

దస్తావేజులు మరియు రుసుముల రశీదు

నెం. 7486

శ్రీమతి / శ్రీ K. Mallikarjunappa

ఈ దిగువ ఉదహరించిన దస్తావేజులు మరియు రుసుము పుచ్చుకోవడమైనది.

దస్తావేజు స్వభావము	Lease deed			
దస్తావేజు విలువ	276,000/-			
స్టాంపు విలువ రూ.	1500/-		95/9	
దస్తావేజు నెంబరు	12685/16			
రిజిస్ట్రేషన్ రుసుము	300		551	551
లోటు స్టాంపు (D.S.D.)	520			
GHMC (T.D.)				
యూజర్ ఛార్జీలు	100			
అదనపు షీట్లు				
5 x				
మొత్తం	5920.			

(అక్షరాల) _____ రూపాయలు మాత్రమే)

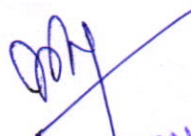
తేది 9/6/18

వాసము తేది _____

RETURNED
10/6/18
SUB-REGISTRAR

సబ్ రిజిస్ట్రారు

If Document is not claimed within 10 days from the date of Registration, safe custody fee of Rs. 50/- for every thirty days or part thereof, if in excess of 10 days subject to maximum of Rs. 500/- will be levied.


PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294

RETURNED
SUB-RECEIPT

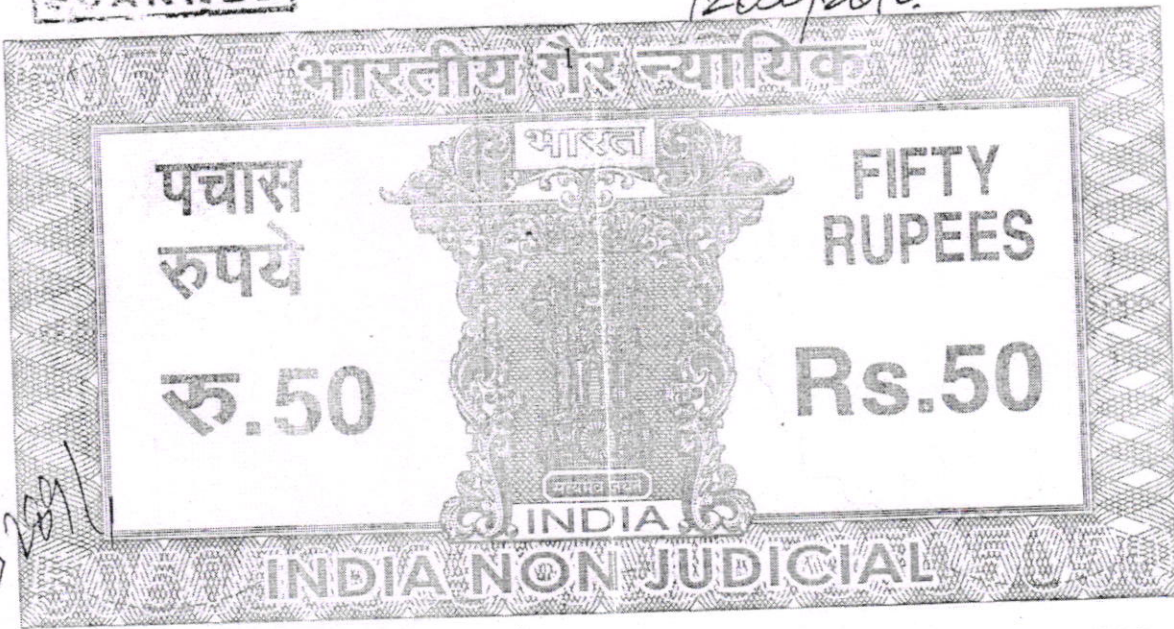


PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294

SCANNED

12683/2016

32



12683/

తెలంగాణ తెలంగాణ TELANGANA

21828 50

D.V.V.V. Prasad, S/o D. Ramakrishna Rao of Sangareddy

C 178718

MNR Medical College LEASE DEED

This LEASE DEED is made and executed on this the 9th day of June 2016, at Sangareddy, Medak District, Telanagana State.

BY AND BETWEEN :

K. Mallikarjunappa S/o K. Girmanappa Aged 55 Years R/o 3-5-36, Veerabhadra Nagar, Sangareddy Dist. Medak.

(Hereinafter called the "LESSOR" which expression shall mean and include his legal heirs, successors, legal representatives, executors, administrators, assignees etc.,)

AND

M/s. MNR Urban Health Centre, MNR Medical College Hospital, MNR Nagar, Fasalwadi, Sangareddy Mandal, Medak District, represented by its Administrative Officer Mr. D.V.V.V. PRASAD S/o D. RAMAKRISHANA RAO Aged 39 years R/o Flat # 201, C Block, Staff quarters, MNR Medical College Campus, MNR Nagar, Sangareddy, Medak District.

(Herein after called 'Lessee' which term shall mean and include its successors in interest, assignees and nominees etc., on the other part).

