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speed . expertise . concern	Customer s ununts (N any) M. H.	2 nd floor door From out uff	Visit Type : Chargestele I Non-Chargestele Major repains / Call back / Examination details mentioned below	Repairs T Execution Date Same Date Completed	Break Down Call Complaint Number Armeal Time 11-50 Departure Time 1-10	Following work has been curried out on above mentioned elevators Preventive Malamenance House Keeping	Anno North STSTO Comment No. MOSTSTAND No. KCOIS	Certificate Of Work Done
Otis the world's word for safety			4			a line		Serial No.: 20059
rd for safety	 Locks Entrance Fireman Switch Pit Equipment 	- Hall Focture	 Hoistway Equipment 	Car Equipment	Ropes	Governor	 Machine Room Controller's 	
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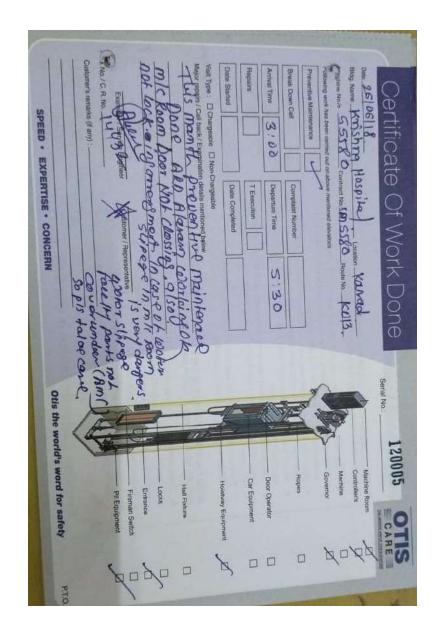






















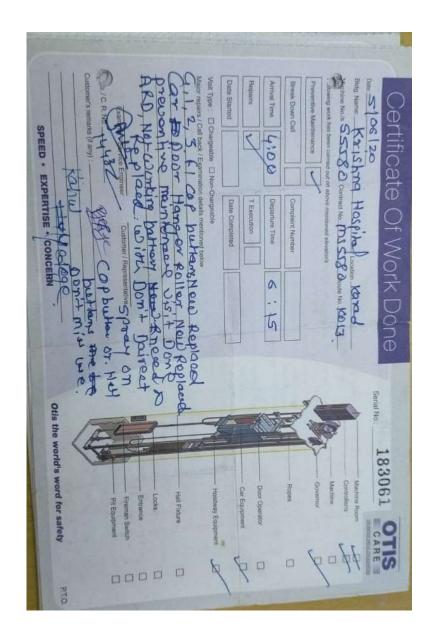












Ladies Hostel 1

From 2017

Jonnson						No. PPMH05171208	Date 24 24-DEC-2017			
SERV/07/QR/04						ЕН No. L-11765	File No. SMD9983			
Customer: REC	INTERIOR INTERIOR INSTITUTE OF MEDICAL SCIENCES					Nature of Servi	ce FSM			
KRI	DEEMED UNIVERSITY KRISHNA INSTITUTE OF MEDICAL SCIENCES DEEMED UNIVERSITY.GIRLS HOSTEL EXTENSION					Mechanic Deputed SHELAR PRAKASH ANANDA				
FREE SERVICE C										
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The Report Courses In Line Man Kent Ann Kent Man	OARD Emergency lamp, siton & inter an werking and i Dar light, fern & should light werking andidien.	Nation of Service Terms Replaced: FREE SERVICE CARRIED OUT FOR THE MONTH OF OCTOBER - 2017	REGISTRAR- KRISHINA INSTITUTE OF MEDICAL SCIENCES DEEMED UNIVERSITUTE OF MEDICAL SCIENCES DEEMED UNIVERSITY,GIRLS HOSTEL EXTENSION BUILDING,MALKAPUR, TAL-KARAD,DIST-SATARA 415539	Johnson Johnson Lifts Private Limited Prive Strate Limited Lifts Private Limited Lifts Private Limited Lifts Strate Resources Strate HADAPSAR PUNE LITES SM000000 Strate Lifts Strate Strate Lifts Strate Strate Strate Lifts Strate Stra
THE CHARMEN LAND THE PROPENT OF THE PROPENT OF THE PROPENT OF THE PROPENT OF THE PROPERTY OF T	iblen.		Name SHELAR PRAKASH ANANDA Nechastic Deputed	L-11765
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Imm Reported : 2:00 Len : C Head Office : No.1 East Main Road, An: te Nagar Western Edension, Chennal - 600 101. Gams : LFTS Fax: \$1.44.26151614 Website : www.j *Insonitabild.com Ph: 26152003, 26152004, 261552005, 26152006 Len : C	Image: Service Image: Service Service
2:00 Len: 5:33 Alloumuu Caspone'rs Signeture Caspone'rs Signeture 50005, 26152006	SERVICE REPORT

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	2006 2006	LLY CLOSED LINIT	Condition	4	Nature SHELLAR PRA	LIN No.	Nº L-11765	Aughod Meditin

Head Office : No.1 East Main Road, Anna Nagar Western Extension, Chennal - 600 101. Grains : LEF15 FaX: 91-44-20151614 Website : www.johnsoniittsttd.com Ph:26152003, 26152004, 26152005, 26152006		Office Use Only Time Reported:	Customer Remark if any :	12ms which requires Customer Attention: O ARD, Emergency leung & sinon working condition	FREE SERVICE CARRIED OUT FOR THE MONTH OF JULY - 2017	KRISHNA INSTITUTE OF MEDICAL SCIENCES	DEEMED UNIVERSITY	Customer: REGISTRAR, KDICLAVA BACTOR		
ams : LII-13 rax : 91 44 5, 26152006	usioners Signature	2100 Len		ndihiou		Mechanic Deputed SHELAR PRAKASH ANANDA	Nature of Service	L-11765	No. PPMH05170705 20-JUL-2017	SERVIC
-20131014		0815				ted H ANANDA	ce FSM	File No. SMD9983	Date 18 20-JUL-2017	SERVICE REPORT

