solutions	DSP	04	04	06(P)	
		DSP ·	04	04	09	A.
	* * * * * * * * * * * * * * * * * * * *	DC	04	04	04	Gost
		Average Total	04	03	04	
	3 . •	Total (A)	70		03	
В.	Other Contributions		70	69	69	
	Other Contributions (30)				
B1	Workshops/STTP/FDP attende (Attended:01; Organized: 02; days)	Minimum of 3	02	01	01	8/
B2 .	Publication of articles in journ (Peer Reviewed:05; Scopus In Approved: 02; Paid Journals: 0	. 05	05	05	bod	
B3	Papers presented/conference (Paper presented: 02; Attende	attended ed: 01)	02	02	02	Gusad
	Guiding of PG/UG level Funde students Projects (Applied: 01 03)	d/ Sponsored .; Sanctioned:	03 Institu	te of lechin	01/	er

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ECE Self-Appraisal Form 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 .	05	05 (Rung)	Gred
B6	Additional Duties, Institute/Dept. level	.02	02	02 -	brood
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.	God
В9	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		2
	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 woul	ط اناده	+- f:-!-!	- /16 1
Additional	illiorillation woul	a iike	to furnish	n (It anv):

rincipal 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

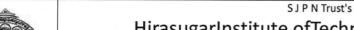
HOD Signature With seal

For Office use only

Principal Remarks / Recommendation: this performance is quite salssping

Accepted Signolary Nidasoshi Pin:591236

There



Methods(FEM) (18ME61)

Sem.

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Mech.Engg.Dept Self Appraisal Form AY:2022-23

Rev.01/11.03.2019

Lab(18MEL68)

To, Faculty Name: S. A. Goudadi The Principal Designation : Assistant Professor HSIT, Nidasoshi. 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:

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

II(DOME-II) (18ME62)

Sr. No.		Criterion eaching-Learning (70)			Points Earned in Self Sppraisal	Points Earned in HOD/Princip al Appraisal	Remarks	
A.	Teaching-	-Learning (70)				P		
A1	No. of Clas	ses Engaged			1	2		
	Odd Sem.	Subject 1(DOM)	50/50 <	10	10 /	w		
	Odd Sem.	Subject 2(CE)	50/50	10	10 /	CO		
	Even Sem.	Subject 3(FEM)	50/50 <	10	10	(0	0 00	
	Even sem.	Subject 4(DOME-II)	50/50	10	1,0<	10	600	
			Average Total	10	10	(0)2		
A2	Percentage	of Syllabus Covered	b					
	Odd Sem.	Subject 1(DOM)	100% 🗸	10	10 -	10		
00	Odd Selli.	Subject 2(CE)	100% <	10	10 /	10		
	Even Sem.	Subject 3(FEM)	100% /	10	10	10	600 d	
	Even Sem.	Subject 4(DOME-II)	100% <	10	10	LQ.	0	
		31 .	Average Total	10	(10)	(19)		
A3	University I	Results						
	Odd Sem.	Subject 1(DOM)	85.71	25	25 /	28		
	Oud Selli.	Subject 2(CE)	96 🖊	25	25 🗸	21	0	
	Even Sem.	Subject 3(FEM)	95	25	25 🖊	V	(00 a	
	Lven sem.	Subject 4(DOME-II)	(67)	25	20	20	00	
,	31	Aver	age Total	25	23.75	(Ha)		
A4	Feedback	Feedback						
	Odd Sem. Subject 1(DOM) Subject 2(CE)		96.11%	05	05 🗸	06	0	
			99.29% <	05	05	OS	1 800	
	Even Sem	ctit Subject 3(FEM)	96.12% /	05	05 🖊	98	(M)	
	15	Subject 4(DOME-II)	96.42%	05	05	950		
	6n	Nidasoshi Aver	age Total	05	(05)	(05)V		

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Mech.Engg.Dept Self Appraisal Form AY:2022-23

Rev.01/11.03.2019

Sr. No.	Criterio	on	Max. Points	Points earned in Self appraisal	Points earned inHOD/Princip al Appraisal	Remarks	
A5	Pedagogical Initiatives				1 9	я г	
		Subject 1(DOM)	04	04 /	04		
	Instruction Material	Subject 2(CE)	04	04 /	OH		
	(Hand written/Soft copy)	Subject 3(FEM)	04	04	04	Cod	
-		Subject 4(DOME-II)	04	04	04	(OP)	
	- 4 ×	Average Total	04	(04)	(OH)	a	
		Subject 1(DOM)	04	04	04	5	
	Power Point Presentation	Subject 2(CE)	04	04 /	04		
	Fower Foint Fresentation	Subject 3(FEM)	04	04	64	rod	
7		Subject 4(DOME-II)	04	04	gle /	60	
		Average Total	04	04	(oH)		
		Subject 1(DOM)	04	04	04		
- V	Working Models/Charts	Subject 2(CE)	04	04 /	OL	^	
	Working Models/Charts	Subject 3(FEM)	04	04 /	014	100	
	Pedagogical Initiatives	OL /	00				
		Average Total	04	(04)	(OH)		
	# E	Subject 1(DOM)	04	04	04		
		Subject 2(CE)	04	04 /	04		
		Subject 3(FEM)	04	04	Of	1 sod	
		Subject 4(DOME-II)	04	04	86	60	
		Average Total	04	04	(eh)	51	
		Subject 1(DOM)	04	04	CH		
	VTU Question Paper	Subject 2(CE)	04	04	Ole	0	
	Solutions	Subject 3(FEM)	04	04	OH	(000X	
P		Subject 4(DOME-II)	04	04	et e	00	
		Average Total	04	(04)	(04e)		
		Total (A)	70	68.75	169)		
В.	Other Contributions (30)					
B1	Workshops/STTP/FDP attend	ed/organized	02	01	0	ble	
B2				SMA		0	
	1 255 Ext. 1		05	05	03	600 X	
					7 1		
В3		- 1	02	02	02	brood	
-			5-20/5-73			60	
B4	studentsProjects (Applied:01;		03	03	03	G00 &	
	students rojects (Applied:01)	Sanctioned.03)					



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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	01e
B6	Additional Duties, Institute/Dept. level	02	02	02	Good
В7	Student Counseling/Mentoring	02	02 /	02	6000
В8	Special Lectures/seminars delivered/organized (Organized:01; Delivered:02 at Inter-institute level)	02	00	00	veeds
B9	Motivating and Training of students for Placements/Higherstudies/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	0.5	Good
B10	Special achievements (if any) (University/State/National/International level recognition)	02	02	02	6008
	Total (B)	30	24	(24)	1
	Grand Total (A+B)	100	92.75	1922	

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) Conselled PUC students by telephonic talk and counselled 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.

Faculty Signature with date

HOD Signature with seal

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Principal Remarks / Recommendation: this Performance is Sats to Sats t





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Mech.Engg.Dept
Self Appraisal Form
AY:2020-21

Rev.01/11.03.2019

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:

	Sem./Subject	Subject with code	Subject with code	Subject with code	Lab. with code
Subjects/Lab	Odd Sem.	Fluid Power	Elements of	Energy & Environment	
		Systems	Mechanical	(15ME562/17ME562)	1
		(15ME72/17ME72)	Engineering		
Handled			(18ME15)		
- indinanca	Even Sem.	Fluid Mechanics	Elements of		
		(18ME43)	Mechanical	*	
	Even Sem.		Engineering		
			(18ME25)		

Sr. No.		Criterion		Max. Points	Points earned in Self appraisal	Pointsearned in HOD/Principal Appraisal	Remarks
A.	Teachin	g-Learning (7	0)				
A1	No. of Classes Engaged					<u></u>	
		Subject 1	100	10	10		
	Odd Sem.	Subject 2	100	10	10		
		Subject 3	100	10	10		Good
	Even Sem.	Subject 4	100	10	10		7000
	Even Sem.	Subject 5	100	10	10	T 11 g	
_			Average Total	10	10	6	
A2	Percenta	ge of Syllabus Co	overed				
		Subject 1 -	100	10	10		
	Odd Sem.	Subject 2	100	10	10		
	Odd Selli.	Subject 3	100	10	10		
	Even	Subject 4	100	10	10		000
	Sem.	Subject 5	100	10	10		4009
		u	Average Total	10	10	(A)	
A3	University	y Results			,		
		Subject 1	95.16	25	25		
	Odd Sem.	Subject 2	96.5	25	25		
	Odd Selli.	Subject 3	89	25	24.5		
	Even	Subject 4	100	25	25		A. D
	Sem.	Subject 5	100	25	25		4000
			Average Total	25	25	205	
A4	Feedback				- 1		
	Odd Sem.	Subject 1	97.51	05	05		
	oud Sem.	Subject 2	95.86	05	05	^	

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Hirasugar Institute of Technology, Nidasoshi.

Self Appraisal Form

AY:2020-21

Mech.Engg.Dept

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		Subject 3	00.4	٥٢	0.5		
	Even	Subject 4	98.4	05	05		
	Sem.		99.56	05	05		
	Sem.	Subject 5	96.2	05	05		
	1		Average Total	05	05		
Sr. No.		Criterion		Max. Points	Pointsearned in Self	Pointsearned in HOD/Principal	Remarks
Λ.F.	Dadassa				appraisal	Appraisal	
A5	Pedagog	ical Initiatives					
			Subject 1	04	04		
	Instruction	n Material	Subject 2	04	04		
		tten/Soft copy)	Subject 3	04	04		
	(топ, ост сору,	Subject 4	04	04		1
			Subject 5	04	04		God
			Average To	tal 04	04	oM	'
	Power Poi	nt Presentation	Subject 1	04	04		
			Subject 2	04	04		σ
			Subject 3	04	04		
			Subject 4	04	04		
			Subject 5	04	04		Canb
			Average Tot		04	ân.	401
	Working N	/lodels/Charts	Subject 1	04	04	0 (
	Working I	noucis, cital ts	Subject 2	04	04		
			Subject 2	04	04		
			Subject 4	04	04		
		*	Subject 5	04	04		and
	A 1: 601		Average Tot		04	04	
	Audio/Vide		Subject 1	04	04		~
	(NPTEL/NL	DL/MOOCs etc.)	Subject 2	04	04		
			Subject 3	04	04		٨
			Subject 4	04	04		
	ž ,		Subject 5	04	04		De la constantina della consta
			Average Tot	al 04	04	Ø 12	
	VTU Quest	ion Paper	Subject 1	04	04		
	Solutions		Subject 2	04	04		
			Subject 3	04	04		A .
			Subject 4	04	04		
			Subject 5	04	04		Egon
			Average Total		04	84	
			Total (A		70		
B.	Other Co	ontributions		, , ,		ν.	
		s/STTP/FDP attend	•				
B1		01; Organized: 02	. •	02	01	81	
B2	Publication (Peer Revi	of articles in jour ewed:05; Scopus 02; Paid Journals:	Indexed :03; UG	C 05	. 05	05	



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Inculcating Values, Promoting Prosperity

Mech.Engg.Dept
Self Appraisal Form

AY:2020-21

Rev.01/11.03.2019

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	Grand Total (A+B)	100	97	(97).	1
	Total (B)	30	27	N	1
B10	Special achievements (if any) (University/State/National/International level recognition)	02	02	02	
B9	Projects. i) 10 Hours GATE Coaching:02 ii) 02 Hobby Projects: 02 iii) Placement Support and other activity: 01	05	05	07	
D	Motivating and Training of students for Placements/ Higherstudies/GATE/GRE/TOFEL/Hobby			IOV.	
B8	Special Lectures/seminars delivered/organized (Organized:01; Delivered:02 at Inter-institute level)-on NEP & UHV	02	02	0~	
B7	Student Counseling/Mentoring	02	02	02	
B6	Additional Duties,Institute/Dept. level	02	02	02	
B5	Participation in Funded ProjectsVGST/AICTE/DST/DRDO (Applied:02; Sanctioned: 05)	05	05	05	
B4	Guiding of PG/UG level Funded/ Sponsored students Projects (Applied: 01; Sanctioned: 03)	03	03	03	
В3	Papers presented/conference attended (Paper presented: 02; Attended: 01)	02	00	heeds huphin	L

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

Additional Information would like to furnish (If any):

- As a "Centre Superitendend" conducted NEET(UG)-2021 successfully
- Programme Coordinator for Unnat Bharat Abhiyana (UBA)
- F-attestaion officer for National Scholarship Port (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

MT, Nidasoshi

For Office use only

Principal Remarks / Recommendation:

n: 👂 ነ

his

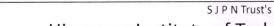
June

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Hirasugar Institute of Technology Nidasoshi- 591 236

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Hirasugar Institute of Technology, Nidasoshi.

Accredited at "A" Grade by NAAC, Programs acrredited by NBA: CSE, ECE, EEE, ME

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Self Appraisal Form 2020-21

CSE

Rev.01/11.03.2019

To.

Faculty Name: Prof. S. V. Manjaragi : Assistant Professor Designation The Principal

DOJ

Respected sir,

HSIT, Nidasoshi.

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

: 01.09.2004

	Sem./Subject	Subject with code	Subject with code	Lab. with code
Subjects /Lab	Odd Sem.	C Programming for Problem Solving(CPS):18CPS13	Cloud Computing & Applications (CCA):17CS742	
Handled	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	g-Learning (70))				
A1	No. of Classes Engaged						
	Odd Sem.	CPS-18CPS13	52/40	10	10		
	Odd Sem.	CCA-17CS742	50/40	10	10		
	From Come	CPS-18CPS23	50/40	10	10		^ ^
	Even Sem.	PAP-17CS664	46/40	10	10		
			Average Total	10	10	W	400
A2	Percentage of Syllabus Covered						
		CPS-18CPS13	100	10	10		
	Odd Sem.	CCA-17CS742	100	10	10		0
	Even	CPS-18CPS23	100	10	10		Cours
	Sem.	PAP-17CS664	100	10	10		Of or so
			Average Total	10	10	VO.	
А3	University	/ Results					
		CPS-18CPS13	72.41/82.16	25	22		177
	Odd Sem.	CCA-17CS742	100/100	25	25		0
	Even	CPS-18CPS23	100/82.16	25	25	6	1 00
	Sem.	PAP-17CS664	100/97.92	25	25		Dog
			Average Total	25	24.25	24.00	
A4	Feedback					,	
	Odd Sem.	CPS-18CPS13	90.25	05	05		
	Juu Seili.	CCA-17CS742	95.25	05	05		0
	Even	CPS-18CPS23	91.15	05	05		(180)
	Sem.	PAP-17CS664	100	05	05		
			Average Total	05	05	05	

SJP N Trust's

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

CSE Self Appraisal Form 2020-21

Rev.01/11.03.2019

	y AICTE, Recognized by Govt. of Karnataka and Affiliated to VTU Belagavi.
Approved t	A" Grade by NAAC, Programs acrredited by NBA: CSE, ECE, EEE, ME
Accredited at '	'A" Grade by NAAC, Programs acrredited by NBA. COL, LOL, LEL, ME

ir. Io.	Criterion		Max. Points	Points earned in Self appraisal	Points earned in HOD/Principal Appraisal	Remarks
45	Pedagogical Initiatives					
-	0 0	CPS-18CPS13	04	04		
	Instruction Material	CCA-17CS742	04	04		0
-	(Hand written/Soft copy)	CPS-18CPS23	04	04		Good
		PAP-17CS664	04	04		7
		Average Total	04	04	bu	
	Power Point Presentation	CPS-18CPS13	04	04		
		CCA-17CS742	04	04		٨
		CPS-18CPS23	04	04		1.00
)		PAP-17CS664	04	04		you.
		Average Total	04	04	04	
	Working Models/Charts	CPS-18CPS13	04	04		
		CCA-17CS742	04	04		
		CPS-18CPS23	04	04		(0
		PAP-17CS664	04	04		Good.
		Average Total	04	04	Oy .	
	Audio/Video aids	CPS-18CPS13	04	04		
	(NPTEL/NDL/MOOCs etc.)	CCA-17CS742	04	04	E-Vision	
		CPS-18CPS23	04	04		_ ^
		PAP-17CS664	04	04		Geo 1,
		Average Total	04	04	64	•
	VTU Question Paper	CPS-18CPS13	04	04		
	Solutions	CCA-17CS742	04	04		
_		CPS-18CPS23	04	04		Good
		PAP-17CS664	04	04		70
		Average Total	04	04	04	
		Total (A)	70	69.25		
В.	Other Contributions	(30)				
	Workshops/STTP/FDP atter		02	01		
B1	(Attended:01; Organized: 0	2. Minimum of 3			01	0
	1 -	2, 1411111111111111111111111111111111111				
D.2	days) Publication of articles in jou	ırnals	05	02		1 2008
B2	(Peer Reviewed:05; Scop	us Indexed :03			02	Wedges
	UGC Approved: 02; Paid Jo	urnals: 00)				anfin
D2	11 6	nce attended	02	02	02	1
В3	(Paper presented: 02; Atte	nded: 01)			0 2	hos
D 4		nded/ Sponsored	03	03	10 A	
B4	students Projects (Applied	:01:			0/5	
	Students Hojects (Applied	/				



SJP N Trust's

Hirasugar Institute of Technology, Nidasoshi.