K. Mallikarjun

D.V.V.V. Prasad


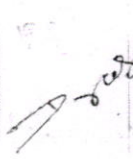


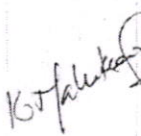
MM

PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI SANGAREDDY, MEDAK

Presentation Endorsement:



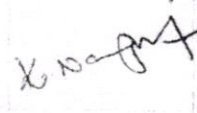



Presented in the Office of the Joint Sub-Registrar, Sangareddy (R.O) along with the Photographs & Thumb Impressions as required Under Section 32-A of Registration Act, 1908 and fee of Rs. 300/- paid between the hours of 07 and 07 on the 09th day of JUN, 2016 by Sri K.Mallikarjunappa

Execution admitted by (Details of all Executants/Claimants under Sec 32A):

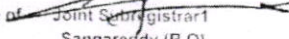
SI No	Code	Thumb Impression	Photo	Address	Signature/Ink Thumb Impression
1	LE			M/S. MNR URBAN HEALTH CENTRE, MNR MEDICAL COLLEGE HOSPITAL S/O. REP BY D V V V. PRASAD ITS ADMN OFFICER FASALWADI SANGAREDDY MEDAK DIST TS.	
2	LR			K. MALLIKARJUNAPPA S/O. K GIRMANAPPA 3-5-36 VEERABHADRA NAGAR, SANGAREDDY MEDAK DIST TS	

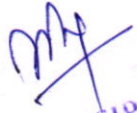
Bk - 1, CS No 13289/2016 & Doct No 12683-20.16
 Joint SubRegistrar1 Sangareddy (R.O) Sheet 1 of 6

Identified by Witness:

SI No	Thumb Impression	Photo	Name & Address	Signature
1			NAGARAJU DL	
2			KISHORE ELECTION CARD	

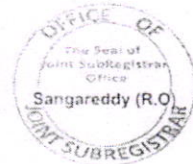
09th day of June, 2016

Signature of 
 Joint SubRegistrar1 Sangareddy (R.O)


PRINCIPAL
 MNR MEDICAL COLLEGE & HOSPITAL
 FASALWADI, SANGAREDDY-502294



Generated On: 09/06/2016 02:28:36 PM



WHEREAS the Lessor is the absolute owner of the premises bearing No.3-5-34 & 35, situated at Sri. Mallikarjuna Complex Opp: Natraj Theater, Sangareddy Main Road, consisting of 2 floors room/rooms with built-up area of 6000 Square feet (Hereinafter referred to as 'Main Building' for brevity). Out of the said property, the first floor consists of 2 portions out of which the back portion nearly about 3100 sq.feet, (Plinth Area) which is more fully described in the schedule annexed hereto and (hereinafter referred to as the 'Leased Premises' for brevity) is offered for lease to the Lessee for a period of 10 years.

AND WHEREAS the Lessee desired to obtain the Leased Premises for lease on rental basis from the Lessor and the Lessor has agreed to let out the same on the terms and conditions hereinafter detailed.

NOW THIS DEED OF LEASE IS WITNESSESTH AS FOLLOWS:

1. The term of Lease shall be for a period of 10 years commencing from 10-06-2016 to 08-06-2026, which shall be extended for a further period as per the requirement of the Lessee. However, if the lessee is desirous of extending the Lease beyond 10 years the same may be extended on mutually agreed terms with a fresh Lease Deed. But however such terms shall be finalized before expiry of the existing lease.
2. The subject premises shall be handed over by the Lessor to the Lessee on 10th June 2016.
3. The Lessee shall pay a sum of Rs.20,000/- (Rupees Twenty Thousand only) per month towards rent for the Leased Premises on or before 10th of every month. The payment of monthly rent by the Lessee to the Lessor should be by way of issuance of cheque by the Lessee in favour of the Lessor or by way of cash and the Lessor shall issue receipt every month to the Lessee acknowledging the receipt of the monthly rent.
4. The rent payable by the Lessee shall be enhanced at the rate of 3% every year on the Principal Rent.
5. The Lessee is permitted to utilize the Leased Premises for running a MNR Medical College Urban Health Centre (Hospital), but shall not carry on any business or activity in the Leased Premises which is prohibited by law or without obtaining required licenses from the competent authorities for the said purpose.
6. The Lessor hereby agreed to provide space of 420sft. on the front side for display of the board, facing towards Sangareddy Main Road, common parking area on the western side of the main building and open space for Generator.

[Handwritten signature]

[Handwritten signature]

[Handwritten signature]
 PRINCIPAL
 MNR MEDICAL COLLEGE & HOSPITAL
 FASALWADI, SANGAREDDY-502294

Endorsement: Stamp Duty, Transfer Duty, Registration Fee and User Charges are collected as below in respect of this Instrument.

Description of Fee/Duty	In the Form of							Total
	Stamp Papers	Challan u/S 41 of IS Act	E-Challan	Cash	Stamp Duty u/S 16 of IS Act	DD/BC/ Pay Order		
Stamp Duty	50	0	5520	0	0	0	5570	
Transfer Duty	NA	0	0	0	0	0	0	
Reg. Fee	NA	0	300	0	0	0	300	
User Charges	NA	0	100	0	0	0	100	
Total	50	0	5920	0	0	0	5970	

Rs. 5520/- towards Stamp Duty including T.D under Section 41 of I.S. Act, 1899 and Rs. 300/- towards Registration Fees on the chargeable value of Rs. /- was paid by the party through E-Challan/BC/Pay Order No. 5510JH00616 dated 09-JUN-16 of SBH/SANGAREDDY

E-Challan Details Received from Bank :

(1). AMOUNT PAID: Rs. 5920/-, DATE: 09-JUN-16, BANK NAME: SBH, BRANCH NAME: SANGAREDDY, BANK REFERENCE NO: 001809375, REMITTER NAME: MNR MEDICAL COLLEGE HOSPITAL, EXECUTANT NAME: K. MALLIKARJUNAPPA, CLAIMANT NAME: MNR MEDICAL COLLEGE HOSPITAL.