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Head Office : No. 4, East State Rood, Anna Nagar Western Extension, Chernal - 600 (0), Chrane : LIFTS, Fax. 91-04-26151614 Website: www.johnsonflähld.com Ph. 26152005, 26152004, 26152005, 26152006	CAUTION : IF DOOR OPEN KEY IS USED ENSURE THAT DOOR IS FULLY CLOSED DOOR IS FULLY CLOSED	Office Use Ouly Time Reported : 2	Emazgancy Light, Mann & ARD working condition or.	Vatars of Secritor / Itema Replaced ; FREE SERVICE CARRIED OUT FOR THE MONTH OF MAY - 2017 Items which requires Castener Attaching ;	BULDING, MALKAPUR, TAL-KARAD, DIST-SATARA 415539	Canonart: REGISTRAR- KHISHNA INSTITUTE OF MEDICAL CANONAL	1		
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Head Office / No. 1, East Main Road, Anna Nagar Western Extension, Chemon. 400 101, Cemm. LUTIS Fax. 99-47-2015/614 Website: www.johensolifin.lud.com Ph. 20152003, 26152004, 20152005, 26152006		Office Use Only	() ARD, Emergency Imp & shen westing cendible	Name of Service / Itean Replaced ; FREE SERVICE CARRIED OUT FOR THE MONTH OF APRIL Itean which requires Castomer Attention ;	BUILDING, MALKAPUR, TAL-KARAD, DIST-SATARA 415539	DEEMED UNIVERSITY, GIRLS HOSTEL EXTENSION	CHANNER: RECRISTRAR- KRISHNA INSTITUTE OF MENNAL SAVEN	411013 Phone: 020-41007506	Dinson Johnson Lifts Private Limited
C 4, Chennui - 600 101, Cenuma : L1FTS 2003, 26152004, 26152008	CAUTION : IF DOOR OPEN KEY IS USED ENSURE THAT	Time Reported : 3:30	on weating	PRIL - 2017	15539	JACES DEEMED			100
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Head Office : No.1 East Main Road, Anna Nagar Western Edension, Chennai - 600 101. Grams : LIFTS Fax: 91-44-26151614 Website : www.johnsonliftstld.com Ph: 26152003, 26152004, 26152005, 26152006		Office Use Only Time Reported : 10	Customer Remark If any :	OARD, Emergency lamp & siron working consilient	FREE SERVICE CARRIED OUT FOR THE MONTH OF MARCH - 2017	KRISHNA INSTITUTE OF MEDICAL SCIENCES	DEEMED UNIVERSITY	10	PLOT NO.42/2 HADAPSAR INDUSTRIAL ESTATE, HADAPSAR PUNE Phone: 020-41007506	Johnson Johnson Lifts Private Limited
s : LIFTS Fax: 91-44-2 26152006	Manulul.	10100 Left:		onlitter		Mechanic Deputed SHELAR PRAKASH A	Nature of Service	L-11765	PPMH05170313 - 29 MAR-2017	SERVICE
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Head Office: No. 1, East Main Road, Arms Nager Western Extension, Chevnai - 600 101, Grans - LEP 5 This Stocare: www.jojanoosilijuld.com Ph.: 26172001, 26152004, 20152005, 26152006		Cu Romanto if sey : Office Line Only Thus Reported :	Emergency Light. Alarm. & ARD working condition of.	Name of Service Terms Replaced : FREE SERVICE CANNED OUT FOR THE MONTH OF FEBRUARY - 2017	AVAILUSEN REGISTRAR- KRISHNA INSTITUTE OF MEDICAL SCIENCES DEEMED UNISERNATIVS TITUTE OF MEDICAL SCIENCES DEEMED UNIVERSITY, GIRLS HOSTEL EXTENSION BUILDING, MALIXAPUR, TAL-KARAD, DIST-SATARA 419539	Johnson A Johnson Lifts Private Limited
005, 20132005	CAUTION : IF DOOR OPEN WEY IS USED ENSURE THAT DOOR IS FULLY CLOSED	3:00 Lats 4:20	g condition at.	194	Life No. FEM. StellAR PRAKASH ANANDA Mechanic Deputed	No L-11765 Douganes