Inculcating Values, Promoting Prosperity

Self Appraisal Form 2020-21

CSE

Rev.01/11.03.2019

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

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	Cool
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	0~	Gool
39	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	0 4	Good
B10	Special achievements (if any) (University/State/National/International level recognition)	02	00	vaped	reeds
	Total (B)	30	20	w.	
	Grand Total (A+B)	100	89.25	(80.00)	

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 Portor wa

Hirasugar institute of Technology Nidaseshi-591 236

S J P N Trusts' Hirasugar Institute of Technology, Nidasoshi

CONFIDENTIAL REPORT OF TECHNICAL SUPPORTING STAFF

(To be submitted by the HOD)

Date: 15.11.2021

Staff Name: Sri. A. B. Sankeshwan Dept: Mechanical Engy Designation: Foreman

Date of joining the Institute: 23.09, 1999

Date of submission of Self Assessment Form: 15.11.2021

(Use only Good or Satisfactory or Not Satisfactory)

Punctuality and regularity: Gwd

Practical knowledge and competency: God

Way & Method of handling equipments/tools/accessories:

Communication skills: God

Cooperation & Coordination with the colleagues:

Behavior with the superiors: Good

Availability for other Departmental work: Good

Involvement in Institutional work: Good

Feedback from the students: Good

Overall attitude & behavior: God

Any other remarks:

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. Badigel Dept: Mechanical Engy. 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: (, sod

Practical knowledge and competency:

Way & Method of handling equipments/tools/accessories:

Communication skills: God

Cooperation & Coordination with the colleagues:

Behavior with the superiors: God

Availability for other Departmental work: Good

Involvement in Institutional work: 4

Feedback from the students:

Overall attitude & behavior: 4 600

Any other remarks:

HOD's Signature with seal HOO

Mechanical Engo. 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, IST 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 9448149242

Mobile/Landline 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

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

Website: http://www.uiic.co.in
Printed By: MAL28821 @ 18/03/2019 6:36:12 PM

Policy Stamps not affixed for want of Stock





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

Policy No.	2401024218P116	463211			
Name Of Insured/ID	HIRASUGAR INST	ITUTE OF TECHN	OLOGY NIDASOSHI /191	8521427	7
Tel.(O)		Fax	Tel. (R)	Mobile	
Business/Occupation	None	Email	Commence of the commence of th		
Period Of Insurance	From00:00 Hrs of	20/03/2019 To N	4idnight of 19/03/2020		

Coinsurance 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: ₹ 88100000

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: 1000007- EACH, HOSPITALISATION BENIFIT IS RESTRICTED TO RS: 500007- 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
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:	4218I116463211 & 18/03/2019	
Amount Eubiact to Bayare	o Chargos-NTI			

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 80 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

http://gccore.uiic.in/Configurator/UnderwrittingMasters/reports/frptPolicySchedule.as... 18/03/2019

8.0



UNITED INDIA INSURANCE COMPANY LIMITED

NIPANI BRANCH OFFICE 24, IST 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 : AGD0101164

Agent Code Mobile/Landline

Number/Email

9448149242 maha mn@rediff.com

LET US JOIN THE FIGHT AGAINST CORRUPTION PLEASE TAKE THE PLEDGE AT https://piedge.cvc.nic

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

 $http://gccore.uiic.in/Configurator/Underwritting Masters/reports/frmPolicySchedule.aspx? Re... \\08/10/18$

PolicyNo.:2401024718P106225725 MICRO-INSURANCE PRODUCT-JANATA PERSONAL ACCIDENT - GROUP POLICY UIN NO.UIN NO. IRDAI/HI/T/UII/P-P/V.1/8/2015-16





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.			A
Name Of Insured / ID	HIRASUGAR INSTITUTE OF TECHNOLOGY NIDASOSHI / 1918521427				
Tel.(0)	Fa	ax	Tel.(R)		Mobile
Business/Occupation	None		Email		
Period of Insurance	From 0	0:00 Hours of 11/08/	2018	То	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 :	

PolicyNo.: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:	4718I106225725 & 10/08/2018

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding $\overline{\xi}$ 1 lakh or a claim for refund of premium exceeding $\overline{\xi}$ 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 stamp here. for want of Stock







Bajai 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, 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

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

NA

Midnight

No Details

STATE CODE/NAME 29 - Karnataka

GSTIN / UIN 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 @ Additional Discount@

0 % 0 %

Base Premium

8,288.00

Special Discount

0

Net Premium

8,288.00

Terrorism** Surcharge

Stamp Duty State GST (9%)

746 00 746.00

Central GST (9%) **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 ATTTACHED. Beneficiary will be corporate.

Addhaar No and PAN NO/Form 60 will be required at the time of claims mandatorily

Bank RM Employee Code:

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

neral Insurance Company Ltd.









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. MH003753522201920M Defaced No. 0002277216201920 ORDER NO.CSD/93/2019/3587/19 ORDER DATED 24.07.2019DEFACED 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,IST 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_mn@rediff.com

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

			JCHLDOLL		
Policy No.	2401024219P1	16766972			
Name Of Insured/ID	HIRASUGAR IN	ISTITUTE OF TECHNO	DLOGY NIDASOSHI /19:	18521427	
Tel.(O)		Fax	Tel.	Mobile	
Business/Occupation	None	Email			
Period Of Insurance	From00:00 Hrs	of 18/03/2020 To M	lidnight 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 EXPENS	ES 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:	4219I116766972 & 14/04/2020

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 CAS Policy Stamps not affixed for want of Stock

http://gccore.uiic.in/Configurator/Under s/reports/frmPolicySchedule.as... 20/05/2020





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, Madiwale Arcade, 1st floor,, Hasmi Manzil, Club Road, , ,

Belgaum-590001 Phone No :0831-4215475

summons, etc.: 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

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

Midnight

No Details

GSTIN / UIN

Place of Supply/State 29 - Karnataka

29AABCB5730G1ZT

Code/Name Invoice No:

208324403/1

1,49,00,000.00

Company GST No: Company PAN: Description

AABCB5730G

Sum Insured (Rs)

149 - Total members covered. **Highest Sum Insured**

100000

Additional** Loading @

0 %

Additional Discount@

0 %

Base Premium Special Discount 7,577.00

Net Premium

7,577.00

Terrorism** Surcharge

Stamp Duty

State GST (9%)

682.00 682 00

Central GST (9%) **Final Premium**

8,941.00

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 Remainsis covered up to 5000/-,Family Transportation is covered up to 5000/-,Children Education Bonus iscovered upto maximum Rs. 5000 per child for maximum 2 children below age of 19years, applic-

able in theevent of an admissible Accidental Death claim.

Warranties

Basic:- Death + Children Education Bonus (Sum insured limited to 100 times of monthly salary or Rs.

1lakhs whichever is Less).

Special Conditions

As per the policy wordings attached.

Comments

Previous Policy Number: OG-20-1713-9902-0000002. Beneficiary will be corporate.

Bank RM Employee Code:

Premium Collection Details

Agency Code BAG10028453

Channel Name: ML

Agency Name: SACHIN A BHADALE

Contact No: 9035073212/0

Email - sachin24may@gmail.com

0 / 205457803 / Rs. 8,940.00 , [Receipt No/Collection No/Amount] 1704-0

CO.

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

*** 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

^{***} All Premium figures are in Rupee.





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 Albanz 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. MH013770432201920M Defaced No. 0000433117202021 Order No.CSD/22/2020/1432/2020 Order Dated 09.06.2020Defaced 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: Contact No: 0836-2356827,0836-4253666; Fax No: 0836-42655555

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 Ad- vice/Direct Credit	6205227D1456	14/08/2020	Bank Of Amer- ica_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,IST 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

Agent Code Mobile/Landline

Number/Email

SMT. MAHANANDA M.

: NAIKMANI

: AGD0101164

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

PolicyNo.:2401024720P114839013

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.	2401024720P114839013	Prev. P	ol. No.		
Name Of Insured /	MR THE PRINCIPAL / 2310	4303250		2-1	
D Γel.(Ο)		Fax	Tel.(R)		Mobile
Business/Occupation	None		Email		
Period of Insurance		16:49 Hours	of 17/03/2021	То	Midnight of 16/03/2022

A 125 FIL A		
Coinsurance	UIIC 240102 : 100%	
PREMIUM :	hirty-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 :	

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

Customer GST/UIN No	o.:	Office GST No.:	29AAACU5552C1ZF
SAC Code:	9971	Invoice No. & Date:	4720I114839013 & 19/03/2021

Anti Money Laundering Clause: In the event of a claim under the policy exceeding $\overline{\zeta}$ 1 lakh or a claim for refund of premium exceeding $\overline{\zeta}$ 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 ted India Insurance Co. Ltd.

constituted Attorney(s)

Policy Stamps not affixer for want of Stock



Inward A

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-22-1713-9902-00000002

Product Period of Insurance **GROUP PERSONAL ACCIDENT**

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: **GSTIN / UIN**

No Details NA

No Details

Place of Supply/State 29 - Karnataka

Code/Name

Company GST No: Company PAN:

29AABCB5730G1ZT

Invoice No:

308236967/1

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

Highest Sum Insured

100000

AABCB5730G

Additional** Loading @

0 %

Additional Discount@

0 % 6.966.00

Base Premium Special Discount

0

Net Premium

6.966.00

Terrorism** Surcharge

Stamp Duty

State GST (9%)

627.00

Central GST (9%) **Final Premium**

627.00 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 theInsurer 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 :

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

flex is subject to the standard policy wordings, warranties and conditions applicable for this product in addition to any specific

ranty of condition attached nz 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 IN- DIA	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.

* Charles DO RO receipt is valid subject to realisation of the instrument.

Consolidated Stamp Duty of Rs. 1 paid towards Revenue Stamps vide Challan No MH097157206202021M 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

> DAJAJ ALLIANZ GENERAL INSURANCE CO. LTD. Madiwale Arcade, 3935/26A, 1st Floor, Hasmi Manzil, Club Road, Belagavi-590 001

2: 0831-4215475





UNITED INDIA INSURANCE COMPANY LIMITED

NIPANI BRANCH OFFICE 24, IST 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 9448149242

Mobile/Landline Number/Email

maha mn@rediff.com

The genuineness of the policy can be verified through "Verify Your Policy" link at www.ulic.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). RESD. & HEAD OFFICE, 24, WHITES ROAD, CHENNAI - 600014. Website: http://www.uiic.co.in Printed By : KIRS2106 @ 29/03/2022 3:11:19 PM

Hirasugar Institute Truski

Z

This document is digitally signed

Signer: N MOHAN SANKAR Date: Tue, Mar 29, 2022 5: Location: United India India Reason: Signing Policy for

PolicyNo.:2401024721P113658265 MICRO-INSURANCE PRODUCT-JANATA PERSONAL ACCIDENT - GROUP POLICY UIN NO.UIN NO. IRDAI/HIT/UIT/P-P/V-I/B/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.	2401024721P113658265	Prev. Pol. No.	2401024720	P114839013	
Name Of Insured /	MR THE PRINCIPAL / 23104303250	0			o ©
Tel.(0)		Fax	Tel.(R)		Mobile
Business/Occupation	None		Email		
Period of Insurance	From	00:00 Hours of 17/03	/2022	То	Midnight of 16/03/2023

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

Insured Details: As Per Annexure Attached.

1 Yr	Policy Variant:	Named
ALL THE 598(FIVE H INSTITUTE OF TECH YEAR	JNDRED NIGHTY EIGHT) MEMBERS MENTION NOLOGY, NIDASOSHI" ARE COVERED FOR ON	ED IN THE LIST GIVEN BY "HIRASUGAR NE LACK EACH FOR THE TERM ONE
I	NSTITUTE OF TECH	ALL THE 598(FIVE HUNDRED NIGHTY EIGHT) MEMBERS MENTION NSTITUTE OF TECHNOLOGY, NIDASOSHI* ARE COVERED FOR O

Net Premium:	35,880.00	
CGST(0%):	0.00	
SGST(0%):	7 0.00	
UTGST(0%):	0.00	
IGST(0%):	0.00	
Stamp Duty:	5.00	
Total:	35,880.00	
Receipt No:	101240102211154564	
Receipt Date:	29/03/20	
Agency/Broker Code :	AGD0101164	
Dev officer code :		



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

Amount Subject to Reverse	Charges-NIL			
SAC Code:	997139	Invoice No. & Date:	4/211113030203 0 21,11	
Customer GST/UIN No.:			47211113658265 & 29/03/2022	
		Office GST No.:	29AAACU5552C1ZF	

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding \$\frac{\pi}{1}\$ lakh or a claim for refund of premium exceeding \$\frac{\pi}{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 Insuran

Duly Constituted Attorney(\$)
Underwritten By - K1552106 (BO UW CUM CASHIER)

Policy Stamps not affixed for want of Stock





Inward No

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 Period of Insurance

From 00:00:00 27-SEP-22 To 26-SEP-23

Midnight

GROUP PERSONAL ACCIDENT

Policy Issued On

21-SEP-22

Co-Insurance Details

Own Share: 100%

No Details

Insured Name Insured Address HIRASUGAR INSTITUTE OF TECHNOLOGY

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

Bank Details: GSTIN / UIN

NA

No Details

Place of Supply/State 29 - Karnataka

Code/Name

Company GST No:

29AABCB5730G1ZT

Invoice No:

360789271/1

Company PAN:

AABCB5730G

Description Sum Insured (Rs) TOTAL 132 MEMBERS COVRED 1,32,00,000.00 100000

Highest Sum Insured

Additional** Loading @

0 %

Additional Discount@

0 % 6,712.00

Base Premium Special Discount

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

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-22-1713-9902-0000002 Beneficiary will be employee.

Bank RM Employee Code:

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, 1ct Floor Hasmi Manzil

^{***} All Premium figures are in Rupee.



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

or a On Betrair of Baja Allianz General Insurance Company Ltd.



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

Regd Office : Bajat Alfanz 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/-/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 tanmay chandragiri02





UNITED INDIA INSURANCE COMPANY LIMITED

NIPANI BRANCH OFFICE 24,IST 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 9448149242

Mobile/Landline 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: KIRS2106 @ 16/03/2023 5:23:53 PM

This document is digitally signed

Signer: AMAR KUMAR SINHA Date: Thu, Mar 16, 2023 17:22:5 IST Location: United India Insurance Company Ltd Reason: Signing Policy for UIC





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

2401024722P113317644	Prev. P	ol. No.		
HIRASUGAR INSTITUTE OF TECHNOLOGY NIDASOSHI / 1918521427				
	Fax	Tel.(R)		Mobile
None		Email		
Business/Occupation None Period of Insurance From		of 15/03/2023	То	Midnight of 14/03/2024
	HIRASUGAR INSTITUTE	HIRASUGAR INSTITUTE OF TECHNOLOGY NIDAS Fax None	HIRASUGAR INSTITUTE OF TECHNOLOGY NIDASOSHI / 1918521427	HIRASUGAR INSTITUTE OF TECHNOLOGY NIDASOSHI / 1918521427

Coinsurance		
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(SEVE "HIRASUGAR INST TERM ONE YEAR.	N HUNDRED TWENTY SEVEN) MEMBERS MENT ITUTE OF TECHNOLOGY NIDASOSHI" ARE CO	TONED IN THE LIST GIVEN BY OVERED FOR ONE LAKH EACH FOR THE
Underwriting Remarks:			



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

A Codo:	AGD0101164
Agency/Broker Code :	BD52082
BDIS Code :	

Customer GST/UDN No.: SAC Code:

Amount Subject to Reverse Charges-HCL

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

Anti Honey Laundering Clause: -ûn the event 1 lakh, the insured will comply with the prowell as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRU

Date of Proposal and Declaration: 15/13/28 IN WITNESS WHEREOF, the undersigned being March 2023 .

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

المثلكة

Duly Constituted Attorney(s)

Underwritten By - KIR52106 (BO U'W CUM C



CIDENT - GROUP POLICY 2015-16

	Mobile
-	Midnight of 14/03/2024
2.0	14/03/2024

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

₹	43,620.00
₹	0.00
₹	0.00
₹	0.00
₹	0.00
₹	5.00
7	43,620.00
1012401	022211541218:
	16/03/2023
	1012401

AGD0101164
BD52082

Customer GST/UIN No.:		Office GST No.:	29AAACU5552C1ZF	
SAC Code: 997139		Invoice No. & Date:	4722I113317644 & 16/03/2023	

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 $\overline{\xi}$ 1 lakh or a claim for refund of premium exceeding $\overline{\xi}$ 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. 10 hills

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



Policy Standburget affixed Staffp here.