Date:
09th day of June, 2016

Signature of Registering Officer
Sangareddy (R.O)

1938 09/06/16

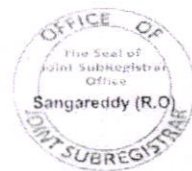
BK-1, CS No 13289/2016 & Doct No 12083/2016. Sheet 2 of 6 Joint Sub Registrar Sangareddy (R.O)

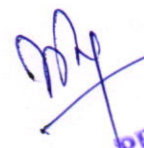
Register as documents
 No. 12683 of 2016 (1938 S.E.)
 Number 1711-1-12683 of 2016
 Date 09/06/2016

Registering Officer
 Y. MUTTHENNA
 JOINT SUB-REGISTRAR
 (R.O) SANGAREDDY

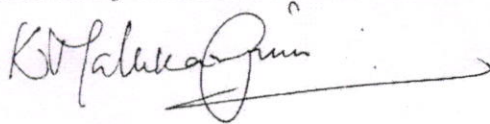


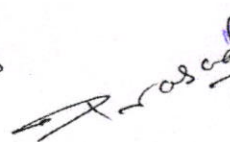
Generated On: 09/06/2016 02:28:36 PM




PRINCIPAL
 MNR MEDICAL COLLEGE & HOSPITAL
 FASALWADI, SANGAREDDY-502294

7. The Lessor hereby agreed to provide access from the Main Building to the Leased Premises from the North East Corner, apart from the main access on the West side.
8. The Lessee is authorized to sub-let the schedule premises or any part thereof to any third party/parties for running a Pharmacy, or Lab or for any related purpose concerning with Health Center (Hospital).
9. The Lessee may have his own fixtures fitted without causing any damage to the structure of the schedule premises, further the lessee is at liberty to carry out internal changes in the leased premises without causing damage to the main structure and the Lessee wants any electricity fittings, the Lessee may have such fittings at their expense.
10. The Lessor shall provide the proof of payment of the electricity consumption charges upto date, in respect of the Leased Premises, to the Lessee and the Lessee shall pay the electricity consumption charges, every month and also any charges related to electricity consumption in respect of Leased Premises from the date of commencement of this Lease, till the Lessee vacating the Leased Premises.
11. The Lessor hereby agreed to provide municipal water tap connection for daily usage and drinking water purpose, monthly bill have to borne by the Lessee to municipality.
12. The Lessee shall keep the schedule premises in clean and perfectly in habitable condition at all times and shall not keep any articles which are inflammable and injurious to health or dangerous to the neighborhood. Any damage caused to the premises due to any act or omission or commission or negligence of Lessee or its employees, the Lessees shall made good such damage at its own cost.
13. That the Lessor or his authorized agent shall have a right of access to the schedule premises during the reasonable timings whenever necessary with prior intimation to the Lessee and the Lessee shall not object for the same. However it is made clear that the Lessor or his authorized agent shall visit the Schedule Premises, with due intimation of at least two days to the Lessee, in writing or by way of SMS.
14. The Lessee shall not contravene any terms of this deed. If the Lessee commits breach of any or more of the conditions stated in this deed, the Lessee is liable to be evicted from Schedule Premises upon the proof of breach by the Lessor through a valid procedure known to law and in such event the Lessee shall also be liable for such costs, expenses and damages that may be incurred by the Lessor for such breach.



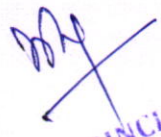

PRINCIPAL
ANR MEDICAL COLLEGE & HOSPITAL
SASALWADI, SANGAREDDY-502294

Bk-1, CS No 13289/2016 & Doct No
12053-2016 Sheet 3 of 6
Joint SubRegistrar
Sangareddy (R.O)

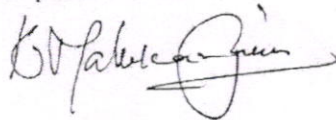


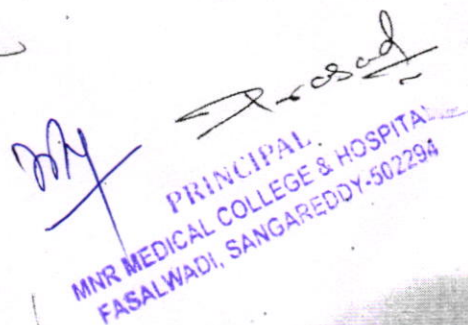
Generated On: 09/06/2016 02:28:36 PM




PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294

15. The Lessee shall keep the sanitary and other fittings provided by Lessor in safe and neat condition and shall maintain in good order at their own cost and the Lessee on expiry of Lease or at the time of vacation of schedule leased premises shall handover all fixtures and fittings in good and working condition.
16. At the time of vacating the premises the Lessee will handover the premises to the Lessor in the same condition at which the premises is obtained.
17. The rough sketch of the Schedule Premises is appended to this Lease Deed as Annexure-I.
18. It is mutually agreed by both the Lessor and the Lessee that if either Lessor or the Lessee wants to terminate the lease, shall give a 3 months prior notice in written to the other to the addresses mentioned hereinabove.
19. It is mutually agreed by both the Lessor and Lessee that the Lessee at the time of vacating the Leased Premises is entitled to take its furniture and fixtures without causing damage the main structures.
20. It is mutually agreed by both the Lessor and Lessee that the Lessor shall pay the property and other statutory taxes imposed by the concerned authorities during the lease period and upon failure of the Lessor to pay any such tax the Lessee shall pay the said amount and reduce the said amount in the future rents payable to the Lessor, to avoid interruption and obstruction by the statutory authorities for utilizing the Leased Premises due to non-payment of any such taxes.
21. It is agreed by the Lessee to fit all internal partitions at its own costs as per its convenience.
22. It is mutually agreed by both the Lessor and Lessee that the Lessee shall pay the monthly rent to the Lessor in respect of the Leased Premises on or before 10th of every succeeding month duly deducting the applicable taxes like TDS(tax deduction at source) etc.,
23. The market value of the property hereby leased out for the purpose of registration is Rs. _____/- (Rupees _____ only).
24. The Lessor hereby agreed to bear the registration expenses of this Lease Deed.
25. It is mutually agreed that the provisions of the law of the land shall be binding on both the parties and this agreement is made without prejudice to the rights of the parties under law.

