



Kerala Clinical Establishment (Registration and Regulation) Act 2018

Department of Health and Family Welfare, Government of Kerala

PROVISIONAL CERTIFICATE REGISTRATION OF CLINICAL ESTABLISHMENT

Provisional Registration No : **T32556MMLAB00071**

Date of Issue : **28-12-2019**

Valid upto : **27-06-2024**

Name of the Clinical Establishment : **KG CLINICAL LABORATORY**
Address : **4/526, PUTHENPURACKAL BUILDING
THEATRE JUNCTION ANAKKARA**
Owner of the Clinical establishment : **PRIVATE SECTOR**
System of Medicine : **MODERN MEDICINE**
Type of Establishment : **LABORATORY**

Is hereby provisionally registered under the provisions of Kerala Clinical Establishments (Registration and Regulation) Act, 2018 and the Rules made there under.

This authorization is subject to the conditions as specified under the Kerala Clinical Establishments (Registration and Regulation) Act, 2018 made there under.

Idukki-DRA

District Registration Authority

28-12-2019

District Registration Authority
Idukki

This is a computer-generated certificate. No signature is required.

आयकर विभाग
INCOME TAX DEPARTMENT



सरकार भारत
GOVT. OF INDIA

M THAVAMANI
MUTHURAJ
05/05/1990

1463
15
2705

Permanent Account Number

CCSPM3748K




Signature

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- Serving you with consistency at all times
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आपकी सेवा के लिये दृढ़संकल्प

आईसीआईसीआई बैंक में हम, आपको श्रेष्ठ बैंकिंग अनुभव तथा विश्वास के आधार पर निर्मित दीर्घकालीन सम्बन्ध प्रदान करने के लिये दृढ़संकल्प हैं.

- हमारी सभी बैंकिंग सेवाओं तथा उत्पादों के बारे में स्पष्ट जानकारी द्वारा पारदर्शिता
- आपकी सभी बैंकिंग आवश्यकताओं के अनुरूप, यथा समय एवं सम्पूर्ण समाधान देने हेतु तत्पर
- आपकी बैंकिंग आवश्यकताओं को समझते हुए उपयुक्त तदनुरूप बैंकिंग उत्पाद एवं सेवाएं उपलब्ध.
- हमेशा आपकी सेवा में तत्पर
- आपके साथ सभी व्यवहारों में निष्पक्ष



Base Br: 4692

Open Dt: 01-03-2023

A/C Type: CAKIT.

Branch

शाखा

ANAKKARA

ICICI BANK LTD., GROUND FLOOR, 4/57

VARAPPURATHU BUILDING, 7TH MILE, ANA

ANAKKARA

IFSC Code : ICIC0004692

MICR Code : 685229004

Nominee: Registered

Customer Id : 589255872

SB/RD A/c No.

बचत खाता/आवृत्ति जमा संख्या:

Name

नाम

469205500088

M/S KG CLINICAL LABORATORY

M THAVAMANI

4 526, PUTHENPURACKAL BUILDING, TH
EATRE JUNCTION, ANAKKARA, ANAKKARA

IDUKKI
KERALA

685512



INDIAN MEDICAL ASSOCIATION GOES ECOFRIENDLY IMAGE ADMINISTRATIVE OFFICE

IMA State Headquarters, Anayara P.O., Thiruvananthapuram – 695029

Ph: 0471-2742211, 0471-2741188 Mob 96569 93339 Email: imageimaksbvtm@gmail.com Website: www.imageima.org



3200

IMAGE COMMON BIOMEDICAL WASTE TREATMENT FACILITY - CBWTF

(Behind Gramalekshmi Mudralayam, Manthuruthy, Kanjikode West, Palakkad – 678623)

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State President, IMA KSB

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Imm. Past President, IMA KSB

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State Secretary, IMA KSB

Dr. LALITH SUNDARAM
State Treasurer, IMA KSB

VICE CHAIRMAN, IMAGE

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E-mail: dr.pr.nair@gmail.com