SJPN Trust's

Hirasugar Institute of Technology, Nidasoshi

Approved by AICTE, New Delhi, Permanently Affiliated to VTU, Belagavi Recognized under2(f) &12B of UGC Act, 1956 Accredited at 'A' Grade by NAAC &Programmes Accredited by NBA: CSE &ECE Criterian-6
ESI Beneficiaries

NAAC

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



PRINCIPAL
Hirasugar Institute of Technology
Nidesochi-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

12	No.	A		
o,			Date	19/09/2022
		A.		
A/s				
		Sadaghi	V	
Vamo	of I.P. Sri./Smt	7000		
	ance No.	5523200		
HOUL	atto ive			
Dear	Sir/s,		·	ad a certificate of incapacity
	The above nam	ed employee of your	actory has published	ed a certificate of incapacity A and has declared
for th	ne period from	6622	Il about ported	Ha/She has further declared
that	ne/she has not work	ed on any day during	ine above periou, i	He/She has further declared
that	he/she has not rece	eived wages for any m	Save/Holiday/week	ly off/lay off and was not on
strike				
	I shall be grate	aful for your confirma	dou ou me ioni c	appended within 10 days of
rece	ipt of this form.		276	Your's faithfully,
				>
		o1	N. P.	- APANCH MANAGER
		Sadash	iv Birang	Ins. No. 5859 232095
Nan	ne of the insured pe	erson Sri/Şmt		ins. No. 2002
	Returned with	the semestre that the	employee in quest	ion has not worked for any
day	during the period	rom 06/08	3/2022 to	3/5/2022
H in	further confirmed to	hat :		
16 13			4	-
a)	He/She had remai	ned on leave with wag	es from	to
b)		a chies vehiday as to be	aces from	
c)	The same of the sa	I SE ILL CAMPAGE FEREN		
	Un/Cha was on la	v off with wages from		
d)	Un/Chawas on et	rike from	to	if the I.P. is
e)	neid any wares f	or any days during th	e above period su	ubsequently the same will be
,	notified to you in d	ue course.	552	a state of the lactical
2.	The day proceed	ing the first da of abs	ence / was / was i	not a *holiday for the Insured
	person.			D. C. L.
		Institutat	a Decimation	Signature
		achia S	de No.	sugar Institute of Technolo
"St	rike out if not applic		GB 140.	CHIDASOSHI-59123612
	47: W.	Nidasoshi	THE COUNTY OF TH	HISTORY OF THE STATE OF THE STA
2	93 irangado	# Pin-591 236	John	
		101.	8/	
		Belagavi		
		- Committee		



Employees State Insurance Corporation



REG. Form-7 (CONFIDENTIAL)

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

FIRST/ INTERMEDIATE/ FINAL CERTIFICATE

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

		(2 July 2 July 10 (2010 Disp.)	
		(Regulation 57, 58, 59)	Serial No ESICDSKNBEKSR02202679
	ಕಾವಿ	೧೯ಕರ ರಾಜ್ಯ ವಿಮಾಡಕತ್ತಾಲ೧ ೧೯ತವಾಟ್ಟಿಗಳ್ಳಿ ಬೆಳಗಾವಿ–590002	Signature ov Thurst I
Date of First Certificate of Sp	कुरा क	್ತಾತವಾತ್ರಜ್ಞೆಗಳಿ ಬೆಳಗಾವಿ-5900	Signature or Thumb Impression of the I.P.
Sickness or Disablement	06-Jun-2022		
Name Mr. SADASHIV	/ BIRANAGADDI S/W	_	Branch Office
		/D/o	Ins. No5859232095
Certified that I Have Exam	mined you today and that in my o	opinion:	
	(I)* You now need medical tr	eatment attendance & abstention fro	m work on modical ground
	-) the reason or (diagnos	313)	Work on medical grounds
	Fracture of femur, part unsp	pecified, right side, right sid,	
	(ii)*You have continued to nee	ed medical attendance & abstention for	form work on modical ground
Attestation by Med.	upto and including this day b	y reason of (diagnosis)	Work of medical grounds
Officer	(iii)* In my opinion you will be	fit to resume work tomorrow/on	
100 miles	, , , , , , , , , , , , , , , , , , , ,	ne to resume work tomorrow/on	_14-Sep-2022
IOTE: The date of fitness irst and Final Certificate.	must in no case be later than the	third day after the date of the exam	
ate: _13-Sep-2022	Signature		- 3040 2000
	Insurance Medical Off	ficer	ಆಡಳಿತ ವಿಮಾ ಪೈದ್ಯಾಧಿಕಾರಿ ಕ್ರಾ <u>ರಾ. ವಿಮಾ ಚಿಕಿತ್ಸಾಲ</u> ಯ ಕೋತವಾ <mark>ಲಗಲ್ಲಿ ಸತ್ಯಾ</mark> ತ್ಯ ಚೌಕ
IPORTANT:	Name in Block Letter	DR. SANJU SHIVAPPA LAMA	ಕ್ಯೀತವಾರಗಲ್ಲಿ ಕಾತ್ರ್ಯ ಒಳ್ಳ
Any person who makes fa person shall be punishable	Ise statement or representation for the with imprisonment upto 6 months or	e Purpose of obtaining benefit whether for	ಚಳಗಾವ-590 ೧೧2 r himself/ some other
This form should be comp		to the appropriate Day is an	pe penal deduction of
	with date, the claim form to avoid de		
	1		
			10 E

ಎಲಂದೆ: त्रवार्थि धर्मतेने ಇಆಕ್ಟಿ ವಿಯನ್ 28. focus 83 Des Aug.

क्षिण्या जी व वर क्ष्मित्र से निक्ति का क्षित्र क्षित्र Dis shed.

್ರಿತಂದು: Eel ಸ್ಪತ್ರ ತುಣಿತುದ್ದ ಬಾರ್ಡ-10 ಹಾನ್ EST BACAS Share Barras Thans

लाया क्षेत्र क्षेत्राक्ष्य क्ष्मिय्यक्षेत्र भेत्रहें क्षण्यम् estro Joeg यित्रहें दत नागे व नागित क्षित्रिक राष्ट्र वाग्न 06/06/2022 3027 Rues & Sec Breage 2007 2) 6/08 Don oyagerodar. Bolood ama aclaston 002 13/09/2020 garold offered form exect Euslin Risale.

Day willen ESD wear susper as more -10 wil \$50 kizegord ermog ESI Dowsowies speed Over our susser of roma or she of brz onzag

works shows,

Birangadai (Sorar ODNA)

CONFIDENTIAL

Por

FORM-10 (Reg. 52-A)



BRANCH OFFICE : Employees' State Insurance Corporation

Limpicy See
To, Date 19/08/2022
M/s.
Name of I.P. Sri./Smt. Caclarty
Insurance No Department
Dear Sir/s,
The above named employee of your factory has substituted
for the period from
for the period from to to the last further 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 that he/she has not received wages for any leave/holiday/weekly off/lay off and was not on
that he/she has not received wages for any location
strike for the above period of incapacity. I shall be grateful for your confirmation on the form appended within 10 days of
(L' PRANCHIMANAGER
Gadhashiva Birangaddi BRANCHMANAGER Ins. No. 5859232095
Returned with the remarks that the employee in the 16/08/2022
day during the period from 06 06 2022 to 10 10 10 10 10 10 10 10 10 10 10 10 10
ttie further confirmed that :
a) He/She had remained on leave with wages from to to
a) He/She had remained on leave with wages fromto
b) He/She was remained on holiday with wages fromto
d) He/She was on lay off with wages from to if the I.P. is e) He/She was on strike from to period subsequently the same will be
naid any wages for any days during the above period subsequently
notified to you in due course. The day proceeding the first da of absence / was / was not a *holiday for the Insured* 2. The day proceeding the first da of absence / was / was not a *holiday for the Insured*
person. PRINGIPATURE Name & Designation PRINGIPATURE
Name & Designation PKINISignature Strike out if not applicable. Some Code No. Hirasugar Institute of Technol
*Strike out if not applicable. Code No. Hirasugar Institute of rectinor Nidasoshi
*Strike out if not applicable. Name & Designation Nicode No. Nidasoshi Pin-591 236
*/
The state of the s



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-3 (CONFIDENTIAL)

SPECIAL INTERMEDIATE CERTIFICATE

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

(Regulation 61 and 89-B)

	(Regulation of and 69-b)	
		Serial No ESICDSKNBEKSR02202398
	ಕಾರ್ಮಿಕರ ರಾಜ್ಯ ವಿಮಾಡಿಸಿತ್ತಾಲರ ಕೋತವಾಲ ಗಲ್ಲಿ ,ಬೆಳಗಾವಿ–590002.	D. L. Birangaddi
Date of First Certificate of Spel	l of	Signature or Thumb Impression of the I.P.
Sickness or Disablement:	<u>06-Jun-2022</u>	Employer's Code No.
		Branch Office
To Mr. SADASHIV BIRA	NAGADDI S/W/D/o	Ins. No5859232095
	Certified that I have examined your 16-Aug 2022 to do	
	Certified that I have examined you16-Aug-2022 today have continued to need medical treatment and have remain to and including this day by reason of Fracture of femur, right sid,	ed incapable to work up
Attestation by Med. Officer	I further certify that by judging your present condition it is of such a character that it will be unnecessary to see you for more frequently than once in4 weeks, and you will require medical treatment and will remain incap the end of12-Sep-2022_ weeks from this date I propose to issue certificates in this form at the interval stat so long as your condition does not require more frequent att In my opinion you should now/ need not be referred to a Me you are permanently disabled.	the purpose of treatment vable to work at least up to ted above, endance.
A	504.00	
Any other remarks by the Medical Officer	, DOA: 06-Jun-2022, DOD: 13-Jun-2022	
Date: 16-Aug-2022	Signature	
	Insurance Medical Officer with rubber stamp	
	Name in Block letter DR. SANJU SHIVAPPA LAMANI	ಕಾ. ರಾ. ವಿಮಾ ಚಿತ್ರಾಗಿ ಎರಡಿಗ
		ಕಾ. ರಾ. ವಿವ್ಯೂಟ್ಲ

కాం, రాం, విచ్చూ టిశ్రీన్నాలయ కుండవాలగల్లి, జాస్క్రీ టెళ్ల బోగాని-590 రాం

BARBER, OC 28 13 8

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28268 24. 0.24.13 2002 2000

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D4081-19.8.2022-

CSIS, 29 7, 38
Sonsi 2952 rd
Birangada:

From,

CONFIDENTIAL

FORM-10 (Reg. 52-A)



BRANCH OFFICE : Employees' State Insurance Corporation

To,	- Date 5/8/2023
M/s	4
IVI 3 -	
	2 1-
Name of I.P. Sri./Smt. Secone	LOM
Walled I.F. Sh. John S. 7 19 078	Department
Insurance No. <u>C & C & 3 2 3 19 578</u>	Department
Dawn Cirls	_
Dear Sir/s, The chave named employee of your fa	actory has submitted a certificate of incapacity
THE ADDVETIZATION OF THE TOTAL	to 4/8/2) and has declared
for the period from 2215125 that he/she has not worked on any day during to	he shove period. He/She has further declared
that he/she has not received wages for any le	avalholidav/weekly off/lay off and was not on
that ne/sne has not received wages for any re-	additionally moonly of the
strike for the above period of incapacity.	ion on the form appended within 10 days of
	on on the form appointed within the angle
receipt of this form.	Your's faithfully,
	Total o total is only
	6
genting .	BRANCHMANAGER
Name of the insured person Sri/Smt Ba Sav	29 5 200 Ins. No
Dolumed with the remarks that the e	molovee in question has not worked for any
day during the period from 27 5 20	23 to 4/8/2023
It is further confirmed that :	Michigan Stringwarden - Might Schrift - Might
it is futurer committee that.	
a) He/She had remained on leave with wage	s fromto
Living was remained on holiday with wa	ges fromlo
A S A STATE OF THE PARTY OF THE	TE I
	to.
d) He/She was on lay off with wages from	if the I.P. is
e) He/She was on strike from	above period subsequently the same will he
paid any wages for any days during the	above period subsequently the same will be
notified to you in due course.	nce / was / was not a *holiday for the insured
	log I was not a formal in
person.	A GOVERNMENT OF THE PARTY OF TH
Nam.	e & Designation PRINCIPAL Signature
*Strike out if not applicable. Code	No. Hirasugar institute of Technology
Anna Are it its allerance.	midaugai manute di redindogy
	NIDASOSHI-591236/

ころのできるので 857 5788 03/03/2 c5187-- न्याच्या (८००) विह्या स Duson Wegosion 2.58.3 568) = 426,05 2015 CT1010 M. 25. 12 Des 84 = (60) (3516513- = GE165 6,805) 9/8.8.98 3/36 SIES 3/50 B USSSIV. 8.5/10 Mesters (ठाडर क्रिक्टिक प्राट) हाराघीपुरः ल प्रहिट - 006 2.25 M BOSS) 5/08/25 5/08/508 55) = (6005 Bas 7. 25. 12 6055) 2898 DE SEN 300 K8) & 250 Bres 5/692 あるかを見のる もっとい いろうろ そりをってあるり 500p3 3 B 2002 38. 582/3

B262: 4.8.7093

(338 Test 109) 3/05491. 3351 S.10



ಕೆ.ಎಲ್.ಇ. ಸಂಸ್ಥೆಯ ಡಾ. ಪ್ರಭಾಕರ ಕೋರೆ ಆಸ್ಪತ್ರೆ ಮತ್ತು ವೈದ್ಯಕೀಯ ಸಂಶೋಧನಾ ಕೇಂದ್ರ ನೆಹರು ನಗರ, ಬೆಳಗಾವಿ - 590 010, ಕರ್ನಾಟಕ



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

0831 - 2473777 (16 Lines) Phone

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. clinical diagnosis is RECURRENT SHOULER 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. Prebhakar Kore i k soltal & 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

REG. Form-7 (CONFIDENTIAL)

FIRST/ INTERMEDIATE/ FINAL-CERTIFICATE

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

	(Regulation 57	7, 58, 59)	Serial No ESICDSKNBEI	KSR02301791
	ಕಾರ್ಮಕರ ರಾಜ್ಯ ವಿ	a significant	10 Bust	1.5.3
	ಕೋತವಾ ಕಟ್ಟ್ಕೇಳಿ	50002	Signature or Thumb Impression	of the I.P.
Date of First Certificate of Spell of Sickness or Disablement 27-	-May-2023		Employer's Code No.	
Sickless of Disablement 27-	-iviay-2023		Branch Office	
Name Mr. BASAVARAJ SIDDA SOOJI	S/W/D/o		Ins. No. <u>5859231958</u>	
rtified that I Have Examined you toda	y and that in my opinion:			
(i)* Y	ou now need medical treatment atte	ndance & abstention from	work on medical ground	
by	y the reason of (diagnosis)			
	u have continued to need medical at		m work on medical	
gr	rounds upto and including this day by reas			
	Fracture of unspecified body region Flenoid labrum, Rt shoulder bankar			
	E STOULGE DANKE	to damp, misacria lesio	The Chip # of Oleriold labit	<u>F. 1</u>
Attestation by Med.	*			
Officer (iii)* Ir	n my opinion you will be fit to resum	e work tomorrow/on		
Any other remarks , DOA: by the Medical Officer	27-May-2023, DOD: 06-Jun-2023			
· - · · · · · · · · · · · · · · · · · ·			H	
NOTE: The date of fitness must in no ca ertificate.	se be later than the third day after the da	te of the examination in case		0 0-
			್ರಡಳಿತ ವಿಮ	ಗಾ ವೃದ್ಯಾಧಕ
Pate: 07 Jun 2022		;	ಕಾ. ರಾ. ಕ	ರಾ ವೈದ್ಯಾಧಿಕ ಯಾ ಚಿಕಿತ್ಸಾಳಿ ಲಗಲ್ಲಿ, ಶಾಸ್ತ್ರೀ ಚ
Date:07-Jun-2023	Signature		ಕೋತವಾ	ಲಗಲ್ಲಿ, ಶಾಸ್ತ್ರೀ ಚ
	Insurance Medical Officer		ಚಿಳಗ	Ranse99.002
IMPORTANT:	Name in Block Letter DR. S	SANJU SHIVAPPA LAMA	NI	
	ment or representation for the Purpose of prisonment upto 6 months or fine upto R		r himself/ some other	
	d submitted WITHOUT DELAY to the appr ith regulation 99 of ESI (General) Regulat		pe penal deduction of	
Insured person must sign, with dat	te, the claim form to avoid delay and inco	nvenience.		

CONFIDENTIAL

FORM-10 (Reg. 52-A)



BRANCH OFFICE : Employees' State Insurance Corporation

	Employees' State Insurance Corporation
To	Date 1016/2022
M/	S
	me of I.P. Sri./Smt. Durdund mallappe surance No. 1859-31972 Department
for the the	ar Sir/s, The above named employee of your factory has submitted a certificate of incapacity the period from 1010 to 100 for and has declared the/she has not worked on any day during the above period, He/She has further declared the/she has not received wages for any leave/holiday/weekly off/lay off and was not or ke for the above period of incapacity.
rec	I shall be grateful for your confirmation on the form appended within 10 days o elpt of this form. Your's faithfully,
	Dusadundi M Madihalli BRANCHMANAGER me of the insured person Sri/Smt Ins. No. Returned with the remarks that the employee in question has not worked for any during the period from 11-5-2022 to 10/06/2022
t is	
-1	further confirmed that :
o) ;) i)	He/She had remained on leave with wages from
a) c) d) 2)	He/She had remained on leave with wages fromto



Employees State Insurance Corporation



DO NOT MUTILATE THE QR CODE

REG. Form-7 (CONFIDENTIAL)

Print Date: 08-Jun-2022

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

FIRST/ INTERMEDIATE/ FINAL CERTIFICATE

Yamunapura, KA (ESIS Disp.)

		(Regulation	57, 58, 59)	Serial No	ESICDSKNBEYAM02200728
		The John of the second	neder of the maids	Ļ	This
		admit a nom	enong regime com	Signature	or Thumb Impression of the I.P.
		ಯಮನಾಪ್ರಾದ್ವ	ස්ද්ඥාධ -598610 np Dispensary	Signature (or Thumb Impression of the I.P.
ate of First Certificate of Sp	ell of			Employer's	Code No.
ckness or Disablement	16-Apr-2022			Branch Off	ice
ame Mr. DURADUN	IDI MALLAPPA	S/W/D/o		•	5050004050
MADIHALLI	IDI WALLAFFA	S/W/D/O		Ins. No.	5859231972
ertified that I Have Exam	mined you today and that	t in my opinion:			
	(i)* You now need m	redical treatment a	ttendance & abstention from	n work on med	dical grounds
	by the reason of	• •	it		
	Disorder of skin and	d subcutaneous tis	ssue, unspecified		
			£		
	(ii)* You have continue	e d to need medica	attendance & abstention fr	om work on m	nedical grounds
Attortation by Mad	upto and including	this day by reason of	(diagnosis)		
Attestation by Med. Officer	(iii)* In my oninion yo	ou will be fit to recu	ume work tomorrow/on	4.	1-Jun-2022
	(m) In my opinion yo	TO WILL DE TIC LO TESC	ane work tomorrow/on		1-5011-2022
IOTE: The date of fitnes	s must in no case be late	r than the third da	y after the date of the exam	nination in cas	e of
irst and Final Certificate	<i>"</i>		1		
			.\ \	/	
ate: 08-Jun-2022	Signature) Dung		
	Insurance	Medical Officer	0		Rubber Stamp
	Name in Blo	nck Letter DF	R. AMIT RAYAN GOUDAR	i	
MPORTANT:	Traine in Die	Jen Letter <u>Di</u>	CAMIT TOTAL COODAL	k)	
. Any person who makes	false statement or represen	itation for the Purpose	e of obtaining benefit whether fo	or himself/ some	e other
person shall be punisha	able with imprisonment upto	6 months or fine upto	o Rs. 2,000/- of both.		
This form should be con benefit under regulation	mpleted and submitted WITH n 64 read with regulation 99	HOUT DELAY to the a of ESI (General) Reg	ppropriate Branch Office to esca ulation 1950.	ape penal deduc	tion of
. Insured person must si	ign, with date, the claim form	n to avoid delav and i	nconvenience.		8
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Employees State Insurance Corporation



DO NOT MUTILATE THE QR CODE

REG. Form-7 (CONFIDENTIAL)

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

FIRST/ INTERMEDIATE/ FINAL CERTIFICATE

Yamunapura, KA (ESIS Disp.)