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Head Office: No. 1, Dark Main Board, Arma Nigger Western Distance on Channel - 800 101; Channel J. DETS Free - 01 44:251(5):012 Wohnel: Western Distance of Science Computing Science - 800 101; Channel - 800 101; Channel - 11975; Free - 01 44:251(5):012		CAUTION : IF DOOR DOOR I	Office He Only Trace Reported :	Consure Remarks If Any	tame which requires Customer Attudion :	Num of Strike / Num Replaced : FREE SERVICE CARRIED OUT FOR THE MONTH OF JANUARY - 2017	DEEMED UNIVERSITY, GIRLS HOSTEL EXTENSION BUILDING, MALKAPUR, TAL-KARAD, DIST-SATARA 415539	STRV 01 OR AN REGISTRAR- KRISHNA INSTITUTE OF MENCAL SCIENCES DEEMED		PLOT NO.422 HADAPSAF INDUSTRIAL ESTATE, HADAPSAF PUNE
IN LIFTS FAS OF ALCOLUSION	Customer's Signature	CAUTION : IF DOOR OPEN MEY IS USED ENSURE THAT DOOR IS FULLY CLOSED	3'00 Litt:			py	Mechanic Deputed	Name SHELAR PR	Lin No.	L-11765
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Head Office: No. 1, East Main Koad, Anna Nagar Western Extension, Chemnal - 000 (0), Granna (LUPUS, Fax: 91-44-251516)4 Wahite: www.joluneoulifibilite.com (IN: 26152005, 26152005, 26152005)		andrepperer Richauserhal BF any t	Emazgancy Light Alarm & ARD weaking condition ok.	FREE SERVICE CARRIED OUT FOR THE MONTH OF MAY - 2017	REGISTRAAF-KRISHNA INSTITUTE OF MEDICAL SCIENCES BINGENNINSTITUTE OF MEDICAL SCIENCES DEEMED UNIVERSITY,GIRLS HOSTEL EXTENSION BULLDING,MALKAPUR, TAL-KARAD,DIST-SATARA 415539		PLOT NO.422 HADAPSAR INDUSTRIAL ESTATE, HADAPSAR PUNE	Inhmenne lifts Private Limited Confident Riskingdon Riskingdon
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Head Office: No. 1. East Main Road, Arna Najar, Wolstim Extension, Chemist. 6001 (0), Chemis. 141718 White: www.joinnon1111dif.com Ph. 20152005-20152006, 20152005, 20152006	CAUTION : JF E	time the Only Time Reported:	Continuer Remarks II any :	CUSTONET -	FREE SERVICE CARRIED OUT FOR THE MONTH OF JUNE - 2017	DEEMED UNIVERSITY, GIRLS HOSTEL EXTENSION BUILDING, MALKAPUR, TAL-KARAD, DIST-SATARA 415539	REGISTRAR-KRISHNA INSTITUTE OF MEDICAL SCIENCES DEEMED		PLOT NO. 322 MADAPSAH INDUSTRIAL ESTATE, HADAPSAH PUWE	Internal Johnson Gifts Private Limited
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Head Office : No.1 East Main Road, Anna Nagar Western Extension, Chennal - 600 101, Grams : LIFTS Fax : 91-44-26151614 Website : www.johnsonlifts1td.com Ph; 26152003, 26152004, 26152005, 26152006		Office Use Only Time Reported :	Customer Remark II any :	Terms which requires oursomer Atention: O ARD, Envergency leinne of sinon workshing condition	Heature of Service County County County From The Months From Les County And	KRISHNA INSTITUTE OF MEDICAL SCIENCES	Dustomer: REGISTRAR- KRISHNA INSTITUTE OF MEDICAL SCIENCES	SERVICITIORION 000 41007506	JONNSON SLOT NO 422 HADAPSAR INDUSTRIM. ESTATE, HADAPSAR PUNE	Johnson Litts Private Limited
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Head Office : No.1 East Main Road, An na Nagar Western Extension, Chennal - 600 101, Grams : LIFTS Fax: 91-44-26151614 Website : www.j hnsonlittelld.com Ph: 26152003, 26152004, 26152005, 26152006	2	Office Use Only Time Reported : 2	ARD, Emeragency la p & sinon weating condition	Nature of Service CARRIED OUT FOR THE MONTH JE MARCH 2017	KRISHNA INSTITUTE OF MEDICAL SCIENCES	Customer: REGISTRAR- KRISHNA INSTITUTE OF MEDICAL SCIENCES		JUIIISUI PLOT NO 422 HADAPSAR INDUSTRIAL ESTATE, HADAPSAR PUNE	Johnson Lifts Private Limited
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Head Office No. 1. East Main Read, Anna Nagar Western Extension, Chennal - 600 101. Grams : LETIS Fax Website : www.johnsonlifishd.cnm Ph : 26152004, 26152005, 26152005, 26152006		Office Use Only	Customer Remarks if any 5.	Items which requires Casimur Attention: CUSTONE	Nature of Service Itoms Replaced : FREE SERVICE CARRIED OUT FOR THE MONTH OF DECEMBER - 2016		SERVINTOR NA REGISTRAR- KRISHNA INSTITUTE OF MEDICAL SCIENCES DEEMED	411013 Phone: 020-41007506	PLOT NO.42/2 HADAPSAR INDUSTRIAL ESTATE, HADAPSAR PUNE	Logistic Logistic
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num - 400 101 strants LIE PERCH - 1-55308	CAUTION : IF DOOR OPEN KEY IS USED ENSURE THAT DOOR IS FULLY CLOSED	1		RY - 2018	DEEMED Name SHELAR PRAKASH AMANDA	ADAPSAN PUNE Stad (10389 R.1.20 ADAPSAN PUNE SMD 3083