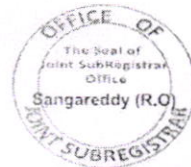



PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294

Bk - 1, CS No 13289/2016 & Doct No
12683.12016. Sheet 4 of 6 Joint SubRegistrar
Sangareddy (R.O)



Generated On: 09/06/2016 02:28:36 PM



M
PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294

26. If any dispute or difference shall arise between the parties in connection with this lease deed and if such difference is not settled amicably between the parties, such difference shall independently of all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties or if they cannot agree upon a single arbitrator within 30 days of any party invoking arbitration, the same shall be referred to a panel of three arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the dispute/difference and the third arbitrator to be appointed by such two arbitrators and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996. The language of Arbitral proceedings shall be English and the Seat of Arbitration is at Hyderabad.

SCHEDULE PREMISES:

All that premises bearing No.3-5-34 & 35, situated at Sri. Mallikarjuna Complex, Opp. Natraj Theater, Sangaeddy, consisting of 2 floors with room/rooms with Plinth area of 3100 Square feet, and bounded as follows. *First Floor, 3100 sft*

North	:	Owners Residence
South	:	Parking Place
West	:	F.R.S Boundary
East	:	H.No. 3-5-33/2.

In witness where of the parties above named have set their hands and signed in the presence of following witnesses.

WITNESSES :

1. *K. Nagaji*
2. *G. Kiran*

K. N. Nagaji
LESSOR

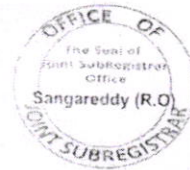
R. S. Reddy
LESSEE

M. P.
PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
CASALWADI SANGAREDDY-502294

Bk - 1, CS No 13289/2016 & Doct No
12683-2016 Sheet 5 of 8 Joint SubRegistrar
Sangareddy (R.O)



Generated On: 09/06/2016 02:28:36 PM



M
PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
SANGAREDDY, SANGAREDDY-502204

भारत सरकार
GOVERNMENT OF INDIA

सर्वोच्च न्यायालय
Karam Malkajirappa
दृष्टि सं./ DOB: 15/03/1959
पुरुष / MALE

4200 2884 8704

आधार-समाप्ति/समाप्ति की तारीख

आधार पहचान प्रमाणिका
AADHAAR
भारत गणराज्य
REPUBLIC OF INDIA

पता: Address:
S/O Karam Malkajirappa, 3-5-36,
Veesachalrajgar, Opp New Bus
Stand, Sangareddy, Sangareddy,
Medak,
Andhra Pradesh - 502001

4200 2884 8704

Aadhaar-Aam Admi ka Adhikar

आयकर विभाग
INCOME TAX DEPARTMENT
D V V PHASAD
RAMAKRISHNA RAO DESARAJU
17/05/1975
PAN Account Number
ARGPP8909A

भारत सरकार
GOVT OF INDIA

Income Tax PAN Sachit Clinic, NDDA,
4th Floor, Tapes Tower,
B.B. Market, Sangareddy, Medak - 500013
Tel: 91-02-7199-4000, Fax: 91-02-2495-6664
Email: info@taxsachit.com

INDIAN UNION DRIVING LICENCE
ANDHRA PRADESH

DRIVING LICENCE
DL-AP023115572005

NAGA RAJU - K
HALLIKARJUNAPPA
3 5 36
OPP: NEW BUS STAND
SANGAREDDY
MEDAK DIST

08.2005

	Class Of Vehicle	Validity
0472801/05		
Non-Transport	LMV,MCWG	12.03.2017
Transport		
Hazardous Validity		
Badge No.		
Original No.	751/MDK/1997	
Original LA	RTA MEDAK - SANGAREDDY	
DOB	26.03.1977	
Blood Gr.		
Date of 1st Issue	13.03.1997	

भारत निर्वाचन आयोग
ELECTION COMMISSION OF INDIA
IDENTITY CARD

NIC0995540

नाम: गोला विश्व कुमार
Elector's Name: Gola Vishw Kumar

पिता का नाम: गोला वेंकटराव
Father's Name: Gola Venkatar

पुरुष / M
Date of Birth: 10/09/1973

आधार सं.: NIC0995540
4-7-23/3/9/A/2
बेलजी नगर, संगारैड्य,
संगारैड्य, मेदाक-502001

Address:
4-7-23/3/9/A/2
Belaji Nagar, Sangareddy,
Sangareddy, Medak,502001

07662016

आधार सं. 4200 2884 8704

Electoral Registration Officer
36 - Sangareddy Assembly Constituency

125 / 101

My

PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
SANGAREDDY

Bk. 1, CS No 13289/2016 & Doct No
12083/2016 Sheet 6 of 6
Joint Subregistrar
Sangareddy (R.O)



Generated On: 09/06/2016 02:28:36 PM

M
PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
SALWADI SANGAREDDY-502234



నెం.

శ్రీమతి పి.తీర్తి.....

దిగువ ఉదహరించిన దస్తావేజును మరియు రుసుము పుచ్చుకొనవడమైనది.

దస్తావేజు స్వభావము	Leak of 10/10/16			
దస్తావేజు విలువ	275134			
స్టాంపు విలువ రూ॥	100			
దస్తావేజు నెంబర్	3034116			
రిజిస్ట్రేషన్ రుసుము	2200			
యూసర్ చార్జెస్	100			
డి.ఎన్.డి.	5420		8 JUN 2016	
రుసుము				
మొత్తం	8250			

అక్షరాల..... రూపాయలు మాత్రమే
 తేది.....
 వాపసు తేది.....సా॥4-00 గం॥లకు

M
 విద్యార్థి
 సీనియర్

M
 PRINCIPAL
 MNR MEDICAL COLLEGE & HOSPITAL
 FASALWADI, SANGAREDDY-502294

MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294

[Handwritten signature]

Antony,
21/6/16

8 JUN 2016



తెలంగాణ తెలంగాణ TELANGANA

D 388047

15940- 08/6/2016 100/-

Name of the Party: D.V.V.V. prasad s/o D. Ramakrishna Rao
 For Whom: m/s. MNR medical college - Sangareddy
 Office of the Vendor: JOGIPET

LEASE DEED

This LEASE DEED is made and executed on this the 8th day of June 2016, at Sangareddy, Medak District, Telangana State.