	(Regulation 57, 58, 59)	Serial No ESICDSKNBEYAM02200728
	the make the state of them as only	7 Juli
	ಕ್ಷಾರ್ಯಕ್ರಿ ರುಜ್ ಇಲ್ಲು ಇಕ್ಕಾತಿ ವಿಯ	
	ಯುವನಾಪೂರ್ವ್ನ ಬೆಳ್ಳಣ್ಣಮ್ಲಿ -590010	Signature or Thumb Impression of the I.P.
Date of First Certificate of Sp	vell of	Employer's Code No.
Sickness or Disablement	16-Apr-2022	Branch Office
Name M. DUDADU		
Name Mr. DURADUN MADIHALLI	IDI MALLAPPA S/W/D/o	Ins. No. <u>5859231972</u>
	mined you today and that in my opinion:	
· · · · · · · · · · · · · · · · · · ·	ominate you today and that in my opinion.	
	(i)* You now need medical treatment attendance & abstention	on from work on modical, grounds
	by the reason of (diagnosis)	on work of medical grounds
	Disorder of skin and subcutaneous tissue, unspecified	
	(ii)* You have continued to need medical attendance & absten	ntion from work on medical grounds
	upto and including this day by reason of (diagnosis)	
Attestation by Med. Officer	(iii)* In my opinion you will be fit to recover and to	44.1
- Ciridoi	(iii)* In my opinion you will be fit to resume work tomorrow/o	n <u>11-Jun-2022</u>
NOTE: The date of fitness First and Final Certificate.	s must in no case be later than the third day after the date of the $oldsymbol{ar{l}}$	e examination in case of
	, \	
	λl . λ	<i>y</i>
Date: 08-Jun-2022	Signature	<i>y</i>
Date: 08-Jun-2022	Signature	Rubber Stamp
Date: 08-Jun-2022 IMPORTANT:		
IMPORTANT: 1. Any person who makes	Insurance Medical Officer	JDAR
IMPORTANT: 1. Any person who makes person shall be punishal	Insurance Medical Officer Name in Block Letter DR. AMIT RAYAN GOL false statement or representation for the Purpose of obtaining benefit whe ble with imprisonment upto 6 months or fine upto Rs. 2,000/- of both.	JDAR ether for himself/ some other
IMPORTANT: 1. Any person who makes person shall be punishal 2. This form should be con	Insurance Medical Officer Name in Block Letter DR. AMIT RAYAN GOL false statement or representation for the Purpose of obtaining benefit whe	JDAR ether for himself/ some other
Any person who makes person shall be punishal This form should be conbenefit under regulation	Insurance Medical Officer Name in Block Letter DR. AMIT RAYAN GOL false statement or representation for the Purpose of obtaining benefit whe ble with imprisonment upto 6 months or fine upto Rs. 2,000/- of both. Inpleted and submitted WITHOUT DELAY to the appropriate Branch Office in 64 read with regulation 99 of ESI (General) Regulation 1950.	JDAR ether for himself/ some other
Any person who makes person shall be punishal This form should be conbenefit under regulation	Insurance Medical Officer Name in Block Letter DR. AMIT RAYAN GOL false statement or representation for the Purpose of obtaining benefit whe ble with imprisonment upto 6 months or fine upto Rs. 2,000/- of both. Inpleted and submitted WITHOUT DELAY to the appropriate Branch Office	JDAR ether for himself/ some other
Any person who makes person shall be punishal This form should be conbenefit under regulation	Insurance Medical Officer Name in Block Letter DR. AMIT RAYAN GOL false statement or representation for the Purpose of obtaining benefit whe ble with imprisonment upto 6 months or fine upto Rs. 2,000/- of both. Inpleted and submitted WITHOUT DELAY to the appropriate Branch Office in 64 read with regulation 99 of ESI (General) Regulation 1950.	JDAR ether for himself/ some other
Any person who makes person shall be punishal This form should be conbenefit under regulation	Insurance Medical Officer Name in Block Letter DR. AMIT RAYAN GOL false statement or representation for the Purpose of obtaining benefit whe ble with imprisonment upto 6 months or fine upto Rs. 2,000/- of both. Inpleted and submitted WITHOUT DELAY to the appropriate Branch Office in 64 read with regulation 99 of ESI (General) Regulation 1950.	JDAR ether for himself/ some other
Any person who makes person shall be punishal This form should be conbenefit under regulation	Insurance Medical Officer Name in Block Letter DR. AMIT RAYAN GOL false statement or representation for the Purpose of obtaining benefit whe ble with imprisonment upto 6 months or fine upto Rs. 2,000/- of both. Inpleted and submitted WITHOUT DELAY to the appropriate Branch Office in 64 read with regulation 99 of ESI (General) Regulation 1950.	JDAR ether for himself/ some other

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MAN TISTIOR CO. WERE JULY ... WOOD 10/06/22 WORD STAND RESULTION OF 22000 10/06/22 WORD STAND RESULTED OF MON WHE STAND COME TO SELECT WORD 11/05/220000/06/22 WORD ASSOCIATION WHY WAY SOND WHAT THE STANDEN TO WHY WAY STANDER STANDER TO WHY WAY WITH THE STANDER THEN CON WIS STANDER WHITH WHAT WITH THE WHOLE SWEET WAS STANDER TO WHITH THE WHOLE SWEET WAS STANDER TO WHITH THE WHOLE SWEET WAS STANDER TO WHITH THE WAS SWEET WAS STANDER TO WHITH THE WAS SWEET WAS STANDERS.

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12208: 10/06/22

med Jul Willer (wiggs 2. willy)

CONFIDENTIAL From, (Reg. 52-A) BRANCH OFFICE: Employees' State Insurance Corporation Rivelend Name of I.P. Sri./Smt. Insurance No. The above named employee of your factory has submitted a certificate of incapacity Dear Sir/s. 1015100 and has declared for the period from ISIAIDA to 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. ouradund in Madihalli BRANCHMANAGER Ins. No. 5859231972 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 16-04-2022 It is further confirmed that : He/She had remained on leave with wages fromto..... a) He/She was remained on holiday with wages from......to......to...... b) He/She was weekly off with wages from......to....... C) He/She was on lay off with wages from.....to d) He/She was on strike from......to.....to........to paid any wages for any days during the above period subsequently the same will be notified to you in due course. The day proceeding the first da of absence / was / was not a *holiday for the insured

*Strike out if not applicable.

person.

Name & Designation Code No.

MIDASOSHI-591226

Seloan.



EMPLOYEES STATE INSURANCE CORPORATION



DO NOT MUTILATE THE QR CODE

REG. Form-8 (CONFIDENTIAL)

(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)	
	Serial No ESICDSKNBEYAM02200542
TO DE Stamp Bispensary	1 Du
Date of First Certificate of Spell of	Signature or Thumb Impression of the I.P.
Sickness or Disablement: 16-Apr-2022	Employer's Code No.
	Branch Office
To Mr. DURADUNDI MALLAPPA S/W/D/o MADIHALLI	Ins. No5859231972
Certified that I have examined you11-May-2022 today have continued to need medical treatment and have remains to and including this day by reason of Burn of unspecified limb, except ankle and foot I further certify that by judging your present condition it is of such a character that it will be unnecessary to see you for more frequently than once in3 weeks, and you will require medical treatment and will remain incap the end of31-May-2022_ weeks from this date I propose to issue certificates in this form at the interval stat so long as your condition does not require more frequent att In my opinion you should now/ need not be referred to a Me you are permanently disabled.	ed incapable to work up I degree of hip and lower found that your sickness is the purpose of treatment able to work at least up to ted above, tendance.
Attestation by Med. Officer	Α.
Any other remarks by the Medical Officer Date: 10-May-2022 Signature DOA: 16-Apr-2022, DOD: 30-Apr-2022	
Insurance Medical Officer with rubber stamp	
Name in Block letter DR. AMIT RAYAN GOUDAR	
MELIDANCE	

INSURANCE MEDICAL OFFICER
ESI DISPENSARY
Yamanapur, Selagavi.

MOD,

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BNJ en & of 84000 ors 29 11 n Mardel N DN 05! 10/05/2022

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From,

CONFIDENTIAL

FORM-10 (Reg. 52-A)



BRANCH OFFICE:
Employees' State Insurance Corporation

To,			Date -	25/10/2023
M/s.			to the to	region and region of the control of
		N L		
Nam	ne of I.P. Sri./Smt.	Knot sagge		
Insu	rance No	523769	Department	
	r Sir/s, The above nam	ed employee of your fa	ctory has submitted	a certificate of incapacity
for t	he nariod from	01/09/11/20	9×110/10	and has declared
that	he/she has not work	ed on any day during th	e above period. He	She has further declared
that strik	e for the above perio	d of incapacity.		off/lay off and was not on
		ful for your confirmation	on the form app	ended within 10 days of
rece	ipt of this form.		12.1 x /2	Your's faithfully,
			2	
	T	2 udroppa Shi	valingoppa.	BRANCHMANAGER s. No. 5859232093
Nan	v ne of the insured per	rson Sri/Smt	(agil In	s. No. 5859232093
ITOIL	Returned with t	he remarks that the en	ployee in question	has not worked for any
day	during the period fr	om 01/09/202	3 to 23	5/10/2023
	further confirmed th			
	11-10h - h - d	ed on leave with wages	from	to
a)	He/She was remain	ed on leave with wages ned on holiday with wag	ae from	to —
b)	He/She was remain	off with wages from	- to	femmi
d)	He/She was on lay	off with wages from	to	-
e)	He/She was on stril	ce from		If the i.P. is
٥,	paid any wages for	r any days during the a	above period subse	quently the same will be
	notified to you in du	e course.	a luga luga na	theliday for the lacemed
2.	The day proceeding person.	g the first da of absent	ge / was / was not	*holiday for the Insured
	person.	1 150 01 s	PROPERTY	
5 S		Name	& Designation NC	PAL Signature
*Str	ike out if not applica	ble. Code	doaşugar İnstitute	of Technology
		(1 (1 (1 (1 (1 (1 (1 (1 (1 (1	NIDASOSHI	-591236 /
		1 Part		
	*	1 608.8e19		



FIRST/ INTERMEDIATE/ FINAL CERTIFICATE

Employees State Insurance Corporation (Deposit this certificate within 3 days with the appropriate



REG. Form-7 (CONFIDENTIAL)

K.S.R.T.C. Belgaum, KA (ESIS Disp.) (Regulation 57, 58, 59) Serial No ESICDSKNBEKSR02303202 Signature or Thumb Impression of the I.P. Date of First Certificate of Spell of Sickness or Disablement Employer's Code No. 01-Sep-2023 Branch Office Name Mr. Rudrappa Shivalingappa S/W/D/o Ins. No. 5859232093 Certified that I Have Examined you today and that in my opinion: 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/on Any other remarks NA - Needed abstention, on 2/10/23, DOA: 01-Sep-2023, DOD: 12-Sep-2023 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 ್ಡಳಿತ ವಿಮಾ ವೈದ್ಯಾಧಿಕಾರಿಗೆ ಕಾ ರಾ. ವಿಮಾ ಚಿಕಿತ್ಸಾಲಯ ಕೋತವಾಟ್ಟಳಲ್ಲಿ _ಕಶಾಸ್ತ್ರೀ ^{ಚೌಕ}, ಚಿಳೂವಿ-590 002, Date: 03-Oct-2023 Signature **Insurance Medical Officer** IMPORTANT: Name in Block Letter DR. SANJU SHIVAPPA LAMANI

- 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.

Branch Office to avoid possible loss of benefit under Regulation 64)



ಕೆ.ಎಲ್.ಇ. ಸಂಸ್ಥೆಯ ಡಾ. ಪ್ರಭಾಕರ ಕೋರೆ ಆಸ್ಪತ್ರೆ ಮತ್ತು ವೈದ್ಯಕೀಯ ಸಂಶೋಧನಾ ಕೇಂದ್ರ ನೆಹರು 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/2023-24/ 3 685

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.

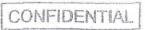


Sr. Medical Cifficer KLES Dr. Prabhakar Kore Hospital & MRC, Nahru Nagar, Belagavi

Medical Superintenden. ESI-Hospital ashok Nagar, BEL a GAVI-19

MRD/pvj

From,



FORM-10 (Reg. 52-A)



BRANCH OFFICE :mployees' State Insurance Corporation

Employees' State Insurance Cor	poration
To, Date	23/02/2024
M/s.	3
l alson	
Name of I.P. Sri./Smt. \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
Insurance No. 100 111 Department_	
Dear Sir/s,	
The above named employee of your factory has submitted	ed a certificate of incapacity and has declared
for the period from 20 1 2 to 1 2 12 that he/she has not worked on any day during the above period, H	
that he/she has not received wages for any leave/holiday/weekly strike for the above period of incapacity.	
I shall be grateful for your confirmation on the form ag	pended within 10 days o
receipt of this form.	
	Your's faithfully,
	AND ADDRESS OF THE PARTY OF THE
Name of the insured person Sri/Smit Vitta) H. Kumba	BRANCHMANAGER
Name of the insured person Sri/Smt VILL9) 17.1(3112)	ns. No. 58592321L
Returned with the remarks that the employee in question	n has not worked for any
day during the period from 2001 2024 to 0	1103120:24
It is further confirmed that:	1
a) He/She had remained on leave with wages from	to
b) He/She was remained on holiday with wages from	lo —
c) He/She was weekly off with wages from	n
d) He/She was on lay off with wages from	n —
e) He/She was on strike fromto	if the IP is
paid any wages for any days during the above period subs	
notified to you in due course.	8 7 28
The day proceeding the first da of absence / was / was not	a *holiday for the Insured
person.	
Name & Designation	Signature
Shike out if not applicable CodeDillonal	0.91401014
(Nidasoshi) Hirasugar Institute of Techno	dans
Pin.591236 Pin.591236 A	
Deangangiii-331 830 6	
Nidasoshi 591236 Nidasoshi-591 236 N	

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 ಕೋತವಾಲ ಗಲ್ಲಿ, ಬೆಳಗಾವಿ-590002 Stamp Dispensary

Serial No	ESICDSKNBEKSR02400646	
	K	
Signature o	or Thumb Impression of the I.P.	
Employer's	Code No.	
Branch Offi	ce	
Ins. No.	5850232113	1

Date of First Certificate of Spell of 20-Jan-2024

Sickness or Disablement

Name

Mr. Vittal Hanamantappa Kumbar

S/W/D/o

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

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-singlevessel disease direct stenting to proxim, IHD-Unstable angina CAD-singlevessel disease direct stenting to proximNo Remarks, No RemarksNo 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)

Attestation by Med. Officer

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

02-Mar-2024 V

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.

28-Feb-2024

Signature

ಆಡಳಿತ ವಿಮಾ ವೈದ್ಯಾಧಿಕಾರಿ ಕಾ. ರಾ. ವಿಮಾ ಚಿಕಿತ್ಸಾಲಯ ಕೋತಹಾಣಕೇಷ್ಟ್ರಿಣಗೌಸ್ತ್ರಿ ಚೌಕ,

Sಳಗಾವಿ-590 002.

IPORTANT:

Insurance Medical Officer Name in Block Letter

DR. SANJU SHIVAPPA LAMANI

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.

stitute of Dr. Belage

Print Date: 28-Feb-2024



EMPLOYEES' STATE INSURANCE CORPORATION e-Pehchan Card



PERSONAL DETAILS

Name of IP

Vittal Hanamantappa Kumbar

Date of Birth

11/06/1981

Gender

Male

Mobilé Number

9901429761

Email ID

: NA

Registration Date

: 02/02/2020

Insurance No.