Head Office : No. 1; East Main Road, Arma Nagar Western Extension, Chemnat - 600 101, Gramwar Life 75, Fax - 91-44-20151014 Webate : www.johnsoniffishd.com /Ph : 26152004, 26152005, 26152006, 26152006	CAUTION : IF DOOR OPEN KEY IS USED ENSURE THAT DOOR IS FULLY CLOSED CONTACT & SIGNATURE	Office Use Only Time Reported : 3	Customer Remarks if any :	The first warding of warding 120., 2.5 Ah brithery require	PLATINUM SERVICE CARRIED OUT FOR THE MONTH OF DECEMBER - 2018	KRISHNA INS III UTE OF MEDICAL SCIENCES DEEMED TO BE UNIVERSITY MALKAPUR, TAL-KARAD, DIST-SATARA 415539	Tome OR No For Lift SERV/08/QH/02	41007506	232A 4B E WARD, G103 GROUND FLOOR YASHASVI APARTMENTS	Johnson Johnson Lifts Private Limited Ppt. ABIO 1800 RE 18 0 18	L. L
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Head Office: No. L. East Main Roud, Anna Nagar Western Extension, Chemnal - 600 101, Grama : LEFTS. Fax: 91-44-26151614 Website: www.johnsonliftslid.com: Ph. 26152003, 26152004, 28152005, 26152006	CAUTION : IF DOOR OF DOOR IS F	Office Live Only Time Reported :	OARD working ok I 2 volt 2.5 Ph balter 1 no. acquire	PLATINUM SERVICE CARRIED OUT FOR THE MONTH OF OCTOBER - 2018	KRISHMA INSTITUTE OF MEDICAL SCIENCES DEEMED TO BE UNIVERSITY MALKAPUR, TAL-KARAD, DIST- SATARA. 415539	SERVICE OF LIT SERV/08/OR/02	9168269977	TABARAI PARK KOLHAPUR MAHARASHTRA - 416003 Phone:	The Drivete I imited
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Hand Office: No. 1, Kant Main Kond, Anna Napir Weatern Franzisian, Chumal - 600 Th1, Grants L2015 Webanit, www.jointornilfiniti.com Wr. 20152001, 20152005, 20152005, 1015200	CAUTION : [F]	Cantomer Researchs & any i	ARD Emaggingy Light. Alarm & intercom working ok.	PLATINUM SERVICE CARRIED OUT FOR THE MONTH OF JULY	KRISHMA INSTITUTE OF MEDICAL SCIENCES DEEMED TO BE UNIVERSITY MALIKAPUR, TAL-KARAD, DIST- SATARA, 415539	9168289977 SERVIDS OR UN SERVIDS OR 02	TARABAI PARK, KOLHAPUR MANARASHTRA - 416003 Phone:	InmenA Johnson Lifts Private Limited
ant same tarts (and any set	CAUTION : IF DOOR OPEN NEY IS USED ENSURE THAT		som woarking ok.	-2018	New Annual Departs			Presentation Party

		Office Use Cally	Customer Remarks if any 2	ARD, Emerge	Nature of Service / Items Replaced	Commer REGIS DEEM BUILD BUILD	PLOT NO.42 411013 Ph 411013 Ph 507 Lift SERV/08/0R/02	Johnson 🛧 d
Send Office: No. 1. East Main Road, Apris Nager Weitern Extension, Chemas 600.101. Crams 1.21 (21) Website: www.phimoodfhalut.com. 7th - 20152004, 26152004, 26152005, 20152009	CAUTION : IF DOOR OP DOOR IS FU	Time Reported :		ARD, Emergency lamp, stoon & intercome weating old	FREE SERVICE CARRIED OUT FOR THE MONTH OF APRIL - 2018	REGISTRAR- KRISHNA INSTITUTE OF MEDICAL SCIENCES DEEMED UNISHEN INSTITUTE OF MEDICAL SCIENCES DEEMED UNIVERSITY, GIRLS HOSTEL EXTENSION BUILDING, MALKAPUR, TAL-KARAD, DIST-SATARA 415539	PLOT NO.422 HADAPSAR INDUSTRIAL ESTATE, HADAPSAR PUNE 411013 Phone: 020-41007575 SERV/08/OR/02	Ison Johnson Lifts Private Limited Personal SERVICE REPORT
and the production of the	CAUTION : IF DOCR OPEN KEY IS USED ENSURE THAT	1:30 101: 4100		ocating old	~	Starred Stevies SHELAR PRAKASH ANANDA Mechanik Uppates	L-11785 SM09983	SERVICE REPORT

2 million 12	Johnson ifts Private Limited	L-11765	Date 2-8 SMD9983
OR No F	411013 Phone: 020-41007575	Lift So.	FIFSM
SERV/07/QR/04			
Customer :	REGISTRAR- KRISHNA INSTITUTE OF MEDICAL SCIENCES DEEMED	Nature of SHELAR	PRAKASH ANANDA
	DEEMED UNIVERSITY, GIRLS HOSTEL EXTENSION	Mechanic Deputed	
	BUILDING, MALKAPUR, TAL-KARAD, DIST-SATARA 415539		
Interne of Secondary 1 hours	Neolared 1		
lature of Service / Ites	FREE SERVICE CARRIED OUT FOR THE MONTH OF MARCH - 2018		
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tems which requires C MLS ARD, ustomer Remarks if a	FREE SERVICE CARRIED OUT FOR THE MONTH OF MARCH - 2018 waterner Attention: Check & OK, Emalogancy Light & Alaom Wookking OK. av:	9400 ten:	Lect

Website S www.johnsonfifhald.com	Head Office : No. 1, East Main Road, Anna Napar Western		Office Lise Only	Customer Remarks if any :	OARD, Enviroland lamp, show & interior weating ok	Name of Service / Item Replaced : FREE SERVICE CARRIED OUT FOR THE MONTH OF FEBRUARY - 2018	REGISTRAR- KRISHNA INSTITUTE OF MEDICAL SCIENCES DEEMED URISENAUWSTITUTE OF MEDICAL SCIENCES DEEMED UNIVERSITY, GIRLS HOSTEL EXTENSION BUILDING, MALKAPUR, TAL-KARAD, DIST-SATARA 415539	CR.No For Lift :SERV/08/QR/02 SERV/07/07/08/	PLOT NO.42/2 HADAPSAR INDUSTRIAL ESTATE, HADAPSAR PUNE - 411013 Phone: 020-41007575	Johnson A Johnson Lifts Private Limited
Website (www.johnsonlifhald.com Ph : 26152003, 26152084, 26152045, 26152046	Fatension Chemist - 600 101 Communities for statistical statements of the statement of t	S	Time Reported : 101,050 Left :		uter con weating ok	H OF FEBRUARY - 2018	DEEMED	Lift No.	L ESTATE, HADAPSAR PUNE	Vate Limited Providence Rise Headedie
		RE THAT	1:00				Nature SHELAR PRAKASH ANANDA Mechanic Deputed	FSM	SMD9983	5 R las Heleda

