



उत्तराखण्ड शासन

PROVISIONAL CERTIFICATE FOR REGISTRATION OF CLINICAL ESTABLISHMENT

Provisional Reg. No.: DRA/CEA/PVT/1287/FEB/2024


Date of issue..19/02/2024.....

Valid up to – 05-02-2024 TO 04-02-2025

- | | | |
|------------------------------|---|---|
| 1 - Name of the C.E. | - | Himalayiya Chikitsalaya Sambad
Himalayiya Ayurvedic (PG) Medical College |
| 2 - Address of the C.E. | - | Fatehpur Tanda, Jeevanwala Dehradun,
Uttrakhand |
| 3 – Owner of the C.E. | - | Mr. Baal Krishan Chamoli (Secretary) |
| 4 - Name of person in-Charge | - | Dr. Anil Kumar Jha |
| 5 - System of Medicine | - | Ayurvedic |
| 6 -Type of Establishment | - | Hospital (124 Bed) |

Is hereby provisionally registered under the provisions of Clinical Establishments (Registration & Regulations) Act 2010 and the Rules made there under.

This authorization is subject to the condition as specified in the rules in force under the Clinical Establishments (Registration & Regulations) Act 2010 and the Rules made under.


Chief Medical Officer
District Registration Authority
Dehradun

Place: DEHRADUN
District Registration Authority
CMO Dehradun, 105 Chandar Nagar Dehradun.
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