: 5859232113

: KA01.0006104559

UHID UAN

: NA

ABHA Number

: NA

ABHA Address

: NA

Aadhaar

: Verified

REGISTRATION DETAILS

108 N

Marital Status

: Married

Type Of Disability

: NA

Present Address : S\o vittal kumbar

oni,nidasoshi,Dist:Belgaum,Karnataka,591

236

Name of Father / Husband

Permanent Address

: S\o vittal kumbar

Hanumantappa

oni,nidasoshi,Dist:Belgaum,Kar

nataka,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

: 01/02/2020

Address of **Employer**

CHIKKODI, Dist: Belgaum Karnataka 59123

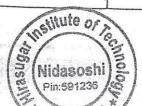
Appointment **Branch Office**

: 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
					ie .		
Rekha Vittal Kumbar	Spouse	12/02/1985	KA01.0006104560/N A		Verified	Yes	Karnataka
			¥ 500			*	Belgaum



CONFIDENTIAL FORM-1
BRANCH OFFICE:
Employees' State Insurance Corporation
To.
Date 8/6/2022
M/s.
Name of I.P. Sri/Smit. Chelappa
Insurance No
Dear Sir/s,
The above named employee of your factory has submitted a certificate of incapacity
for the period from 1 x 1 - 1 - 2 - and then delicated
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 officer of any leave holiday of any leave h
outle 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 Ghuloppa 5 Tolake BRANCHMANAGER Ins. No. 585923 197
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 :
a) He/She had remained on leave with wages fromto
b) He/She was remained on holiday with wages fromto
d) He/She was on tay off with wages from
e) He/She was on strike from
paid any wages for any days during the above period subsequently the same will be
notified to you in due course. The day proceeding the first da of absence / was / was i ut a *holiday for the insured
person.
PRINCIPAR PRINCIPAR
Note the second
Strike out if not applicable. Code Na. Strike out if not applicable. NIDASOSHI - 691 236
Nidasoshi
Nidasoshi Pin:591236
AST. BOILD
Ot Rolandi *



Employees State Insurance Corporation



DO NOT MUTILATE THE QR COOK

REG. Form-7 (CONFIDENTIAL)

Print Date: 02-Jun-2022

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

FIRST/ INTERMEDIATE/ FINAL CERTIFICATE

Yamunapura, KA (ESIS Disp.)

ate of First Certificate of Spe ckness or Disablement ame Mr. GHULAPPA	18-Apr-2022	Stamp Dispensary	Signature or Thumb In	npression of the I.P.
ckness or Disablement	18-Apr-2022	The second state of the second	Employer's Code No.	
Warra dispression of the second control		-		
me Mr. GHULAPPA	2012/07/07/07		Branch Office	
	TOLAKE S/W/D/o		Ins. No. 585923	1975
rtified that I Have Examined	you today and that in my opinior	lt en		
	(i)* You now need medical by the reason of (diag	treatment attendance & abster	ntion from work on medical g	round
	(ii)* You have continued to	need medical attendance & absing this day by reason of (tention from work on medical	
	Unspecified abdomin	al hernia without obstruction	or gangrene	
Attestation by Med.				
Officer	(iii)* In-my-opinion you will	be fit to resume work tomorro	v/on	
OTE: The date of fitness mulertificate.	ist in no case be later than the thin	rd day after the date of the examina	tion in case of First and Final	
ate: 02-Jun-2022	Signature	, Out		
	Insurance Medica	l Officer		Rubber Stamp
MPORTANT:	Name in Block Le	tter DR. AMIT RAYAN G	OUDAR	
• •		for the Purpose of obtaining benefit ths or fine upto Rs. 2,000/- of both.		
This form should be con	npleted and submitted WITHOUT I	DELAY to the appropriate Branch Of (General) Regulation 1950.	fice to escape penal deduction of	(8)
benefit under regulation Insured person must sig	Nidasoshi	old delay and inconvenience.		



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

ಕೆ.ಎಲ್.ಇ. ಸಂಸ್ಥೆಯ ಡಾ. ಪ್ರಭಾಕರ ಕೋರೆ ಆಸ್ಪತ್ರೆ ಮತು 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/2022-23/95\$

DATE: 26-05-2022

MEDICAL CERTIFICATE

continuation previous medical Certificate, 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.

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



The paintipal HSIT Nidasashi

Farm

Sujata Huddas

Asst professor

EEE department

HSIT Nidasoshi

Thaough HOD EEE department

Subject: - Regarding extension of maternity leave.

Respected 8:4 I Sujata Huddar woodling as
ASSI partesson in ERE department of this Institute
applying for extension of maternity leave than
office/2019 to title 31/12/2019. I will seport back
to the duty on offor/2020, kindly do the needful
and Banction maternity leave.

Thanking you

yours taithfully

Bludday

2/12/2019 Date: - 09/10/2019 Place: - Nidasoshi Cost &

Ja/2/2/9

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person for



Gadhinglaj 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

(extificate

Date: 6 8 1 19

This is to certify that Bujata Huddar (Tanodi) has delivered a male baby on 917/2019 at 7.18 Am, in this hospital.

Pagra Va

Dr. Supriya P. Haval consultant Obstetrician & Gynaeco Rukmini, Multispecialit Hospital, Sankeshwar KMC - 107893

To The paincipal

HBIT Nidasashi

Faom

Sujata Huddar

Assa partessou

FEE Department

HSIT NidaBoshi

Though HOD EEE department

Subject: - Regarding Materisty leave

Resperted 812 I Sujata Huddar woaking as ASSIT. Partesson in REE department of this institute applying too materity leave toom 09/07/2019 to vill derember 2019. I will appost back to the duty in the month of december 2019 tentatively, kindly do the needful and Sanction materrity leave.

Thanking you

yours taithfully

Date: - 08/07/2019 place: - Nidagoshi.

Ason Marked

Shriman Niranjan Jagadguru Pancham HIRASUGAR INSTITUTE OF

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Shriman Niranjan Jagadguru Pancham

HIRASUGAR INSTITUTE OF

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Sri Nijalingeshwar Mahaswamigal Trust's

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Sri Nijalingeshwar Mahaswamigal Trust's

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Sri Nijalingeshwar Mahaswamigal Trust's TECHNOLOGY NIDASOSHI.

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Sri Nijalingeshwar Mahaswamigal Trust's

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Sri Nijalingeshwar Mahaswamigal Trust's

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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

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

Midnight

GSTIN / UIN

NA

Place of Supply/State 29 - Karnataka

Code/Name

Company GST No:

29AABCB5730G1ZT

Invoice No:

208324403/1

Company PAN:

AABCB5730G

Sum Insured (Rs)

Description 149 - Total members covered.

1,49,00,000.00

Highest Sum Insured

100000

Additional** Loading @

0 % 0 %

Additional Discount@

Base Premium

7,577.00

Special Discount **Net Premium**

Terrorism** Surcharge

7,577.00

Stamp Duty

State GST (9%)

682 00

Central GST (9%)

682 00

Final Premium

8.941.00

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

able in theevent of an admissible Accidental Death claim.

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. As per the policy wordings attached.

Special Exclusions Subject to Clauses

Cremation charges is covered up to 5000/-, Carriage of Dead body is covered up to 5000/-, Repatriation

of Remainsis covered up to 5000/-, Family Transportation is covered up to 5000/-, Children Education Bonus iscovered upto maximum Rs. 5000 per child for maximum 2 children below age of 19years, applic-

Warranties

Basic:- Death + Children Education Bonus (Sum insured limited to 100 times of monthly salary or Rs.

1lakhs whichever is Less).

Special Conditions

As per the policy wordings attached.

Comments

Previous Policy Number: OG-20-1713-9902-0000002. Beneficiary will be corporate.

Bank RM Employee Code:

Agency Code BAG10028453

Channel Name: ML

Agency Name: SACHIN A BHADALE

Contact No: 9035073212/0

Email - sachin24may@gmail.com

Premium Collection Details

0 / 205457803 / Rs. 8,940.00, [Receipt No/Collection No/Amount

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

our of Cheque is applicable for this product in addition to any specific

*** This policy is subject to the standard policy wordings, warranties warranty or condition attached

^{***} All Premium figures are in Rupee.

Caringly yours

BEAJAJ | Allianz (1)



nists the 'pusits Print' and Brighar Epiloc would follow and the Original policy, duly countersigned, to be relied on for all legal purposes.

or & On Behalf of Bajaja, Alwania, 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. MH013770432201920M Defaced No. 0000433117202021 Order No.CSD/22/2020/1432/2020 Order Dated 09.06.2020Defaced 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 ಸರಕಾರ ಸಹಕಾರ ಇಲಾಖೆ

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

ಸಹಕಾರ ಸಂಘಗಳ ಸಹಾಯಕ ನಿಬಂಧಕರು ಬೆಳಗಾವಿ ಉಪವಿಭಾಗ, ಬೆಳಗಾವಿ ಇವರ ಕಾರ್ಯಾಲಯ ತಾ: ೨೮ - ೮6-2007.



ಸಹಕಾರ ಸಂಘಗಳ ಸಹಾಯಕ ನಿಬಂಧಕರು, ಬೆಳಗಾವಿ ಉಪವಿಭಾಗ, ಬೆಳಗಾವಿ ಇವರು ಈ ಮೂಲಕ ಅಧಿಸೂಚಿಸುವುದೇನೆಂದರೆ,

ಹೀರಾ ಶುಗರ ಇನ್ ಸ್ಟಿಟ್ಯೂಟ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ 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

ದಿಸಾಂಕ 🧕 🖇 -೧-६-2007

(ಕೆ.ವಿ.ಚೀದ್ರೆ)

ಸಹಕಾರ ಸಂಘಗಳ ಸಹಾಯಕ ನಿಬಂಧಕರು ಬೆಳಗಾವಿ ಉಪವಿಭಾಗ ಬೆಳಗಾವಿ !

ಹಿರಾಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. 591 236 ತಾ. ಹುಕ್ಕೇರಿ ಜಿ. ಬೆಳಗಾವಿ

ಸಾಲ ಬೇಡುವ ಅರ್ಜಿ

ಗೆ, ಅಧ್ಯಕ್ಷರು,		
ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜ	ಕ ನೌಕರರ	•
ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.		
ಮಾನ್ಯರೇ,	9 (D. 9) 5 2011	
ನಾನು ಶ್ರೀ/ಶ್ರೀಘರ್ತಿ <u> </u>	J. Dogs. 3728.	ಈ ಮೇಲಿನ ಸಂಘದ ಅ/ಬ
ಸದಸ್ಯನಾಗಿದ್ದು, ರೂ. 🗸 🗸 🗸 🗸 🗸 🗸	🖳 ಗಳ ಸಾಲವನ್ನು ನನ್ನ ಗೃಹ ಕರ್ತವ್ಯದ 🤄	ಉದ್ದೇಶಕ್ಕೆ ಮಂಜೂರ ಮಾಡಬೇಕೆಂ ದು
ವಿನಂತಿಸಿಕೊಳ್ಳುತ್ತೇನೆ. ನಾನು ಈ ಹಣವನ್ನು ಬ	ುಡಿಯೊಂದಿಗೆ 60 ತಿಂಗ	್ದ್ ಳುಗಳಲ್ಲಿ ಹಿಂತಿರುಗಿಸುತ್ತೇನೆ. ನನ್ನ ಮೂಲ
ವೇತನದ ಪತ್ರವನ್ನು ಅರ್ಜಿಯೊಂದಿಗೆ ಲಗತ್ತಿಸಿರ	i.e	₩ <u> </u>
•	್ತಾ ನ್ನ ಸಾಲದ ಹಣ ಪೂರ್ತಿಯಾಗಿ ಮರುಪಾವತಿಯಾಗು:	ವವರೆಗೆ ಜಾಮೀನದಾರರಾಗಿರುತ್ತಾರೆ.
ಅ.ನಂ.	ಹೆಸರು	ಸಹಿ
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•	ಕಮೀಟಿಯ ಶರಾ	
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್ಗೆ ಗೌರವ ಕಾರ್ಯದಶಿ ಹಿರಾಶುಗರ ಇನಸಿಟ್ಯೂ	ರ್ಣ ಟ್ ಆಪ ಟೆಕ್ನಾಬಾಜಿ ಪೌಸಗಳ ಸಹಿತ್ಯಾಗಿ	ಅಧ್ಯಕ್ಷರು
	ರ್ ಟ್ ಆಫ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯನ 	ಅಧ್ಯಕ್ಷರು ಮಿತ, ನಿಡಸೋಸಿ.
ಹಿರಾಶುಗರ ಇನಸ್ಟಿಟ್ಯೂ ಟ	ರ್ ಟ್ ಆಫ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯನಿ ಕರಾರು ಶರಾ	ಅಧ್ಯಕ್ಷರು ಮಿತ, ನಿಡಸೋಸಿ.
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ಹಿರಾಶುಗರ ಇನಸ್ಟಿಟ್ಯೂ ಟ ಗೆ, ಅಧ್ಯಕ್ಷರು,	ಕರಾರು ಶರಾ	ಅಧ್ಯಕ್ಷರು ಮಿತ, ನಿಡಸೋಸಿ.
ಹಿರಾಶುಗರ ಇನಸ್ಪಿಟ್ಯೂ ಟ ಗೆ, ಅಧ್ಯಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಪಿಟ್ಯೂಟ್ ಆಫ್ಟ್ ಟೆಕ್ಕಾಲಾಜಿ :	ಕರಾರು ಶರಾ	ಅಧ್ಯಕ್ಷರು ಮಿತ, ನಿಡಸೋಸಿ.
ಹಿರಾಶುಗರ ಇನಸ್ಪಿಟ್ಯೂ E ಗೆ,	ಕರಾರು ಶರಾ	ಅಧ್ಯಕ್ಷರು ಮಿತ, ನಿಡಸೋಸಿ.
ಹಿರಾಶುಗರ ಇನಸ್ಪಿಟ್ಯೂ ಟ ಗೆ, ಅಧ್ಯಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಪಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ : ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.	ಕರಾರು ಶರಾ	ಅಧ್ಯಕ್ಷರು ಮಿತ, ನಿಡಸೋಸಿ.
ಹಿರಾಶುಗರ ಇನಸ್ಟಿಟ್ಯೂ ಟ ಗೆ, ಅಧ್ಯಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. ಮಾನ್ಯರೇ,	ಕರಾರು ಶರಾ ನೌಕರರ	ಮಿತ, ನಿಡಸೋಸಿ.
ಹಿರಾಶುಗರ ಇನಸ್ಟಿಟ್ಯೂ ಟ ಗೆ, ಅಧ್ಯಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. ಮಾನ್ಯರೇ, ನಾನು ಶ್ರೀ / ಶ್ರೀಮತ್ತಿ <u>ಶಿ</u> ೯೪೩/	tond son रूप्ति (manna (a))	ಮಿತ, ನಿಡಸೋಸಿ.
ಹಿರಾಶುಗರ ಇನಸ್ಪಿಟ್ಯೂ ಟ ಗೆ, ಅಧ್ಯಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಪಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. ಮಾನ್ಯರೇ, ನಾನು ಶ್ರೀ/ಶ್ರೀಮತಿ	toots soo	ರೂ. <i>200 NN</i> 1-89
ಹಿರಾಶುಗರ ಇನಸ್ಟಿಟ್ಯೂ ಟ ಗೆ, ಅಧ್ಯಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನ ಹಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. ಮಾನ್ಯರೇ, ನಾನು ಶ್ರೀ/ಶ್ರೀಮತಿ <u>ಶಿಗಿಗಿ</u> ರೂಪಾಯು <u>ಗಿಳಿಗಿ</u> <u>ಮಿಗಿ</u>	までのは、までの るでもので のり、人人 のり、人人	್ಲಿ ರೂ. <u>200 ೨೩೦</u> ೨೪)ನ್ನು ಸಾಲವಾಗಿ ಈ ಮೇಲೆ
ಹಿರಾಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಈ ಪ್ರಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನ ಕಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. ಮಾನ್ಯರೇ, ನಾನು ಶ್ರೀ/ತ್ರೀಮತಿ <u>೧೯೯</u> ೦ ರೂಪಾಯಿ <u>೧೯೯</u> ೦ ಕೆಸರಿಸಿದ ಸಂಘದಿಂದ ಸ್ವೀಕರಿಸಿರುತ್ತೇನೆ. ಸಾಲಕ್ಕೆ ಕಂತಿನ ರೂಪದಲಿ <u>೧೯೯</u> ೦	ಕರಾರು ಶರಾ ನೌಕರರ ೧೯೬೦ / ೧೯೬೨ / ೧೯೬೨ / ೧೯೬೮ / ೧೯೬೮ ೧೮ ಕರ್ಷ ನಿರ್ವಾಸ ಸಂಘದ ನಿರ್	ದೂ. <u>೭೦೦ ೨೩೦ ೩೪</u>
ಹಿರಾಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಈ ಪ್ರಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನ ಕಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. ಮಾನ್ಯರೇ, ನಾನು ಶ್ರೀ/ತ್ರೀಮತಿ <u>೧೯೯</u> ೦ ರೂಪಾಯಿ <u>೧೯೯</u> ೦ ಕೆಸರಿಸಿದ ಸಂಘದಿಂದ ಸ್ವೀಕರಿಸಿರುತ್ತೇನೆ. ಸಾಲಕ್ಕೆ ಕಂತಿನ ರೂಪದಲಿ <u>೧೯೯</u> ೦	ಕರಾರು ಶರಾ ನೌಕರರ ೧೯೬೦ / ೧೯೬೨ / ೧೯೬೨ / ೧೯೬೮ / ೧೯೬೮ ೧೮ ಕರ್ಷ ನಿರ್ವಾಸ ಸಂಘದ ನಿರ್	ದೂ. <u>೭೦೦ ೨೩೦ ೩೪</u>
ಹಿರಾಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಅಧ್ಯಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನ ಹಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. ಮಾನ್ಯರೇ, ನಾನು ಶ್ರೀ / ಶ್ರೀಮತಿ	ಕರಾರು ಶರಾ ನೌಕರರ ೧೯೯೦ / ೧೯೯೮	ದೂ. <u>೭೦೦ ೨೩೦ ೩೪</u>
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S.B. Koli

ಮೆ॥ ಅಧ್ಯಕ್ಷರು,

ಖರ್ಚಿಗೆ ಪಾವತಿ

ಹೀರಾಶುಗರ ಇನ್ಸ್ಟ್ಟ್ಯೂಟಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಕೋ-ಆಪ್. ಕೆ ಡಿಟ್ ಶೊಸಾಯಿಟಿ ಲಿ: ನಿಡಸೋಸಿ.

and Smi B. T. Kals	P4 :	
ಮುಬರಕೊಡುವ ಪಾವತಿ ಏನೆಂದರ ಕೆಳಗೆ ಬರೆದ ಪ್ರಕಾರ ಹಣ ರೋಖ ಮುಟ್ಟಿತು.	3 ನನಗೆ ನಿಮ್ಮ ಕಡೆಂ	ಯಿಂದ
CONTRACTOR OF THE STATE OF THE	ರೂ.	ಪೈಸೆ
ಸಾಲ ತಾ 11 (8/1) 27 ಬಾಂಡ ಪ್ರಕಾರ ಚೆಕ್ಕ ನಂ. \ 22738 ಪ್ರಕಾರ ರೂ. ಶೀಅರ ಬಾಬತ ರೂ. ರೇವು ಪರತ ಶೇಅರ ಪರತ ಇತರ ಅಕ್ಷರದಲ್ಲಿ ರೂ. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	2,00,000	
まるで、 まっして まっして、 まっして ま	2,00,000	

ಹಣ ಪಡೆದವರ ಸಹಿ __

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

Liabilities	Amo		HEET AS 31/03/2022 Assets	Amou	nt. Cosq v
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 Equlisation Fund	16031.00		Loans		6121872.00
Bad Debt Fund	53638.00		Member Salary Loans	6121872.00	
Dead Stock Depriciation 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

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

Board of Directors:

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

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

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

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

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

Hirasugar Institute of Technology Hirasugar Institute of Technology

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

SI.N	A/C NO	Name of the Share Holder	Loan	SI.N	A/C	Name of the Share Holder	2 Loan
1.	2	Shri. Shrishail Babu Chougala	183970		NO	The state of the s	Balance
2.	3	Shri. S M Badakar	133644	41.	90	Shri. Kadappa Kankanwadi Shri. Pramod Subhash Desai	43526
3.	4	Shri.Vishwanath Hiremath	182947	43.	104	Smt. Sushila Shankar Kankanwadi	80391 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 Paresh 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. Girimallppa 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 L	oan Balaı	nce as on 31-03-2022: 6121872/-	00,00
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.Veerbhadra 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			The state of the s	
40.	89	Shri Shivanand Kalayi	97773				*.