BY AND BETWEEN :

- 1). Smt. Puram Lalithamma W/o Laxman aged: 50 Years, Occ: Household, R/o H. No. 8-9, Dayanand Road, Jogipet Town of Andole Mandal, Medak District.
- 2). Sri. Bachu Ramulu S/o. Rajaiah Aged: 60 Years, Occ: Business, R/o. H.No. 14-144, Shantinagar, Patancheru Village and Mandal, Medak Dist.

(Hereinafter called the "LESSOR" which expression shall mean and include his legal heirs, successors, legal representatives, executors, administrators, assignees etc.,)







Prasad
B. R.

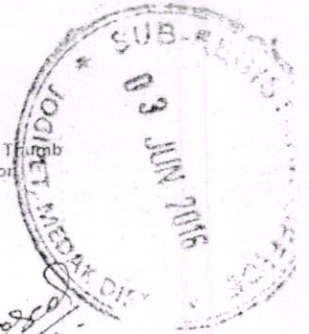
Prasad
 PRINCIPAL
 MNR MEDICAL COLLEGE & HOSPITAL
 FASALWADI, SANGAREDDY-50229

Presentation Endorsement:

Presented in the Office of the Joint Sub-Registrar, Jogipet along with the Photographs & Thumb Impressions as required Under Section 32-A of Registration Act, 1908 and fee of Rs. 2760/- paid between the hours of 12 and 1 on the 08th day of JUN, 2016 by Sri Puram Lalithamma





Execution admitted by (Details of all Executants/Claimants under Sec 32A):

Sl No	Code	Thumb Impression	Photo	Address	Signature/Ink Thumb Impression
1	LE		 REP BY D.V.V.V. PRASAD [1703-1-2016-3573]	REP BY D.V.V.V. PRASAD(RIMS) MNR MEDICAL COLLEGE HOSPITAL . REP BY D.V.V.V. PRASAD	<i>[Signature]</i>
2	LR		 BACHU RAMULU [1703-1-2016-3573]	BACHU RAMULU S/O. RAJAJAH H.NO.14-144, SHANTINAGAR, PATANCHERU, DT.MEDAK	<i>[Signature]</i>
3	LR		 PURAM LALITHAMMA [1703-1-2016-3573]	PURAM LALITHAMMA W/O. LAXMAN H.NO.8-9, DAYANAND ROAD, JOGIPET, MDL ANDOLE, DT.MEDAK	<i>[Signature]</i>



Bk - 1, CS No 3573/2016 & Doct No 3034/2016
 Joint Sub Registrar 5
 Jogipet

Identified by Witness:

Sl No	Thumb Impression	Photo	Name & Address	Signature
1		 LAXMAN [1703-1-2016-3573]	LAXMAN R/O. JOGIPET	<i>[Signature]</i>
2		 SHIVA SHANKAR [1703-1-2016-3573]	SHIVA SHANKAR R/O. JOGIPET	<i>[Signature]</i>

08th day of June, 2016

Signature of Joint SubRegistrar
Jogipet

[Signature]

[Signature]
 PRINCIPAL
 MNR MEDICAL COLLEGE & HOSPITAL
 FASALWADI, SANGAREDDY-502294



AND

M/s. MNR Medical College Hospital, MNR Nagar, Fasalwadi, Sangareddy Mandal, Medak District, represented by its Administrative Officer Mr. D.V.V.V. PRASAD S/o D. RAMAKRISHANA RAO Aged 39 years R/o Flat # 201, C Block, Staff quarters, MNR Medical College Campus, MNR Nagar, Sangareddy, Medak District. Mobile No. 8500056661.

(Herein after called 'Lessee' which term shall mean and include its successors in interest, assignees and nominees etc., on the other part).

WHEREAS the Lessor is the absolute owner of the premises bearing No.14-100, situated at SC Colony, Main Road, Jogipet Town of Andole Mandal, Medak Dist. built in an extent of 635 Sq. yards of land bounded with compound wall consisting of 3 (three) floors with 29 rooms with built-up area of 4752 Square feet (Hereinafter referred to as the 'Leased Premises' for brevity) is offered for lease to the Lessee for a period of Ten (10) years.

AND WHEREAS the Lessee desired to obtain the Leased Premises for lease on rental basis from the Lessor and the Lessor has agreed to let out the same on the terms and conditions hereinafter detailed.

NOW THIS DEED OF LEASE IS WITNESSESTH AS FOLLOWS:

1. The term of Lease shall be for a period of ten (10) years commencing from 10-06-2016 to 08-06-2026, which shall be further extended with mutual consent of both parties.
2. The Leased Premises shall be handed over by the Lessor to the Lessee by 10th June 2016.

percebat
B R
Prasad

Endorsement: Stamp Duty, Transfer Duty, Registration Fee and User Charges are collected as below in respect of this Instrument.

Description of Fee/Duty	Stamp Papers	Challan u/S 41 of IS Act	In the Form of				Total
			E-Challan	Cash	Stamp Duty u/S 16 of IS act	DD/BC/ Pay Order	
Stamp Duty	100	0	5420	0	0	0	5520
Transfer Duty	NA	0	0	0	0	0	0
Reg. Fee	NA	0	2760	0	0	0	2760
User Charges	NA	0	100	0	0	0	100
Total	100	0	8280	0	0	0	8380

Rs. 5420/- towards Stamp Duty including T.D under Section 41 of I.S. Act, 1899 and Rs. 2760/- towards Registration Fees on the chargeable value of Rs. /- was paid by the party through E-Challan/BC/Pay Order No. 336WRP080616 dated 08-JUN-16 of SBH/JOGIPET

E-Challan Details Received from Bank :

(1) AMOUNT PAID: Rs. 8280/-, DATE: 08-JUN-16, BANK NAME: SBH, BRANCH NAME: JOGIPET, BANK REFERENCE NO: 001079072, REMITTER NAME: DR. K. VENKATA RAO, EXECUTANT NAME: PURAM L ALITHAMMA, CLAIMANT NAME: MNR MEDICAL COLLEGE HOSPITAL.