No: IMAGE – 39818/2020

Thiruvananthapuram
01.08.2020

SECRETARY, IMAGE

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To,

IDK.0156

Ms. M.Thavamani

Proprietor

K G Clinical Laboratory

C.P.IV/326, Kizhekkecheruvil Building

Theatre Junction, Anakkara-P.O

Idukki - 685512

Phone :04868283599, Mobile :9562701052

TREASURER, IMAGE

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E-mail: drshajick@gmail.com

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Dear Madam,

DISTRICT REPRESENTATIVES

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Kasargod

Dr. KISHORE KUMAR T.
tpndvkishor@gmail.com 9447469665

Sub: Change of ownership intimation – reg;

Ref: No objection letter received from *Mrs. Annamma George*

I thankfully acknowledge the receipt of DD.No.271337dated 06.11.2019 for Rs.6,000/- (Rupees Six Thousand Only) and the official receipt no.RPT/390718 dated 01.08.2020 for the same is enclosed here with. The ownership of **K. G Clinical Laboratory**, (Aff.No.**IDK.0156**) has been changed from *Mrs. Annamma George* to **Ms. M.Thavamani** as noted above. The operational cost for service of IMAGE will be **Rs.860/- per month** and this should be remitted before the 10th of every month, failing which fine will be imposed as stated in "Clause 22" of the terms and conditions of IMAGE.

Please dial 94460 40470 for further action

Yours sincerely,

Dr. Sharafudheen. K.P
Secretary IMAGEIMAKSB

Copy to:-Dr.Jacob C.V, District Representative IMAGE,Idukki

Mr. T. Jayaraj, General Manager, G.J. M. Palakkad

Caring minds.... healing hands

Manager Administration: 80783 36666, Manager Operations: 94459 98922
Environment Engineer: 80780 26869, Operations Executive: 70122 28469
Billing Section: 98476 62226, Accountant: 96056 69996 Reception: 0471 - 2741188, 2742211
E-mail: imageimaksbvtm@gmail.com Website: imageima.org



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Anayara. P.O., Thiruvananthapuram-29. Ph: 0471 2742211
Website: www.imageima.org. E-mail: imageimaksbtvm@gmail.com



image

RECEIPT FOR AFFILIATION

IDK.0156

No : **RPT/390718**

Date : **01-08-2020**

Received with thanks from **Ms. M.Thavamani, K G Clinical Laboratory, C.P.IV/326 ,
Theatre Junction, Kizhekkecheruvil Building, Idukki , a sum of Rs. 6,000/-
(Rupees Six Thousand only) vide DD No. 4049 [Union Bank of india] Dated 06-11-
2019 Thiruvananthapuram towards Affiliation Fee for IMAGE.**

No. of Beds 0 / DC 0 / Lab 0 / Clinic 0

Affiliation Fee Rs. **6,000/-**

Thiruvananthapuram

Treasurer

Secretary

இந்திய அரசாங்கம்
Government of India

ஆதார்

Issue Date: 03/01/2012



M Thavamani
M Thavamani
பிறந்த நாள்/DOB: 05/05/1990
ஆண / MALE

5911 4188 1690
VID : 9138 8025 3005 0378

எனது ஆதார், எனது அடையாளம்

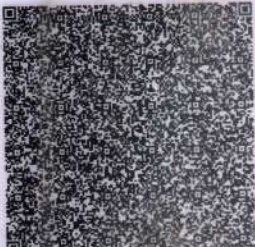
இந்திய தனிப்பட்ட அடையாள ஆணைய அமைப்பு
Unique Identification Authority of India

ஆதார்

Download Date: 01/12/2022

முகவரி:
S/O முத்துராஜ், 5, தெற்கு தெரு, டொம்புச்சேரி,
பொடிநாயக்கனூர், தேனி,
தமிழ் நாடு - 625582

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