Hon ble SECRETARY

Hirasugar Institute of Technology

Employees Co-op Credit Society Ltd,

Nidasoahi, Tq.: Hukkeri, Dt.: Balagavi.

PRECIDENT
Hirasugar Institute of Technology
Employees Co-op Credit Society Ltd,
Nidasoshi, Tg.: Hukkert, Dt.: Belagavi.

ನಿಚಗೋಸಿ.

ತಾ.ಹುಕ್ಕೇರಿ.

ಹಿರಾಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. 591 236 ತಾ. ಹುಕ್ಕೇರಿ ಜಿ. ಬೆಳಗಾವಿ

ಸಾಲ ಬೇಡುವ ಅರ್ಜಿ

ਜੈ,
eard and
ಅಧ್ಯಕ್ಷರು,
ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ
ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.
ಮಾನ್ಯರೇ, निर्मेश कि
ಸದಸ್ಯನಾಗಿದ್ದು, ರೂ. 1,90,000 ಗಳ ಸಾಲವನ್ನು ನನ್ನ ಗೃಹ ಕರ್ತವ್ಯದ ಉದ್ದೇಶಕ್ಕೆ ಮಂಜೂರ ಮಾಡಬೇಕೆಂದು
ವಿನಂತಿಸಿಕೊಳ್ಳುತ್ತೇನೆ. ನಾನು ಈ ಹಣವನ್ನು ಬಡ್ಡಿಯೊಂದಿಗೆ <u>60</u> ತಿಂಗಳುಗಳಲ್ಲಿ ಹಿಂತಿರುಗಿಸುತ್ತೇನೆ. ನನ್ನ ಮೂಲ
ವೇತನದ ಪತ್ರವನ್ನು ಅರ್ಜಿಯೊಂದಿಗೆ ಲಗತ್ತಿಸಿರುತ್ತೇನೆ.
ಈ ಕೆಳಗಿನ ವ್ಯಕ್ತಿಗಳು ಜಂಟಿಯಾಗಿ ನನ್ನ ಸಾಲದ ಹಣ ಪೂರ್ತಿಯಾಗಿ ಮರುಪಾವತಿಯಾಗುವವರೆಗೆ ಜಾಮೀನದಾರರಾಗಿರುತ್ತಾರೆ.
ಅ.ನಂ. ಹೆಸರು ಸಹಿ
r) ಬೆಬಲ್ಲಿ ಕಾರ್ಲ್ಲಿನ. ಬಸ್ಸಪ್ರಾಣೆ. ೦೨೦ ಶೆಬೆಂಟ್ model
1) क्रिया धर्म के के कि कि का कि कि
3) 300 8. Enct 2000 - 13 news 2
र्षः । ।
ದಿನಾಂಕ: 16/12/21 ಇತಿ ತಮ್ಮ ವಿಶ್ವಾಸಿಕ,
ಕಮೀಟಿಯ ಶರಾ
ಅರ್ಜಿ ಸ್ವೀಕರಿಸಿದ ದಿನಾಂಕ ಅರ್ಜಿ ಕ್ರಮಾಂಕ
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200 : 200 and
ಮಂಜೂರ ಮಾಡಲಾಗಿದೆ.
ಸಭೆ ನಂ ಶರಾವು ನಂ ರ ವಿನಾಂಕ
ADM SEPL.
ೆ 'ಗೌರ್ಧ ಕ್ರಾರ್ಯದರ್ಶಿ ಅಧ್ಯಕ್ಷರು
ಹಿರಾಶುಗರ ಇನಸ್ತಿಟ್ಯೂಟ್ ಆಫ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.
ಕರಾರು ಶರಾ
The state of the s
ಅಧ್ಯಕ್ಷರು,
ಅಧ್ಯಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ
ಅಧ್ಯಕ್ಷರು,
ಅಧ್ಯಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.
ಅಧ್ಯಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. ಮಾನ್ಯರೇ,
ಅಧ್ಯಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. ಮಾನ್ಯರೇ, ನಾನು ಶ್ರೀ/ಶ್ರೀಮತಿ ಸೌರರೇಶ ಬಾಕತ್ರಿತ್ರ ಕ್ರಿಂಡ್ ರೂ. 190000/-
世界表現 の では では は では で で で で で で で で で で で で で
ಅಧ್ಯಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. ಮಾನ್ಯರೇ, ನಾನು ಶ್ರೀ/ಶ್ರೀಮತಿ ನಿರ್ಲೇಶ ಬುಳಕ್ಕೆ ಸ್ಟ್ರಿ ಶಿಂದ್ರ ರೂ. 130 ೦೮೮/ – (ರೂಪಾಯಿ <u>Ohe Lajeh ninely thousand only</u>)ನ್ನು ಸಾಲವಾಗಿ ಈ ಮೇಲೆ ಹೆಸರಿಸಿದ ಸಂಘದಿಂದ ಸ್ವೀಕರಿಸಿರುತ್ತೇನೆ. ಸಾಲಕ್ಕೆ ವಿಧಿಸಿರುವ ಬಡ್ಡಿ ದರ % ವನ್ನು ನಾನು ಸಂಘದ ನಿಯಮಿಷ್ಕಾಳಗಳಿಗೆ ಬದ್ದನಾಗಿದ್ದು, ಸಾಲವನ್ನು
ಅಧ್ಯಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. ಮಾನ್ಯರೇ, ನಾನು ಶ್ರೀ/ತ್ರೀಮತಿ ಸೌಲರೇಶ ಟುಳಿತ್ರತ್ತು ಕಿಂದ್ರ ರೂ. 190 ೦೮೮ – (ರೂಪಾಯಿ <u>Ohe Lajeh ಗಾಗಿಲ್ಲಳ ಕಿರ್ಗಾಹಿಸಾಗಿ ಉಗ್</u> ನು)ನ್ನು ಸಾಲವಾಗಿ ಈ ಮೇಲೆ ಹೆಸರಿಸಿದ ಸಂಘದಿಂದ ಸ್ವೀಕರಿಸಿರುತ್ತೇನೆ. ಸಾಲಕ್ಕೆ ವಿಧಿಸಿರುವ ಬಡ್ಡಿ ದರ % ವನ್ನು ನಾನು ಸಂಘದ ನಿಯಮಿಷ್ಕಾರ್ಥಗಳಿಗೆ ಬದ್ಧನಾಗಿದ್ದು, ಸಾಲವನ್ನು ಕಂತಿನ ರೂಪದಲ್ಲಿ ದಿನಾಂಕದೊಳಗೆ ಮರುಪಾವತಿ ಮಾಡುವದರಲ್ಲಿ ವಚನ ಬದ್ಧನಾಗಿರುತ್ತೀನೆ ನನ್ನ ಪ್ರತಿ ತಿಂಗಳ ಕಂತಿನ *
ಅಧ್ಯಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. ಮಾನ್ಯರೇ, ನಾನು ಶ್ರೀ/ಶ್ರೀಮತಿ ನಿರ್ಲೇಶ ಬಾಕ್ ಕ್ರೌಫ್ ಶ್ರಿಂದ್ರ ರೂ. 1900ರರ್/ (ರೂಪಾಯಿ <u>Ohe Lakh ninely thousand only</u>)ನ್ನು ಸಾಲವಾಗಿ ಈ ಮೇಲೆ ಹೆಸರಿಸಿದ ಸಂಘದಿಂದ ಸ್ವೀಕರಿಸಿರುತ್ತೇನೆ. ಸಾಲಕ್ಕೆ ವಿಧಿಸಿರುವ ಬಡ್ಡಿ ದರ % ವನ್ನು ನಾನು ಸಂಘದ ನಿಯಮಿಷ್ಕಾಳಗಳಿಗೆ ಬದ್ದನಾಗಿದ್ದು, ಸಾಲವನ್ನು
ಅಧ್ಯಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. ಮಾನ್ಯರೇ, ನಾನು ಶ್ರೀ/ತ್ರೀಮತಿ ಸೌಲರೇಶ ಟುಳಿತ್ರತ್ತು ಕಿಂದ್ರ ರೂ. 190 ೦೮೮ – (ರೂಪಾಯಿ <u>Ohe Lajeh ಗಾಗಿಲ್ಲಳ ಕಿರ್ಗಾಹಿಸಾಗಿ ಉಗ್</u> ನು)ನ್ನು ಸಾಲವಾಗಿ ಈ ಮೇಲೆ ಹೆಸರಿಸಿದ ಸಂಘದಿಂದ ಸ್ವೀಕರಿಸಿರುತ್ತೇನೆ. ಸಾಲಕ್ಕೆ ವಿಧಿಸಿರುವ ಬಡ್ಡಿ ದರ % ವನ್ನು ನಾನು ಸಂಘದ ನಿಯಮಿಷ್ಕಾರ್ಥಗಳಿಗೆ ಬದ್ಧನಾಗಿದ್ದು, ಸಾಲವನ್ನು ಕಂತಿನ ರೂಪದಲ್ಲಿ ದಿನಾಂಕದೊಳಗೆ ಮರುಪಾವತಿ ಮಾಡುವದರಲ್ಲಿ ವಚನ ಬದ್ಧನಾಗಿರುತ್ತೀನೆ ನನ್ನ ಪ್ರತಿ ತಿಂಗಳ ಕಂತಿನ *
ಅಧ್ಯಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. ಮಾನ್ಯರೇ, ನಾನು ಶ್ರೀ/ಶ್ರೀಮತಿ ನಿರ್ಲೇಶ ಬಾಕ್ರತ್ನ ತ್ರಿ ಕಿಂದ್ರ ರೂ. 190 ೦೮೦(– (ರೂಪಾಯಿ Ohe Lake ಗಾಗಿಲ್ಲೇ ಕಿರ್ಗಾಹಿಸುವ ಬಡ್ಡಿ ದರ % ವನ್ನು ನಾನು ಸಂಘದ ನಿಯಮಾವಳಿಗಳಿಗೆ ಬದ್ಧನಾಗಿದ್ದು, ಸಾಲವನ್ನು ಕಂತಿನ ರೂಪದಲ್ಲಿ ದಿನಾಂಕದೊಳಗೆ ಮರುಪಾವತಿ ಮಾಡುವದರಲ್ಲಿ ವಚನ ಬದ್ಧನಾಗಿರುತ್ತೇನೆ ನನ್ನ ಪ್ರತಿ ತಿಂಗಳ ಕಂತಿನ ಸಹಣವನ್ನು ನನ್ನ ಪ್ರತಿ ತಿಂಗಳದ ವೇತನದಲ್ಲಿ ಕಡಿತಗೊಳಿಸಲು ಒಪ್ಪಿಗೆ ಪತ್ರ ಕೊಟ್ಟಿರುತ್ತೇನೆ ಹಾಗೂ ಅರ್ಜಿಯ ಹಿಂಬದಿಯಲ್ಲ ಸೂಚಿಸಿರುವ ನಿಯಮಾವಳಿಗೆ ಸಹ ಬದ್ಧನಾಗಿರುತ್ತೇನೆ ಅಂತಾ ಬರಕೊಟ್ಟಕರಾರು ಪತ್ರ.
ಅಧ್ಯಕ್ಷರು, ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. ಮಾನ್ಯರೇ, ನಾನು ರ್ರೀ/ತ್ರೀಮತಿ ನಾರೀಶ ಟಾಕ್ರಿಸ್ ತಿಂದ್ರ ರೂ. 190000(- (ರೂಪಾಯಿ Ohe Lajeh ಗಾಗಿಲ್ಲು ಕಿರ್ಗಾತಿಯ ರಾಗು ಹೆಸರಿಸಿದ ಸಂಘದಿಂದ ಸ್ವೀಕರಿಸಿರುತ್ತೇನೆ. ಸಾಲಕ್ಕೆ ವಿಧಿಸಿರುವ ಬಡ್ಡಿ ದರ % ವನ್ನು ನಾನು ಸಂಘದ ನಿಯಮಿಕ್ ವಳಿಗಳಿಗೆ ಬದ್ಧನಾಗಿದ್ದು, ಸಾಲವನ್ನು ಕಂತಿನ ರೂಪದಲ್ಲಿ ದಿನಾಂಕದೊಳಗೆ ಮರುಪಾವತಿ ಮಾಡುವದರಲ್ಲಿ ವಚನ ಬದ್ಧನಾಗಿರುತ್ತೀನೆ ನನ್ನ ಪ್ರತಿ ತಿಂಗಳ ಕಂತಿನ ಕಣವನ್ನು ನನ್ನ ಪ್ರತಿ ತಿಂಗಳದ ವೇತನದಲ್ಲಿ ಕಡಿತಗೊಳಿಸಲು ಒಪ್ಪಿಗೆ ಪತ್ರ ಕೊಟ್ಟಿರುತ್ತೇನೆ ಹಾಗೂ ಅರ್ಜಿಯ ಹಿಂಬದಿಯಲ್ಲ ಸೂಚಿಸಿರುವ

sakesh. B. Shinde

ಈ ಕೆಳಗೆ ಜಂಟಿಯಾಗಿ ಸಹಿ ಮಾಡಿರುವ ಜಾಮೀನದಾರರಾದ ನಾವುಗಳು ಸಂಘದ ಎಲ್ಲ ನಿಯಮಾವಳಿಗಳಿಗೆ ಬದ್ದರಾಗಿರುತ್ತೇವೆ.

ಜಾಮೀನದಾರರ ಸಹಿ

ಅ.ನಂ.	ಹೆಸರು	ಸಹಿ
()	ಟುಲ್ಲಿ ಕಾರ್ಜು ಬಹುಚಾಡ, ಪ್ರಿಕೆಟೆಂಟ್	model
2)	ವಿಸ್ತಾದ್ಯೆ ಬರೆಚ್ಚಾ ಸಂಖೆ ತಾನ್ನ	TOBUO DO
3)	र्राप्तिक, कार्ने , क्ष्मिलिक्ष्म	Godlet

ಹಿರಾ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.