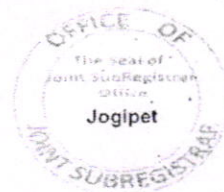
Date:
08th day of June, 2016

Signature of Registering Officer
Jogipet

Bk-1 CS No 3573/2016 & Doct No 3034/2016 Sheet 2 of 10 Joint SubRegistrar Jogipet

The document has been verified
with the identification number
1703-1 3034-2016
Dated 08/6/2016
Signature of
Joint Registering Officer

PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294



3. The Lessee shall pay a sum of Rs.20,000/- (Rupees Twenty Thousand only) per month towards rent for the Leased Premises on or before 15th of every month. The payment of monthly rent by the Lessee to the Lessor should be by way of issuance of cheque by the Lessee in favour of the Lessor or by way of cash and the Lessor shall issue receipt every month to the Lessee acknowledging the receipt of the monthly rent.
4. The rent payable by the Lessee shall be enhanced at the rate of 10% on the Principal Rent every year after the completion year.
5. The Lessee is permitted to utilize the Leased Premises for running a MNR Medical College Rural Health Centre (Hospital), but shall not carry on any business or activity in the Leased Premises which is prohibited by law or without obtaining required licenses from the competent authorities for the said purpose.
6. The Lessor shall not object for display of signboards within & outside the Leased Premises by the Lessee.
7. The Lessor shall not entertain any third party to enter the said Lease Premises without the permission of the Lessee during the Lease Period.
8. The Lessee is authorized to sub-let the Leased Premises or any part thereof to any third party/parties for running a Pharmacy or Lab or for any related purpose concerning with Health Center (Hospital).
9. The Lessee may have his own fixtures fitted without causing any damage to the structure of the schedule premises, further the lessee is at liberty to carry out internal changes in the leased premises without causing damage to the main structure and the Lessee wants any electricity fittings, the Lessee may have such fittings at their expense.

Perawat
B. R. ...
Rosad

MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294

Bk - 1, CS No 3573/2016 & Doct No
2016/2016 Sheet 3 of 10 Joint SubRegistrar
Jogipet



Generated On: 08/06/2016 12:57:57 PM

MP
PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294



10. The Lessor shall provide the proof of payment of the electricity consumption charges upto date, in respect of the Leased Premises, to the Lessee and the Lessee shall pay the electricity consumption charges and any additional demands by the Electricity department every month in respect of Leased Premises from the date of commencement of this Lease, till the Lessee vacating the Leased Premises.
11. The Lessor hereby agreed and undertake to provide uninterrupted water supply at the Leased Premises apart from drinking water to meet the requirements of the Lessee.
12. The Lessee shall keep the schedule premises in clean and perfectly in habitable condition at all times and shall not keep any articles which are inflammable and injurious to health or dangerous to the neighborhood. Any damage caused to the premises due to any act or omission or commission or negligence of Lessee or its employees, the Lessees shall made good such damage at its own cost.
13. The Lessor shall ensure that the said Leased Premises is free from any kind of pollution and is in at most hygienic condition to enable the Lessee in providing quality health care to its patients.
14. That the Lessor or his authorized agent shall have a right of access to the schedule premises during the reasonable timings whenever necessary with prior intimation to the Lessee and the Lessee shall not object for the same. However it is made clear that the Lessor or his authorized agent shall visit the Schedule Premises, with due intimation of at least two days to the Lessee, in writing or by way of SMS.

BR
PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294

Bk - 1, CS No 3573/2016 & Doct No
2034/2014 Sheet 4 of 10 Joint SubRegistrar's
Jogipet




Generated On: 08/06/2016 12:57:57 PM

MM
PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294




15. The Lessee shall not contravene any terms of this deed. If the Lessee commits breach of any or more of the conditions stated in this deed, the Lessee is liable to be evicted from Schedule Premises upon the proof of breach by the Lessor through a valid procedure known to law and in such event the Lessee shall also be liable for such costs, expenses and damages that may be incurred by the Lessor for such breach.
16. The Lessee shall keep the sanitary and other fittings provided by Lessor in safe and neat condition and shall maintain in good order at their own cost and the Lessee on expiry of Lease or at the time of vacation of schedule leased premises shall handover all fixtures and fittings in good and working condition.
17. At the time of vacating the premises the Lessee will handover the premises to the Lessor in the same condition at which the premises is obtained.
18. The rough sketch of the Schedule Premises is appended to this Lease Deed as Annexure-I.
19. It is mutually agreed by both the Lessor and the Lessee that if either Lessor or the Lessee wants to terminate the lease, shall give a 3 (Three) months prior notice in written to the other to the addresses mentioned hereinabove. However the Lessor shall not terminate the Lease except upon proof of violation or contravention of any of the terms of this Leased Deed.
20. It is mutually agreed by both the Lessor and Lessee that the Lessee at the time of vacating the Leased Premises is entitled to take its furniture and fixtures without causing damage the main structures.
21. It is mutually agreed by both the Lessor and Lessee that the Lessor shall pay the property and other statutory taxes imposed by the concerned authorities during the lease period and upon failure of the Lessor to pay any such tax the Lessee shall pay the


 per
 B. R. Reddy
 Prasad

PRINCIPAL
 MEDICAL COLLEGE & HOSPITAL
 FASALWADI, SANGAREDDY-502294

Bk - 1, CS No 3573/2016 & Doct No
3034/2016 Sheet 5 of 10 Joint SubRegistrar5
Jogipet


PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294



Generated On: 08/06/2016 12:57:57 PM



said amount and reduce the said amount in the future rents payable to the Lessor, to avoid interruption and obstruction by the statutory authorities for utilizing the Leased Premises due to non-payment of any such taxes.