CAUTION : IF DOOR OPEN KEY IS L DOOR IS FULLY CLOSE Head Office : No. 1. East Main Zond, Anna Nagar Western Extension, Clannel - 601 101. Course - LTr-S: Factorial Website : www.johananilituid.com Ph. 261 52003; 261 52004; 201 52005; 261 52004	Cusiumer Remarks If any : Office Use Only Time Reported : 10	OARD woolding a le Cizvilt, Z. SAh ballend in required	PLATINUM SERVICE CARRIED OUT FOR THE MONTH OF JANUARY - 2019	KRISHNA INSTITUTE OF MEDICAL SCIENCES DEEMED TO BE UNIVERSITY MALKAPUR, TAL-KARAD, DIST. SATARA 41559	232A 4B E WARD, G103 GROUND FLOOR YASHASVI APARTMENTS, TARABAI PARK, KOLHAPUR MAHARASHTRA - 416003 Phone: 020- 908 No For Litt CERVINGTOR	Johnson Johnson Lifts Private Limited
SED SUSE	10'2 Lan: 1'~	kend ino required	N	Nature of Service SHELAR PRAKASH ANANDA Michanic Deputed	L-11765 SMD9983	PPMHI3190105144 REPORT

Head Office 1 No. 1, East Main Road, Ama Nugar Western Extension, Chemm. 600 101. Grams. LHPS 1 Western www.phraooffichtd.com Ph. 26152007, 26152005, 26152005, 26152005	Office Live Only Three Reported : CAUTION : IF DOOR O DOOR IS F	O ARD. Emelogancy Light weaking dk. @ Emelogancy Light not wooking Battay problem (12V. 2.5AH)	DEEMED TO BE UNIVERSITY MALKAPUR, TAL-KARAD, DIST-SATARA, 415539 PLATINUM SERVICE CARRIED OUT FOR THE MONTH OF SEPTEMBER - 2019	OR No For Lift SERV/08/OR/02	232A 4B E WARD, G103 GROUND FLOOR YASHASVI APARTMENTS TARABAI PARK, KOLHAPUR MAHARASHTRA - 416003 Phone: 020- 41007506	ohnson Johnson Lifts Private Limited
SISONO Card Stein	CAUTION : IF DOOR OPEN KEY IS USED ENSURE THAT DOOR IS FULLY CLOSED	paublem (12V.2.5	Mechanic Departed	Nature of Service SHELAR PRAKASH ANANDA	L-11765 SMD9983 Lift No. File No. PSM	PPMH13190905027 REPOR

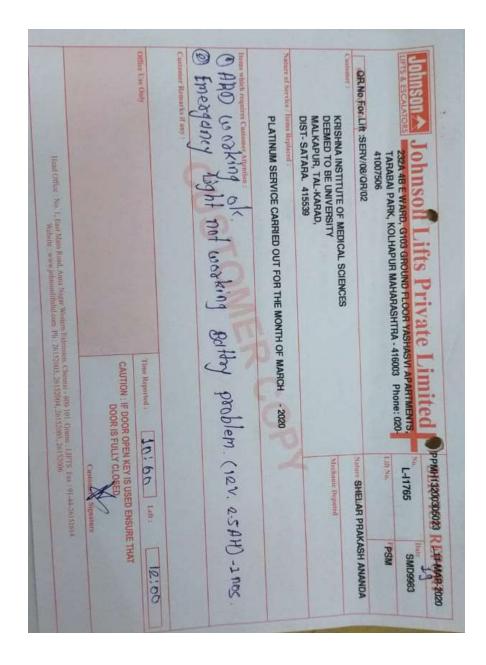
	Office I	00	Nature	0	Int
Head Office: No. 1, Bast Main Road, Anni Nagar Western Extension, Chemist. 400 101, Granis (12078) Websile: sweepidinsonliththi com 191226155001, 20122004, 26152005, 20152004	Office Date Oally Time Reported : 2:01 CAUTION : IF DOOR OPEN KEY DOOR IS FULLY CU	O ARO & Alurm working ok. O Evelogaticy Light & Alur not working Battry problem.	KRISHNA INSTITUTE OF MEDICAL SCIENCES DEEMED TO BE UNIVERSITY MALKAPUR, TAL-KARAD, DIST-SATARA. 415539 PLATINUM SERVICE CARRIED OUT FOR THE MONTH OF JULY - 2019	232A 4B E WARD, G103 GROUND FLOOR VASHASVI APARTMENTS. TARABAI PARK, KOLHAPUR MAHARASHTRA - 416003 Phone: 020- 41007506 OR No For Lift :SERV/08/OR/02	Johnson Lifts Private Limited Perufasionade
ant some (CAUTION : IF DOOR OPEN KEY IS USED ENSURED : 4:00 DOOR IS FULLY CLOSED	Battry problem.	Moduatic Depution	No. Date 2.6. L-11765 SMD9083 Lift No. File No. Nature of Standor PSM	Z