- ನಿಯಮಾವಳಿಗಳು -

- ಸಾಲ ಪಡೆದುಕೊಳ್ಳುವ ಸದಸ್ಯನು ಸಂಘದ ಸದಸ್ಯ ನಾಗಿರಬೇಕು.
- ಸಂಘದ ಸದಸ್ಯನು ಕನಷ್ಡ ಪಕ್ಷ 100/ ಗಳ- ಶೇರ ಹೊಂದಿರಬೇಕು.
- ಸಾಲದ ಮಿತಿಯನ್ನು ಸದಸ್ಯನ ಸಂಬಳದ ಆಧಾರದ ಮೇಲೆ ಸಾಲ ಮಂಜೂರ ಮಾಡುವ ಕಮೀಟಿ ಸದಸ್ಯರೆ ನಿಗದಿಪಡಿಸುವರು.
- 4) ಸಾಲದ ಅವಧಿ ಗರಿಷ್ಠ 48-ತಿಂಗಳುಗಳವರೆಗೆ.
- ಸಾಲವನ್ನು ಪಡೆದುಕೊಂಡ ಸದಸ್ಯರು ಸಾಲವನ್ನು ಪೂರ್ತಿ ತುಂಬುವವರೆಗೆ ಮರಳಿ ಸಾಲವನ್ನು ಕೊಡುವದಿಲ್ಲ.
- ನಾನು ಸಂಘದ ಪೋಟ ನಿಯಮಾವಳಿಗಳಿಗನುಸರಿಸಿ ನಡೆದುಕೊಳ್ಳಲು ಒಪ್ಪಿರುತ್ತೇನೆ.
- ಸಂಬಳ ಪ್ರಮಾಣ ಪತ್ರ ಹಾಗೂ ರೂ. 20/- ಅಥವಾ 50/- ರ ಮುಚ್ಚಳಿಕೆ ಪತ್ರವನ್ನು ನಿಯಮಾವಳಿಗನುಸಾರವಾಗಿ ಸಲ್ಲಿಸುವದಾಗಬೇಕು.
- ಸಾಲಗಾರನು ಸರಿಯಾದ ಕಂತುಗಳಿಂದ ಸಾಲ ತುಂಬದಿದ್ದಲ್ಲಿ ಜಾಮೀನದಾರರಾದ ನಾವು ಜವಾಬ್ದಾರರಿದ್ದು, ಸದರೀ ಸಾಲದ ಮೊತ್ತ ಹಾಗೂ ಬಡ್ಡಿ ಭರಣಾ ಮಾಡಲು ನಮ್ಮ ವೇತನಗಳಲ್ಲಿ ಸಾಲ ಮುಟ್ಟುವವರೆಗೆ ಕಡಿತ ಮಾಡಲು ಸಂಪೂರ್ಣ ಒಪಿಕೊಂಡಿರುತ್ತೇವೆ.
- ಬ-ಕ್ಲಾಸ್ ಸಾಲಗಾರರಿಗೆ ಸಂಘದ ಯಾವುದೇ ಚಟುವಟಿಕೆಗಳಲ್ಲಿ ಯಾವುದೇ ತರಹದ ಹಕ್ಕು ಇರುವದಿಲ್ಲ

zy: Da She 3

ದಿನಾಂಕ: 16/2/2021

ಜಾಮೀನದಾರರ ಹೆಸರು ಮತ್ತು ಸಹಿ:

1. ತ್ರಪುಲ್ಗಕಾರ್ಬು ಉತ್ಸವಾಧೆ. ಹುತ್ತಪಂತ — most

2. ವಿರಾದೇಚ ಬರಪ್ಪಾ ನೆಂತೆ ಪಾಸ್ಟ್ ಹಿಂಗಿಕ

3) \$618 9080 Eners 28 __ Brown



ಹಿರಾಶುಗರ ತಾಂತ್ರಿಕ ಮಹಾವಿದ್ಯಾಲಯ, ನಿಡಸೋಸಿ

Hirasugar Institute of Technology Nidasoshi – 591 236, Karnataka State

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

Ref. No: HSIT/NDS/Account/2021-22/ 1166

Phone: (08333) 278887

Fax : (08333) 278886

Date: 1.7 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 November-2021 is as under:

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

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

Hirasugar Institute of Technology NIDASOSHI - 591 236

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INDIA NON JUDICIAL

Government of Karnataka

SURESH BALAKRISHNA SHINDE SURESH BALAKRISHNU URESH BALAKRISHNA SHINDE SURESH BALAKRISHNA I BALAKRISHNA SHINDE SURESH BALAKRISHNA SHNA SHINDE SURESH BALAKRISHNA SHINDE SUR Certificate No. HA SHINDE SURESH B KRISHNA SHINDE SURESH BALAKRISHNA IN-KA81637695712443T MDE SURESH BALA/ WHINDE SURESH BALAKRISHNA SHINDE surCertificate Issued Date of Sur/ 16-Dec-2021 13:20 PM NA SHINDE SURESH BALAKRISHNA BA ACCOUNT Here rice SURESH P NONACC (FI)/ kaksfcl08/ NIDASOSHIF KA-BISH BALAKRISHNA SHINDE I BA Unique Doc: Reference ES SUBIN-KAKAKSFCL0809994842212188TRESH BALAKRISHNA SHINDI SURESH BALAKRISHNA SHIND BA PURCHASED BY INDE SUR NDE SURESH BALAKRISHNA SURESH BALAKPISHNA SHINDE RESH BALAKRISHNA SHINDE SURDescription of Document DE SURESH BALAKRISHNA Article 12 Bond ESH BALAKRISHNA SHINDE LOAN PURPOSE sur Description as HIV E SURESH BALAKRISHNA Consideration Price (Rs.) SH BALAKRISHNA SHINDE 0 E SURESH BALAKRISHNA I BALAKRISHNA SNINDE SI SH BALAKRISHNA SHINDE SURESH BALAKRISHNA SHINDE SURFirst Party Series Shill E SURESH BALAKRISHNA BALAKRISHNA SHINDE SU SUR Second Party HINA SHIN HIT EMPLOYEES GO OP CR SOC NIY NIDASOSAL BALAKISHNA BAStamp Duty Paid By UN SURESHIE ALAKRISHMA SHINDE RESH BALAKRISHNA SHINDE NDE SURESH BALAKRISHNA BA Stamp Duty Amount (Rs.) JURESH BALAKRISHNA SHINDE (Twenty only) SURESH BALAKRISHNA SHINDE SHINDE SURESH BALAKRISHNA I BALAKRISHNA SHINDE SURESH À É SURESH BALAINISHNA SHINDE SURESH BALAKRISHNA SHINDE SUR MA SHINDE SURESH BALAKRISHNA AINDE SURESH BALA KISHNA SHINDE BALAKRISHNA SHINDE SURESH BALA SURESH BALAKRISHNA SHINDE SURESH BA KRISHNAISHINDE SURESH BALAKRIGHNA ANA SHINDE SURESH BALAKRISHNA SHINDE BALAKRISHNA SHINDE SURESH BALAKRISHAS SURESH BALAKRISHNA SHINDE SURESH BALAKRISHROM I BALAKRISHNA SHINDE SURESH BALAKRISHNA SHINDE SURESH BALAKRISHNA SHINDE SURESH BALAKRISHNA SHINDE JRESH BALAKRISHNA SHINDE EURESH BALAKRISHNA THINDE SURESH BALAKRISHNA THINDE SURESH BALAKRISHNA SHINDE BALAKR SURESHIR RESH BALAGA BALA SURESH BALAKRISHNA SHINDE SURESH BALAKRISHNA SHINDE SURESH BALAKRISHNA SHINDE SUR I BALAKRISHNA SHINDE SURESH BALAKRISHNA SHINDE SURESH BALAKRISHNA SHINDE SURESH BALAKRISHNA SHINDE bassa sente or base ballier this line.



- The authenticity of this Stamp certificate should be verified at www.shcilestainty.com or using a 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.
 The orius of checking the legitimacy is on the users of the certificate.
- 3. In case of any discrepancy please inform the Competent Authority.

ಖರ್ಚಿನ ಪಾವತಿ ಮೆ॥ ಅಧ್ಯಕ್ಷರು, ಹೀರಾಶುಗರ ಇನ್ಸ್ಟ್ಟ್ ಟ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಕೋ-ಆಪ್. ಕ್ರಿಡಟ್ ಸೊಸಾಯಿಟಿ ಲಿ; ನಿಡಸೋಸಿ. ಬರಕೊಡುವ ಪಾವತಿ ಏನೆಂದರೆ ನನಗೆ ನಿಮ್ಮ ಕಡೆಯಿ ಕೆಳಗೆ ಬರೆದ ಪ್ರಕಾರ ಹಣ ರೋಖ ಮುಟ್ಟಿತು. ಶವಶೀಲು ರೂ. me mu 18/12/21 ಬಾಂಡ ಪ್ರಕಾರ ಪ್ರಕಾರ ರೂ. ಚಿಕ್ಕನಂ. 075986 1,90,000 ಶೇಅರ ಬಾಬತ್ತರೂ. ಠೇವು ಪಠತ ಶೇಅರ ಪರತ ಇತರ ಆಕ್ಷರದ್ವಲ್ಲಿ ರೂ. 🗥 🗠 ಒಟ್ಟು --2009/ නිරුන් /6-/ ව ಹಣ ಪಡೆದವರ ಸಹಿ

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

BALANCE SHEET AS 31/03/2023

Liabilities	Amo		Assets		
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 Equlisation 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

Secretory

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

Board of Directors:

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

Aleun

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

Hirasugar !nstitute of Technology Employees Co-op Credit Society Ltd, Nidasoshi, Tg.: Hukkeri, Dt.: Belagavi. (Hose

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

Hirasugar Institute of Technology Employees Co-op Credit Society Ltd,

Nidasoshi, Tq.: Hukkeri, Dt.: Belagavi.

ತಾ.ಹುಕ್ಕೇರಿ.

Smanuan Jadi

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

SI.N	A/C NO	Name of the Share Holder	Loan Balance	SI.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 1		ance as on 31-03-2023: 62,78,781/-	
20.	32	Shri.Niranjan Wani	151675			2,70,701	
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				13 1294
28.	55	Shri. Dayanand Kamate	171535				
29.	60	Shri.Basavaraj Siddappa Sooji	39498				
30.	62	Shri Ashok Dundappa Kumbar	158269				
31.	64	Shri.Veerbhadra 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			1	
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				

Hon ble SECRETAR'
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.

\$500 5000 S

ನಿಡಗೋಪಿ.

ತಾ.ಪುಕ್ಕೇರಿ.

ಹಿರಾಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. 591 236 ತಾ. ಹುಕ್ಕೇರಿ ಜಿ. ಬೆಳಗಾವಿ

ಸಾಲ ಬೇಡುವ ಅರ್ಜಿ

ಗೆ,	(90	ಲ್ಪಾವಧಿ ಹಾಗೂ ಮಧ್ಯಮಾವಧಿಯ)	Confee Train
ಅಧ್ಯ ಹಿರಾ	ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರ	St Aller Tank	367 36.
	ಗಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ. ನೈರೇ,	505, (B) 0150-	ಈ ಮೇಲಿನ ಸಂಘದ ಅ/ಬ
	of sounding to a description of the sound of	_ ಗಳ ಸಾಲವನ್ನು ನನ್ನ ಗೃಹ ಕರ್ತವ್ಯ	ದ ಉದ್ದೇಶಕ್ಕೆ ಮಂಜೂರ ಮಾಡಬೇಕೆಂದು
ವೇತ	ತಿಸಿಕೊಳ್ಳುತ್ತೇನೆ. ನಾನು ಈ ಹಣವನ್ನು ಬಡ್ಡೆಯೊ ನದ ಪತ್ರವನ್ನು ಅರ್ಜಿಯೊಂದಿಗೆ ಲಗತ್ತಿಸಿರುತ್ತೇನೆ.		
-	ಈ ಕೆಳಗಿನ ವ್ಯಕ್ತಿಗಳು ಜಂಟಿಯಾಗಿ ನನ್ನ ಸಾಲ		ಗುವವರೆಗೆ ಜಾಮೀನದಾರರಾಗಿರುತ್ತಾರೆ.
9.7		ito	x&
2	Caevale Cara	A. 0511 510	D. B Evoros
ಸ್ಥಳ :	of: 17/05/00	X	, NA Chose ಇತಿ ತಮ್ಮ ವಿಶ್ವಾಸಿಕ,
		ಕಮೀಟಿಯ ಶರಾ	contains: formula
ಮಂ	F ಸ್ಪೀಕರಿಸಿದ ದಿನಾಂಕಚೆಕ್ ಕ ಜೂರಾದ ದಿನಾಂಕಚೆಕ್ ಕ : ಮಂಜೂರಾದ ಹಣ ರೂಚೆಕ್ ಮಂಜೂರ ಮಾಡಲಾಗಿದೆ.		ರ್ಜಿ ಕ್ರಮಾಂಕ
ಸಭೆ	ನಂ ರರಾ	ವು ನಂ. <u>09</u>	ದಿನಾಂಕ
	ೆ ಗೌರವ ಕಾಯಕ ರಾಶ್ಯ ಹಿರಾಶಾಸರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆ	ಫ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ	ಅಧ್ಯಕ್ಷರು ನಿಯಮಿತ, ನಿಡಸೋಸಿ.
-2	2/1808	ಕರಾರು ಶರಾ	
	ಕ್ಷರು, ೨ ಶುಗರ ಇನಸ್ಟಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕಂ	30 00 00 00 00 00 00 00 00 00 00 00 00 0	
	ಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.		
ಮಾ	ನ್ಯರೇ, ನಾನು (ಶ್ರೀ./ ಶ್ರೀಮತ್ರಿ 2000)	Jy 49D- Dohn	n' on 20000
	ownow 160 CAICA ON	101)ನ್ನು ಸಾಲವಾಗಿ ಈ ಮೇಲೆ
ಹೆಸ	ರಿಸಿದ ಸಂಘದಿಂದ ಸ್ವೀಕರಿಸಿರುತ್ತೇನೆ. ಸಾಲಕ್ಕೆ ವಿಧಿ	ಸಿರುವ ಬ ಡ್ಡಿ ಜಿರ % ವನ್ನು ನಾನು ಸಂಘ	ನ ನಿಯಮಾವಳಿಗಳಿಗೆ ಬದ್ಧನಾಗಿದ್ದು, ಸಾಲವನ್ನು
	ನ ರೂಪದಲ್ಲಿ <u>60</u> ದಿನಾಂಕದ	ಖಾಳಗ ಮರುಪಾವತಿ ಮಾಡುವದರಲ್ಲಿ ವ ರಾಜನಾ ಎಂದಿ ಪ್ರತಿ ಪ್ರಕ್ರಿಸ್ತರ ಪ್ರಾಸ್ತರ ಪ್ರಕ್ರಿಸಿ	ಚನ ಬದ್ಧನಾಗಿರುತ್ತೇನೆ ನನ್ನ ಪ್ರತಿ ತಿಂಗಳ ಕಂತಿನ
	ವನ್ನು ನನ್ನ ಪ್ರತಿ ತಿಂಗಳದ ವೇತನದಲ್ಲಿ ಕಡಿತಗೆ ುಮಾವಳಿಗೆ ಸಹ ಬದ್ದನಾಗಿರುತ್ತೇನೆ ಅಂತಾ ಬರಕೆ.		ಾಗೂ ಅರ್ಜಿಯ ಹಿಂಬದಿಯಲ್ಲ ಸೂಚಿಸಿರುವ
ಸ್ಥಳ	Edny Do		p not there

ಈ ಕೆಳಗೆ ಜಂಟಿಯಾಗಿ ಸಹಿ ಮಾಡಿರುವ ಜಾಮೀನದಾರರಾದ ನಾವುಗಳು ಸಂಘದ ಎಲ್ಲ ನಿಯಮಾವಳಿಗಳಿಗೆ ಬದ್ದರಾಗಿರುತ್ತೇವೆ.

ಜಾಮೀನದಾರರ ಸಹಿ

ಅ.ನಂ.	ಹೆಸರು	ಸಹಿ
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y	19 1200 1812 E) BIENDE	Ned 5
3	STONE SINDING, PIDE	Dord

ಹಿರಾ ಶುಗರ ಇನಸ್ಪಿಟ್ಯೂಟ್ ಆಫ್ ಟೆಕ್ನಾಲಾಜಿ ನೌಕರರ ಸಹಕಾರಿ ಸಂಘ ನಿಯಮಿತ, ನಿಡಸೋಸಿ.

- ನಿಯಮಾವಳಿಗಳು -

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

> No felhers

ಜಾಮೀನದಾರರ ಹೆಸರು ಮತ್ತು ಸಹಿ:

1. टिर्कार्ड. राम्हार्ज्य, राम्यार . क. के. के. कार्यात.

2. Wordl. Co. of ovido. Non & const



ಹಿರಾಶುಗರ 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:

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

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

PRÍNCIPAL

Firasugar Institute of Technology

NIDASOSHI - 591 236

8



INDIA NON JUDICIAL

Government of Karnataka

e-Stamp NIJALINGAYYA DUNDAYYA ACHARI NIJALINGAYYA DUM CHARI NIJALINGAYYA DUNDAYYA ACHARI NIJALING A ACHARI NIJALINGAYYA DUNDAYYA ACHARI &ACHARI NIJALINGAYYA DUNDAYYA ACHARI Certificate No. NDAYYA ACHARI NIJAL : UNGAYYA DUNDAYYA ACHARI NIJALINGA IN-KA19648672245318U A DUNDAYYA RI NIIALINGAYYA DUNDAYYA ACHARI Certificate Issued Date CHARI 17-May-2022 01:22 PM YYA DUNDAYYA ACHARI NIIALINGI Account Reference A DUNDA NONACC (FI)/ kaksfci08/ NIDASOSHI/ KA-BEYYA DUNDAYYA ACHARI A Unique Doc. Reference SUBIN-KAKAKSFCL0866581667692307UIGAYYA DUNDAYYA ACHARI Purchased by GAVYA DV NIJALINGAYYA DUNDAYYA ACHARI Description of Document Article 12 Bond DAYYA ACHARI NIJALING SAYYA DUNDAYYA ACHARI VIIA Description UNDAYYA LOAN PURPOSE DAYYA ACHARI NIJALINGA Consideration Price (Rs.) AYYA DUNDAYYA ACHARI 0 DAYYA ACHARI NIJALINGI (Zero) A ACHARI NIIALINGAYYA AYYA DUNDAYYA ACHAR NIJAEirst Rarty DUNDAYYA NIJALINGAYYA DUNDAYYA ACHARI Second Party HIT EMPLOYEES CO OP CR SOC NIY NIDASOSHI NIDAYYA ACHARI Stamp Duty Paid By NUALINGAYYA DUNDAYYA ACHARI GAYYA DUNDAYYA ACHARI NDAYYA ACHARI NIIALINGA Stamp Duty Amount(Rs.) (Twenty only) NIJALINGAYYA DUNDAYYA ACH A ACHARI NIJALINGAYYA DUNDÂ GENERAL GENERAL NIIALINGAYYA DUNDAYYA ACHARÎ A ACHARI NIJALINGAYYA DUNDAYYA NIJALINGAYYA DUNDAYYA ACHARI NIJAE A ACHARI NIJALINGAYYA DUNDAYYA ACHAR NIJALINGAYYA DUNDAYYA ACHARI, NIJALINGAYYA D CHARI NIJALINGAYYA DUNGO, TOT LO HARI A ACHARI NIJALINGAYYA DUNDAYYA ACHARI NIJALINGAYYA DUNDAYYA ACHARI NIJALINGAYYA DUNDAYYA ACHARI NIJALINGO ACHARI NIJALINGAYYA DUNDAYYA ACHARI NIJALINGAYYA DUNDAYYA NIJALINGAYYA DUNDAYYA ACHARI NIJALINGAYYA DUNDAYYA ACHARI NIJALINGAY A ACHARI NIIALINGAYYA DUNDAYYA ACHARI NIIALINGAYYA DUNDAYYA ACHARI NIIALINGAYYA DUNDA Please write or type below this line

- 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. The onus of checking the legitimacy is on the users of the certificate.
- 3. In case of any discrepancy please inform the Competent Authority.