22. It is agreed by the Lessee to fit all internal partitions at its own costs as per its convenience.
23. It is mutually agreed by both the Lessor and Lessee that the Lessee shall pay the monthly rent to the Lessor in respect of the Leased Premises on or before 15th of every succeeding month duly deducting the applicable taxes like TDS(tax deduction at source) etc.,
24. The Lessee hereby agreed to bear the registration expenses of this Lease Deed.
25. It is mutually agreed that the provisions of the law of the land shall be binding on both the parties and this agreement is made without prejudice to the rights of the parties under law.
26. If any dispute or difference shall arise between the parties in connection with this lease deed and if such difference is not settled amicably between the parties, such difference shall independently of all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties or if they cannot agree upon a single arbitrator within 30 days of any party invoking arbitration, the same shall be referred to a panel of three arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the dispute/difference and the third arbitrator to be appointed by such two arbitrators and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996. The language of Arbitral proceedings shall be English and the Seat of Arbitration is at Hyderabad.

Page 6 of 9

per ready
Blue
crossed


MA

PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294

Bk - 1, CS No 3573/2016 & Doct No
3034/2016 Sheet 6 of 10 Joint SubRegistrar
Jogipet



Generated On: 08/06/2016 12:57:57 PM


PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294



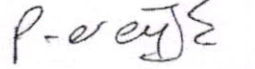

SCHEDULE PREMISES:

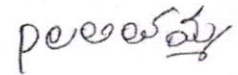
All that premises bearing No. 14-100, situated at SC Colony, Main Road, Jogipet Town of Andole Mandal, Medak District. Built in a single piece of land admeasuring 635 Sq. Yards bounded with compound wall and with a building consisting of three (3) floors (Ground, 1st and 2nd Floors) and 29 rooms with a built up area of 4752 Sq. Ft. and bounded as follows.

North	:	5' feet sheri
South	:	Open Place of M. Manik Rao
West	:	SC Colony Road
East	:	Open Place of M. Manik Rao

In witness where of the parties above named have set their hands and signed in the presence of following witnesses.

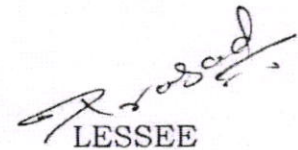
WITNESSES :

1. 
2. 





LESSOR


LESSEE




PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI SANGAREDDY-502294

Bk-1, CS No 3573/2016 & Doct No
3084/2016 Sheet 7 of 10 Joint SubRegistrar
Jogipet



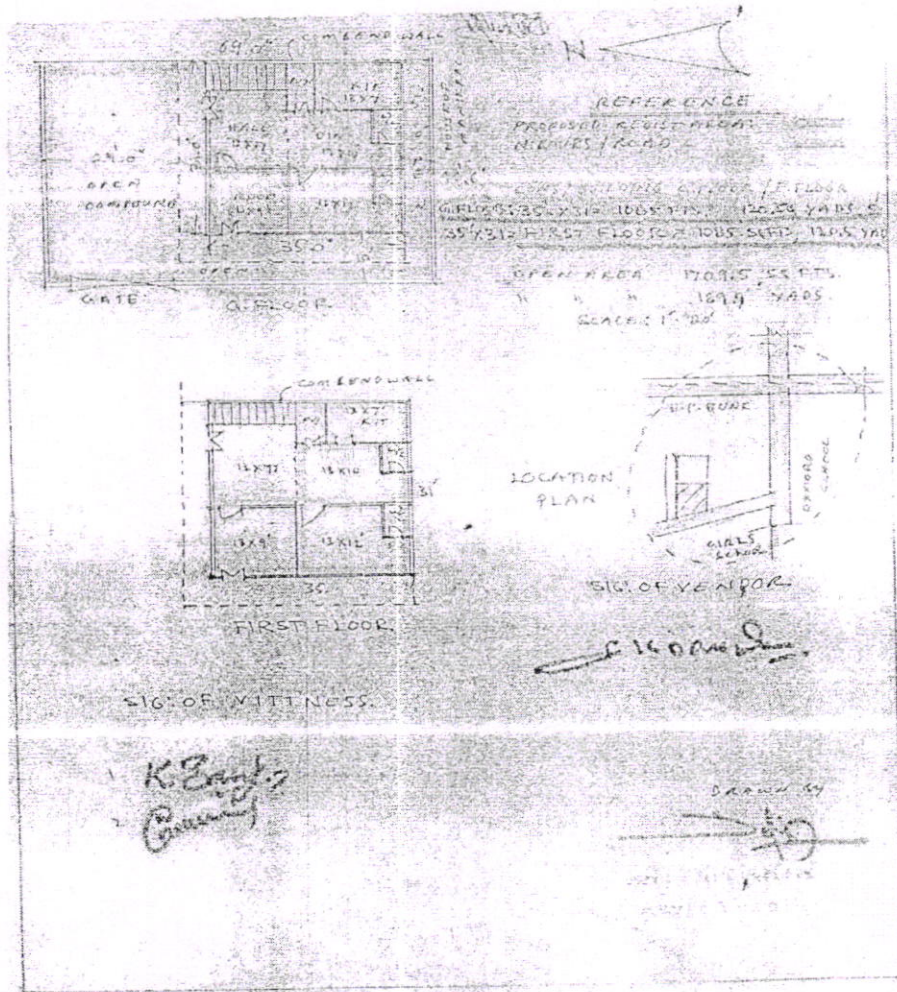
Generated On: 08/06/2016 12:57:57 PM


PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294



ANNEXURE -III

Rough sketch of the (Leased Premises) premises bearing No. 14-100, situated at SC Colony, Main Road, Jogipet Town of Andole Mandal, Medak District built in an extent of 635 Sq. yards of land bounded with compound wall consisting of 3 (three) floors with 29 rooms with built-up area of 4752 Square feet



WITNESSES :

1. *P. V. Jayaram*
2. *S. S. Srinivas*

Peresky
B...