Head Office: No. 1, East Main Road, Anna Nagar, Weston: Education, Chemia 600 (01: Grams: LIFTS Fix: 9).44-240301614 Websile : www.johnsedithibid.com 7h ; 20152004, 26152005, 26152006		ution Live (108)	() ARD weather of an on working 12 vold, 2 5 At ballong regular	PLATINUM SERVICE CARRIED OUT FOR THE MONTH OF JUNE	KRISHNA INSTITUTE OF MEDICAL SCIENCES DEEMED TO BE UNIVERSITY MALKAPUR, TAL-KARAD, DIST. SATAB, ASEED	232A 4B E WARD, G103 GROUND FLOOR YASHASVI APARTMENTS, TARABAI PARK, KOLHAPUR MAHARASHTRA - 416003 Phone: 020- 41007506 OR No For Lift .SERV/08/OR/02	Johnson Johnson Lifts Private Limited SERVICE REPORT
as Main Road, Anna Nagar Western Estimation, Chemia 600 101; Granos 114/18 Website : www.johmontifituld.com 191 20122004, 20122004 20122005 2012200	CAUTION : IF DOOR O DOOR IS F	Time Reported a	king 12 vold, 2. 5	IONTH OF JUNE - 2019		OR VASHASVI APARTMENTS, SHTRA - 416003 Phone: 020-	ivate Limited
LIFTS Fax 01-44-26151614 6152006	CAUTION : IF DOOR OPEN KEY IS USED ENSURE THAT DOOR IS FULLY CLOSED Curromer's Signature	S'2 Left:	Ar ballen	Nd	MUSHELAR PRAKASH ANANDA		SERVICE
	THAT	512	reality		ASH ANANDA	7.6 SIMD9983 PSM	REPORT

REMINDER - I SERVICE CONTRACT EXPIRED ON 31/03/2019 CAUTION : IF DOOR OPEN K DOOR IS FULLYO New Office No. 1 East Main Kost, Nam Neger Watert Examining, Chemial : 600 (1), Chemia : 100 (1), Ch	Omengency lump not working Ofmengency lump not working	KRISHNA INSTITUTE OF MEDICAL SCIENCES DEEMED TO BE UNIVERSITY MALKAPUR, TAL-KARAD, DIST-SATARA 415539 PLATINUM SERVICE CARRIED OUT FOR THE MONTH OF APRIL	232A 4B E WARD, G103 GROUND FLOOR YASHASVI APARTMENTS TARABAI PARK, KOLHAPUR MAHARASHTRA - 416003 Phone: 020- 41007506	Johnson Johnson Lifts Priv
KPIRED ON 31/03/2019 The Reported : IO Let : IZ CAUTION : IF DOOR OPEN KEY IS USED ENSURE THAT DOOR IS FULLY CLOSED DOOR IS FULLY CLOSED Adden Road, Anna Nager Weaters Extension, Chemanal - 600 (Int, Grams, LIFTY, Let a) Adden Road, Anna Nager Weaters Extension, Chemanal - 600 (Int, Grams, LIFTY, Let a)	One of weaking out working 120018, 25 HA Laboury require Demensioner lump not working 120018, 25 HA Laboury require	- 2019	ASHTRA - 416003 Phone: 020- Manual Value of Vervice PSM	Johnson Lifts Private Limited SERVICE REPORT

Head Office : No. 1, East Main Road, Anna Nagar Weitern Extension, Chenna - 600 101, Gramas (LETS, Fax: 91-06-20151614 Website : www.jotmionithild.com/ Ph. 26152005, 26152005, 26152005, 26152005	Office Use Only . Time Reported : CAUTION : IF DOOR OP DOOR IS FU	Customer Remarks (Fany :	OARD working at @ Emergency lamp nod working izvolt estim	PLATINUM SERVICE CARRIED OUT FOR THE MONTH OF MARCH - 2019	KRISHNA INSTITUTE OF MEDICAL SCIENCES LAI dreg Hostel DEEMED TO BE UNIVERSITY MALKAPUR, TAL-KARAD,	232A 4B E WARD, G103 GROUND FLOOR YASHASVI APARTMENTS TARABAI PARK, KOLHAPUR MAHARASHTRA - 416003 Phone: 020- 41007506	Johnson Johnson Lifts Private Limited
11215 Fax: 91.44-20151614 1122006	Caution : IF DOOR OPEN KEY IS USED ENSURE THAT DOOR IS FULLY CLOSED Castomer's Stignature		patterny revelution	2	Nature of Server SHELAR PRAKASH ANANDA Mechanic Deputed	Lin So. 11765 SMD9983 PSM	PPMH13190305005

Teatment - Linguistic Processing Strength and Annu Nugar Wearey Extension, Commist - 400 S05, Wednitz - www.jakuwaithind.com - Physics - 46 - 251 S2004, 20052005, 20152008, 2015200	The Report 3:00 Int. 5:00 CANTON	Cutanti Renti Retti	TARD wooking the hot working Battery pooblem	PLATINUM SERVICE CARRIED OUT FOR THE MONTH OF DECEMBER - 2020	DEEMED TO BE UNIVERSITY DIST- SATAPA. 41559	KRISHNA INSTITUTE OF MEDICAL SCIENCES	4100/S00	2524 48 E WARD, G103 GROUND FLOOR VASHASVI APARTMENTS, TARABAI PARK, KOLHAPUR MAHARASHTRA - 415003 Phone: 020-	(BOLVINOE)	Son Johnson Lifts Private Limited SERVICE REPORT
carroline, Chenniki - 140 501. hol Shinki, 364 Shinki, 364 Shinki	CAUTION : IF DOOR OPEK NEY IS USED ENSURE THAT DOOR IS FULLY CLOSED, Curved and a second		poublem.	MBER - 2020	OPY	TANALASI SHELAR PRAKASH ANANGA	Nature of Service	Phone: 020- UNIVEL-11785 MC0083	DEC 230 50 SOSOS I DEC 3102	ited SERVICE REPOR