ಬರ್ಚೆಗೆ ಪಾಪತಿ ಮೆ॥ ಅಧ್ಯಕ್ಷತ್ತು, ಹೀರಾಖೆಗರ ಇನ್ಸ್ಟ್ ಟ್ಯೂಟ ಆಫ್ ಟಿಕ್ಕಾರಾಜಿ ನೌಕರರ ನೋ-ಆಪ್. ಕ್ರಿಡಟ್ ಸೊಸಾಯುಟ್ ಲಿ; ನಿಡಸೋಸಿ. ಬರಕೊಡುವ ಪಾವತಿ ಏನೆಂದರೆ ನನಗೆ ನಿಮ್ಮ ಕಡೆಯ ಕೆಳಗೆ ಬರೆದ ಪ್ರಕಾರ ಹಣ ರೋಖ ಮುಟ್ಟಿತು. ಶವಶೀಲು ರೂ. ಸಾಲಶಾ॥ 18/08/27 ಬಾಂಡಪ್ರಕಾರ ಚಿಕ್ಕನಂ. ೧೭೭೯ ಪ್ರಕಾರರೂ. 200,000 ತೇಆರ ಬಾಬಕ್ಕರೂ. ಕೇವು ಪರತ ಶೇಆರ ಪ್ರಶ Two lash only ಆಕ್ಷರದಲ್ಲಿ ಕೊ. 100ADAM ಹಣ ಪ್ರತಿಪತ್ರರ ಸಹಿ

10



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

MIDASOSHI-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

Dues for the wage month of

February 2023

Address: NIDASOSHI, TAL HUKERI, NIDASOSHI, BELGAUM, KARNATAKA

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 Thousa	nd Three Hundred Twelve R	upees 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	

diensugar Institute of Technologe



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

TRRN 2422303003149

ECR Id 85792642

LIN: 1981253066

shment Code & Name GBHBL0027127000 HIRASUGAR INSTITUTE OF TECHNOLOGY

Dues for the wage month of

February 2023

Address: NIDASOSHI, TAL HUKERI, NIDASOSHI, BELGAUM, KARNATAKA

EPF

EPS

EDLI 133

Total Subscribers: Total Wages:

133 18,45,249

125 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 Thousar	nd Three Hundred Twelve R	upees 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.

	PIVIRPY	ADICT	
A) A/C no 1 (Employer share) (Rs.) -	0		0
B) A/C no 10 (Pension fund) (Rs.) -	0		0
C 3 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		

DMDDV



ASOSHI-591236-0

ADDV



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 (I	n 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 Rup	pees):		
Total PMRPY Upfront EPF Amount	0	Total PMRPY Upfront EPS Amount	0
PMRPY benefit remarks	NA		
ABRY Upfront Benefit Details (In Rupe	es):		
Total ARRY honofit Amount	Fmployee EPF Share	Employer FPS Share	Employer EPF Share
Total ABRY benefit Amount	0	0	0
ABRY benefit remarks	Establishment is not eligible for ABRY benefit as from base month.	employee count [137] is less than requ	ired employee count of 156

Member Details :-

		Name :	as per		Wa	ges			Contribution	Remitted			PMF	RPY / ABRY E	Benefit	Posting
SI. No.	. UAN	ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days	Refunds	Pension Share	ER PF Share	EE Share	Location of the member
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 BADAKAR	ANAND KEDARI BADAKAR	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	-	15	-	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 KANKANAVA DI	17,940	15,000	15,000	15,000	1,800	1,250	550	0	0	-		-	N.A.
10	100090466436	ARUN KALLPPA TALWAR	ARUN KALLAPPA TALAWAR	16,740	15,000	15,000	15,000	1,800	1,250	550	0	0	-	(*	-	N.A.
11	100090335449	ARUN SANKESHWARI	ARUN SANKESHWA RI	31,510	15,000	15,000	15,000	1,800	1,250	550	0	0	-	12	-	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	_	12	-	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 DUI JAPPA KUMBAR	ASHOK DUNDAPPA KUMBAR	11,970	11,970	11,970	11.570	1,436	997	439	0	J	-	-	-	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 HUNACHYALI	10,089	10,089	10,089	10,089	1,211	840	371	0	0	-	1.9.	.=	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		(5)	≈	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	BHARAMAPP A DUNDAPPA GURAV	17,940	15,000	15,000	15,000	1,800	1,250	550	0	0				N.A.

	2	Name a	as per		Wag	ges		(Contribution	Remitted			PMF	RPY / ABRY E	Benefit	Posting
SI. No.	UAN	ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days	Refunds	Pension Share	ER PF Share	EE Share	Location of the member
20	101006407530	BHAVALING ALIAS PRATIMA KHOT	BHAVALING ALIAS PRATIMA KHOT	36,583	15,000	15,000	15,000	1,800	1,250	550	0	o	-	S#8	-	N.A.
21	100123292042	CHANDRAKANT BASAPRABHU PATIL	CHANDRAKA NT BASAPRABH U PATIL	12,036	12,036	12,036	12,036	1,444	1,003	441	0	0	12	(20)	-	N.A.
22	100124913624	CHETAN JODATTI	CHETAN JODATTI	15,114	15,000	15,000	15,000	1,800	1,250	550	0	0	22		-	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		120	-	N.A.
24	100125467560	CHIDANAND SHANKAR SOOJ	CHIDANAND SHANKAR SOOJI	13,231	13,231	13,231	13,231	1,588	1,102	486	0	0	2 -	n=		N.A.
25	100129896071	DARSHAN NILKANTHRAO INAMDAR	DARSHAN NILKANTHRA O INAMDAR	61,320	15,000	15,000	15,000	1,800	1,250	550	0	0	-	121	2	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	1	-	-	N.A.
29	100872445504	DAYANAND KONAKERI	DAYANAND KONAKERI	10,861	10,861	10,861	10,861	1,303	905	398	0	0	-	4 .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	DURADUNDI MADIHALLI	52,638	15,000	15,000	15,000	1,800	1,250	550	0	0	2	84)	2	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	1		-	N.A.
33	100150117588	GANAPATI L INDAPPA BASAPURI	GANAPATI DUNDAPPA BASAPURI	12,312	12,312	12,312	17,312	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	4	-	2	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	GIRIMALLAPP A DODAGOUD AR	18,368	15,000	15,000	15,000	1,800	1,250	550	0	0	ž	(1일) (14	_	N.A.
37	100693906768	GIRISH ZULAPI	GIRISH ZULAPI	25,920	15,000	15,000	15,000	1,800	1,250	550	0	0	8	-	Ē	N.A.
38	100927516665	GURURAJ SHIDLINGAPPA SOLABANNAVA	GURURAJ SHIDLINGAP PA	28,922	15,000	15,000	15,000	1,800	1,250	550	0	0	-		-	N.A.

		Name a	as per		Wag	ges		(Contribution I	Remitted			PMF	RPY / ABRY B	Benefit	Posting
SI. No.	UAN	ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days	Refunds	Pension Share	ER PF Share	EE Share	Location of the member
		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	i e	s = 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 LAZARAIAH BOLLARAPU	JAYANNA LAZARAIAH BOLLARAPU	16,330	15,000	15,000	15,000	1,800	1,250	550	0	0	·	-	7=	N.A.
43	100185095015	KADAPPA KANAKANWADI	KADAPPA KANKANAWA DI	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	100190955576	KARVEER BHAIRU MANWADE	KARVEER BHAIRU MANWADE	97,974	15,000	15,000	15,000	1,800	1,250	550	0	0	11-	(=)	-	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	1	L.	=	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	29	-	=	, 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	MAHAĐEV 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	P.S	•	-	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	1	(-)	-	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 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.

	5	. Name a	as per		Wa	ges			Contribution	Remitted			РМІ	RPY / ABRY E	Benefit	Posting
SI. No.	UAN	ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days	Refunds	Pension Share	ER PF Share	EE Share	Location of the member
		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	4	=	-	N.A.
59	100875499931	MALAGOWDA JAYAGOWDA PATIL	MALAGOWD A JAYAGOWDA PATIL	8,700	8,700	8,700	8,700	1,044	725	319	0	0	-	-	•	N.A.
60	100451874388	MALLIKARJUN PADMANNAVAR	MALLIKARJU N PADMANNAV AR	10,855	10,855	10,855	10,855	1,303	904	399	0	0	-	-		N.A.
61	10132846)935	MALLIKARJUN SATTIGERI	MALLIKARJU N SATTIGERI	13,147	13,147	13 17	13,147	1,578	1,095	483	0	0	-	-	-	N.A.
62	100216522160	MALLIKARJUN YASHAVANTH	MALLIKARJU N YASHAVANT	11,760	11,760	11,760	11,760	1,411	980	431	0	0		¥	-	N.A.
63	100220408532	MANJUNATH SHANKAR HANAGADKAR	MANJUNATH SHANKAR HANAGADAK AR	72,026	15,000	15,000	15,000	1,800	1,250	550	0	0	120	ā	-	N.A.
64	100222384038	MANOJKUMAR CHITALE	MANOJKUMA R CHITALE	0	0	0	0	0	0	0	28	0		-	-	N.A.
65	100223602059	MARTAND KADALAGI	MARTHAND 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	MOUNESHW AR 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 HONNAGOUDA R	NAGANAGOU DA K HONNAGOU DAR	58,372	15,000	15,000	15,000	1,800	1,250	550	0	0	_	-	-	N.A.
70	100254910682	NIJALINGAYYA DUNDAYYA ACHARI	NIJALINGAYY A 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	# 2	-	-	N.A.
72	100258606056	NYAMATULLA PATEL	NYAMATULL A PATEL	54,597	15,000	15,000	15,000	1,800	1,250	550	0	0	-	9	-	N.A.
73	100261316479	ONKAR BASAVARAJ HEDDURSHETTI	ONKAR BASAVARAJ HEDDURSHE TTI	53,326	15,000	15,000	15,000	1,800	1,250	550	0	0	* •		-	N.A.

		Name a	as per		Wag	ges			Contribution	Remitted			PMI	RPY / ABRY E	Benefit	Posting
SI. No.	UAN	ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days	Refunds	Pension Share	ER PF Share	EE Share	Location of the member
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	-	e.	-	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		s - s	-	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	100	-		N.A.
81	100818864095	RAGHAVENDRA RAMAKANT MAGGAVI	RAGHAVEND RA 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 SHIVALIGAPPA KAPASHI	RAJASHEKHA R SHIVALINGAP PA KAPASHI	13,231	13,231	13,231	13,231	1,588	1,102	486	0	0		-	r-	N.A.
84	100294869270	RAJENDRA BARDOL	RAJENDRA BARDOL	20,040	15,000	15,000	15,000	1,800	1,250	550	0	0	-	t -	-	N.A.
85	100297065083	RAJESHWAR SHIVANNAVAR	RAJESHWAR SHIVANNAVA R	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	(2)	(<u></u>)	(a)	N.A.
87	100304298137	RAMESH CHINC: ANI	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 SHIVALINGAP PA KAGI	10,266	10,266	10,266	10,266	1,232	855	377	0	0	- A-1	=	0.75	N.A.
89	100123450154	S M CHANDRAKANT H	S.M. CHANDRAKA NTH	28,922	15,000	15,000	15,000	1,800	1,250	550	0	0			-	N.A.
90	100326211602	SACHIN SHETIGOUD PATIL	SACHIN SHETIGOUD 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 CHOUGALA	12,567	12,567	12,567	12,567	1,508	1,047	461	0	0	œ.	-	2	N.A.
92	100326526561	SADASHIV BIRANAGADDI	SADASHIV BIRANAGAD DI	12,302	12,302	12,302	12,302	1,476	1,025	451	0	0	-	1=0	8.00	N.A.

		Name a	ıs per		Wag	jes .		2	Contribution	Remitted			PMF	RPY / ABRY E	enefit	Posting Location of
SI. No.	UAN	ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days	Refunds	Pension Share	ER PF Share	EE Share	the member
93	100335602827	SANNAPPA C KAMATE	SANNAPPA C KAMATE	1,96,381	15,000	15,000	15,000	1,800	1,250	550	0	0		55/	-	N.A.
94	100337429045	SANTOSH SHIVAMURTI KARASHETTI	SANTOSH SHIVAMURTI KARISHETTI	11,505	11,505	11,505	11,505	1,381	958	423	0	0	-	15	-	N.A.
95	100451650632	SATAYYA KAMATE	SATAYYA KAMATE	11,106	11,106	11,106	11,106	1,333	925	408	0	0	-	-	8	N.A.
96	100341679364	SATTEPPA KOTEPPAGOL	SATTEPPA KOTEPPAGOL	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	-	-	7	N.A.
98	100682057760	SHASHIKANT WALKI	SHASHIKANT WALKI	33, 12	15,000	15,000	15,000	1,800	1,250	550	0	0	-	:-	7	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	SHIVANAGOUD A NINGANAGOUA TOPANNĀVAR	SHIVANAGO UDA NINGANAGO UDA TOPANNAVA R	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	•	<u>.</u>	3	N.A.
108	100352428138	SHIVAPPA BASAPPA KHOT	SHIVAPPA BASAPPA KHOT	10,620	10,620	10,620	10,620	1,274	885	389	0	0	9	-	2	N.A.
109	100352510965	SHIVARAM BADAKAR	SHIVARAM BADAKAR	10,266	10,266	10,266	10,266	1,232	855	377	0	0	9	2	12	N.A.
110	101402294991	SHREEDEVI S BEESANAKOPP A	SHREEDEVI S BEESANAKO PPA	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.

		Name	as per	8	Wa	ges			Contribution	Remitted			PM	RPY / ABRY I	3enefit	Posting
SI. No.	UAN	ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days	Refunds	Pension Share	ER PF Share	EE Share	the membe
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	v	-2		N.A.
113	100362520122	SRINATH PATIL	SHRINATH L PATIL	45,677	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	:#X	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	-	-	5	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 VIJAYAKUMA R JORE	21,600	15,000	0	15,000	1,800	0	1,800	0	0		3.	5	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 SHIVAPUTRAPP A MALAJ	SUNITA SHIVAPUTRA PPA MALAJ	55,229	15,000	15,000	15,000	1,800	1,250	550	0	0			-	N.A.
122	100373614842	SURESH BALAKRISHATN A SHINDE	SURESH BALAKRISHA TNA SHINDE	15,645	15,000	15,000	15,000	1,800	1,250	550	0	0	N/W		_	N.A.
123	100376243092	SUSHILA SHANKAR KANKANWADI	SUSHILA SHANKAR KANKANWAD	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	1=1	7	_	N.A.
125	100399161764	VAGEESHAPAN DITARADHYA V GURUWADAYA R	VAGEESHAP ANDITHARAD HYA V GURUWODE YAR	30,705	15,000	0	15,000	1,800	0	1,800	0	0	353	-	-	N.A.
126	100401483714	VEERBHADRA NIJAPPA BISKOP	VEERBHADR A 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	2			N.A.
128	101490412266	VINAYAK VISHWANATH MENASI	VINAYAK VISHWANAT H MENASI	13,000	13,000	13,000	13,000	1,560	1,083	477	0	0	-	-		N.A.
129	100032094341	VIRUPAKSHI MALLAPPA BHUMANNAVAR	VIRUPAKSHI MALLAPPA BHUMANNAV AR	40,121	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.

9		Name a	as per		Wa	ges		8	Contribution	Remitted			PMF	RPY / ABRY B	Benefit	Posting Location of
SI. No.	UAN	ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days	Refunds	Pension Share	ER PF Share	EE Share	the member
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 BADAKAR	VIRUPAXI BADAKAR	25,530	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	ř	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	VISHWANAT H HIREMATH	32,315	15,000	15,000	15,000	1,800	1,250	550	0	0	-		-	N.A.
134	101884048864	VISHWANATH IRAGOUDA PATIL	VISHWANAT H 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	=	82	-	N.A.
137	100414756583	YALLAPPA HANUMANTAPP A NAIK ‡	YALLAPPA	14,663	14,663	14,663	14,663	1,760	1,221	539	0	0	-	-	-	N.A.

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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 :-

ABRY 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

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



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HSIT
R & D
Research Scholars
2023-24

Nidasosi

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		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

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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		SDMCET, Dharwad	Comprehensive Viva- Voce Completed	
8	Mr. Mahesh Huddar	2017	An Intelligent Multimodal Sentiment Analysis and Emotion Detection Framework for Multimedia Reviews		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. Havaldar	KLEMSSCET, Belagavi	Degree Awarded	
11	Mrs. S. S. Kamate Nidasoshi	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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HSIT 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	stitute of 2
16	Amit Uday Neshti	2023	Machine Learning Based Condition Monitoring And Fault Diagonsis Of Synchronous And Asynchronous Machines	Dr. Basavaraj V. Madiggond	HSIT, Nidasoshi	Provisional Registered	Vidasoshi Pin.591236

Dean Research & Development

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