LESSOR

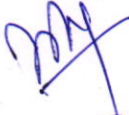
R. S. Sreedhar
 LESSEE

M. J.
PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294

Bk-1, CS No 3573/2016 & Doct No
2034/2016 Sheet 8 of 10 Joint SubRegistrar
Jogipet



Generated On: 08/06/2016 12:57:57 PM


PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294





భారత ప్రభుత్వం
GOVERNMENT OF INDIA

బచ్చి రామలక్ష్మి
Bachu Ramulu



పుట్టిన సంవత్సరం / Year of Birth : 1954
పురుషుడు / Male

9952 6621 2359

ఆధార్ - సామాన్యని హక్కు



భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

పి: బచ్చి రామలక్ష్మి, ఇంటి నెం 11-144, శాంతి నగర్, పాతాచేరు మండలం, పాతాచేరు తాలూకా, ఆంధ్ర ప్రదేశ్, 502319

Address : S/O Bachu Rajaleth, M No 11-144, Shanthi Nagar, Patancheru Municipality, Patancheru, Medak, Andhra Pradesh, 502319

Aadhaar - Saamanyuni Hakku

आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA

V V PRASAD

KAMAKRISHNA RAO DESARAJU

17/05/1975

Permanent Account Number

ARGPP8969A

Signature



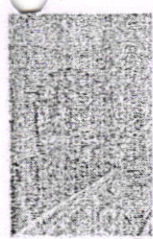
इस कार्ड के खोने/पाते पर कृपया सूचित करें/लौटाएं
आयकर ईंग सेवा इकाई, एन एस डी एल
पतली मंजिल, टाइम्स टॉवर, कमला मिल्स कंपाउंड, एस.बी. मार्ग,
लोअर परेल, मुंबई-400 013

If this card is lost / someone's lost card is found,
please inform / return to

Income Tax PAN Services Unit, NSDL,
1st Floor, Times Tower,
Kamala Mills Compound,
S.B Marg, Lower Parel, Mumbai - 400 013

Tel: 91-22-2499 4650, Fax: 91-22-2495 0664
email: tininfo@nsdl.co.in

భారత ప్రభుత్వం
Government of India



పురానా లలితమ్మ
Purana Lalithamma

పుట్టిన సంవత్సరం/Year of Birth: 1968
స్త్రీ / Female

2621 6059 4734

ఆధార్ - సామాన్యని హక్కు



భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

చిరునామా: W/O: పురాం లక్ష్మి, 8-9
దయానంద రోడ్, శాంతి మండలం, జోగిపేట
కోనపల్లి, మెదక్, ఆంధ్ర ప్రదేశ్
502270

Address: W/O: Puram
Laxman, 8-9, dayananda
road, andol mandalam,
Jogipet, Medak, Jogipet,
Andhra Pradesh, 502270

2621 6059 4734

1947
1800 303 1947

help@uidai.gov.in

www.uidai.gov.in

PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASAI,WADI, SANGAREDDY-502704

Bk - 1, CS No 3573/2016 & Doct No
3034/2016 Joint SubRegistrar
Jogipet



Generated On: 08/06/2016 12:57:57 PM

M
PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502204



భారత ప్రభుత్వం
Government of India

పురం లక్ష్మన్
Puram Laxman

పుట్టిన తేదీ/DOB: 01/01/1945
పురుషుడు / Male

8106 8627 7473

ఆధార్ - సామాన్యుని హక్కు

భారత ప్రభుత్వం ప్రాథమిక ఆరోగ్య కేంద్రం
Unique Identification Authority of India

ఆధార్

చిరునామా: S/O: పురం నర్సింహులు, 8-9
దయానంద రోడ్, ఆంధ్రోల్ మండలం, జోగిపేట
జోగిపేట, మెదక్, ఆంధ్ర ప్రదేశ్
502270

Address: S/O Puram
Narsimulu, 8-9, dayananda
road, andol mandalam,
Jogipet, Jogipet, Medak,
Andhra Pradesh, 502270

8106 8627 7473

1947 1800 300 1947 help@uidai.gov.in www.uidai.gov.in

భారత ప్రభుత్వం
Government of India

శివ శంకర్ ముక్కల
Siva Shankar Mukkala

పుట్టిన తేదీ / DOB: 01/01/1956
పురుషుడు / Male

8903 4498 6072

ఆధార్ - సామాన్యుని హక్కు

భారత ప్రభుత్వం ప్రాథమిక ఆరోగ్య కేంద్రం
Unique Identification Authority of India

ఆధార్

చిరునామా: S/O: లక్ష్మయ్య ముక్కల
14-83, సత్యసాయి కాలనీ, జోగిపేట
ఆంధ్రోల్, జోగిపేట మెదక్
ఆంధ్ర ప్రదేశ్, 502270

Address: S/O: Laxmalah
Mukkala, 14-83, SATHYASAI
COLONY, JOGIPET,
ANDOLE, Jogipet, Jogipet,
Medak, Andole, Andhra
Pradesh, 502270

8903 4498 6072

1947 1800 300 1947 help@uidai.gov.in www.uidai.gov.in

[Handwritten Signature]

PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-507294

BK-1 CS No 3573/2016 & Doct No
3034/2016 Sheet 10 of 10 Joint SubRegistrars
Jogipet



Generated On: 08/06/2016 12:57:57 PM

My

PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294