Hand Office: No. 1, End Main Road, Anna Nagar Weatern Extension, Clemus - 640 101, Grauss 1 LIFTS, Fax: -91-44 20171614 Wolkship: www.johusudEndidium.inh: 36152003, 20152005, 20152005, 20152006	CAUTION : IF DOOR OPEN MEY IS USED ENSURE THAT DOOR IS FULLY CLOSED Continue of Supervision	Office Cashy Three Reported i 31.0	@ Emergancy Light not working Suttry propriem. (12V 25AH) - 2 now	O ADD working ok. TONER	PLATINUM SERVICE CARRIED OUT FOR THE MONTH OF OCTOBER - 2020	IR, TAL-KARAD, ARA, 415539	KRISHNA INSTITUTE OF MEDICAL SCIENCES	02	TARABAU PARK, KOLHAPUR MAHARASHTRA - 416003 Phone: 020	Johnson Lifts Private Limited Proversion Network RE-Proversion
Fax-91-44 36111614	LOSED	3100 um	2V 2.5AH			Machanie Deputed	Nature "SHELAR PRAKASH ANANDA	Lift No.	L-11765	people to the Herd
	THAT	5:00)-21				UNKASH ANU	WSd.,	SMD998	REPRO

Head Office : No. 1, East Mith Road, Anna Nagar Weitern Extension, Chennal - 600 101. Crame: LIFTS Fax: 91-44-26151614 Website : www.johnseniffishd.com Ph : 26152004, 26152004, 26152005, 26152006		Office Use Only	Customer Remarks if any :	OARD working alt. Onerganity Light not working	Nature of Service / Team Replaced : PLATINUM SERVICE CARRIED OUT FOR THE MONTH OF SEPTEMBER - 2020	KRISHNA INSTITUTE OF MEDICAL SCIENCES DEEMED TO BE UNIVERSITY MALKAPUR, TAL-KARAD, DIST- SATARA. 415539	No For Lift :SEF	232A 4B E WARD, G103 GROUND FLOOR YASHASVI APARTMENTS TARABAI PARK, KOLHAPUR MAHARASHTRA - 416003 Phone: 020	Johnson Johnson Lifts Private Limited Promited Street Base
Chemnal - 600 101. Grams: LIFTS Fax: 91-44-261516 007, 26152004, 26152005, 26152006	CAUTION : IF DOOR OPEN KEY IS USED ENSURE THAT DOOR IS FULLY CLOSED CLOSED CLOSED	Time Reported : 9230 Left :		Batty problem. (12 V. 2.5HH)	SEPTEMBER - 2020	Mechanic Deputed		ASVI APARTMENTS 116003 Phone: 020 L-11765	Limited Promitizedoble
4.4.	JRE THAT	4:30		2 V. 2-5HH)		SHELAR PRAKASH ANANDA Mechanic Deputed	PSM	CB66GWS	ASSRE BASE Too

Head Office: No. 1, East Mann Road, Anna Nagar Western Eatonsion, Chemnal - 600 101, Granis (LUPTS Yas) Websiti: www.johumodifishuk.com Ph. 20152001, 20152004, 26152005, 26152006	CAUTION : IF DOOR OPEN KEY IS USED ENSURE THAT DOOR IS FULLY CLOSED Cummunic and the	Office Lise Only Time Reported 1 4	Customer Remarks II any :	OARD Working OK ONE	PLATINUM SERVICE CARRIED OUT FOR THE MONTH OF JANUARY - 2020	MALKAPUR, TAL-KARAD, DIST- SATARA 415539	Customer: KRISHINA INSTITUTE OF MEDICAL SCIENCES	QR.No For Lift :SERV/08/QR/02	TARABAI PARK, KOLHAPUR MAHARASHTRA - 416003 Phone: 020- 41007506	Johnson A Johnson Lifts Private Limited
S Fas (of street is to be	CLOSED CLOSED	4'on we			4	Mechanic Deputed	Nature OSHELAR PRAKASH ANANDA	Lift No.	No. L-11765	PPMH18200105058RE 25-0AN-2020
	E THAT	650					RAKASH ANANI	PSM	SWD9983	RE BARNE

Ward No 10 to 11 KONE Elevator

Start from 2017

E Nº 347	57.6		Dedicated to Peop	He Flow	EIG
KONE EL	216				
KONE Elevator Ir	ndia Private	Ltd	Maintenance		Transa I
LC	THE ARE A PROVIDE A DECIMAL	and shall be able to	Se	rvice Order Number	656053607
Product Type	Elevator	Planner Group	DOD CHI W	ork Center	42362796
Type of Visit Date/Time of Call Out	PM Gall Or	t Repair	I Audit E	quipment ID	5 15050504
Start Count Reading / Hour				-Closed Note	
			CAL CONTRACTOR OF THE		Restored Time
A contract of the second secon	Travel Time	Arrival Date	Arrival Time	Restored Date	101400
Status en Arrival	tomin 2	51912017	Rectification Result	- Mit Line Line	
Running Correctly	Running With Pro	blem	Contractionent Running	9	
Not Running-On level	Not Running Out		Equipment Runnin Equipment not Run	g, not yet fixed	
~	Entrapment			cation Area	Completed
S Maintenance Module		Completed	Elevator	Escalator Drive Station	TIT
Basic Inspection Basic Module			Guide Rails Doors and Entrances	Track System	-P
Shaft Module			M/C Room Equipments	Truss Safety Signs/Cladding	1 =
Landing Door Module			Shaft Equipments	Skirting	
Door Operator Module Control Panel Module			Car Sling	Handrail System	+ =
Machine Module	and the Co		Counter Weight Rope Assemblies	Step Band Floor Plate	
Signalization Module			Central System	Comb Carrier	18
MX Module Drive Module (Escalator)			Drive System	Electrical System Deckings	
Brake Module (Escalator)			Signalization Peripheral Devices	Baloettades	
Handrail Module (Escalator) Comb Plate Module (Escalator)				ower Supply	17
Guide Module (Escalator)				Others	- de
Step Module (Escalator)			- Villes		Non-Kone Reason
Technician's Remarks				- 1000	
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Customer Comments					
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		101029211			rement
rechnician Name/Employee No.	Aumash 4	hun a ria	Customer Signatu		
Fechnician Name/Employee No. : Sustomer Name	Aumash A mr. Cham	FOR SIT	Customer Signatu Route Supervisor		
Technician Name/Employee No. Customer Name Route Supervisor Name CREDML NOTE Cristomer Care Center Tore Cristomer Care Center	mr. Cham	Jochen	Route Supervisor		

Building Mana	ndia Private	Ltd	Maintenar	ice Report	
Building Name	ISTA Intiti	ite medica	J collage	City / Town	kanad
Plant Section	isna Intite	e sia	e	Service Order Number	656048160
Product Type	41112	Planner Group	DMGII	Work Center Equipment Number	18201061
	PM Call (Escalator Dut Repair	Autowalk	Equipment ID	5 50803
Start Count Reading / Hour			Job Status	Closed Not C	losed
Meter Reading					
Technician Name	Travel Time		Arrival Time	Restored Date	Restored Time
Avmash		Arrival Date	3:00	21/0/2017	4:15
itatus on Arrival		1412014			
Running Correctly	Dupping With D	able as	Rectification Result	ning	
Not Running-On level	Running With Pr		Equipment Run	ning, not yet fixed	
Not Running-Escalator	Entrapment		Equipment not	Running, not yet fixed	
Walter		1	Red	ctification Area	Completed
Maintenance Module		Completed	Elevator	Escalator	
Lusic Inspection	4		Guide Rails	Drive Station Track System	
Basic Module	1 22		Doors and Entrances M/C Room Equipmen	March Andreas Construction	
Shaft Module Landing Door Module			Shaft Equipments	Safety Signs/Cladding	
Door Operator Module			Car	Skirting	
Control Panel Module			Car Sling	Handrail System	1-1-1
Machine Module			Counter Weight	Step Band Floor Plate	
Signalization Module			Rope Assemblies	Comb Carrier	
MX Module	and the second second		Control System	Electrical System	
Drive Module (Escalator)	4		Signalization	Deckings	
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Comb Plate Module (Escalator)	N.			Others	
Guide Module (Escalator) Step Module (Escalator)	The second second			-	
oreh monere fennennet				F - 2	Non-Kone Reason
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Customer Comments	Aumas	401029,41	Technician Sign	nature	<u>.</u>
Customer Comments			Customer Sign	nature ature	
Additional Works/Parts Replace Customer Comments Fechnician Name/Employee No Customer Name Route Supervisor Name	Aumash mr.Bham mr.T.D		Construction and Construction of the	nature ature	

KONE Elevator India Priva	te I td	Maintenan	ice Report	
		chical.	City / Town	Karrad.
Customer Contact Number		41	Service Order Number Work Center	282 DMG11
roduct Type	Planner Group	Autowalk	Equipment Number	42362796
ype of Visit	all Out Repair	Audit	Equipment ID	Not Closed
Date/Time of Call Out		Job Status		
Meter Reading	38000			
Technician Name Travel Time	Arrival Date	Arrival Time	Restored Date	Restored Time
Avinacht maharil -	261812017	12:20	261812017	1 2110
itatus on Arrival	and that state	Rectification Result		and the second second
Running Correctly Running Wil	h Problem	Equipment Rur	Duing	
	g-Out of Level	Contract Dur	nning, not yet fixed Running, not yet fixed	
Not Running-Escalator Entrapment				Completed
Mar March	Completed	1 have been a second se	ectification Area Escalat	
Maintenance Module	Completed	Elevator	Drive Station	
c Inspection		Guide Rails Doors and Entrances	- L Dunlom	
Basic Module		M/C Room Equipme	Truss	
Shaft Module		Shaft Equipments	Safety Signs/Clau	
Landing Door Module Door Operator Module		Car	Skirting Handrail System	
Control Panel Module		Car Sling	Step Band	
Machine Module		Counter Weight Rope Assemblies	Floor Plate	
Signalization Module		Control System	Comb Carrier	
MX Module		Drive System	Electrical System	
Drive Module (Escalator)		Signalization	Deckings Balustrades	
Brake Module (Escalator)		Peripheral Devices		
Handrail Module (Escalator)			Power Supply Others	
Comb Plate Module (Escalator) Guide Module (Escalator)			Olifers	AN REAL PROPERTY.
Step Module (Escalator)			the second	Non-Kone Reason
Step Moune (Essence /				Non-Kone
Technician's Remarks	p mainta	mme	somice dom	4-H-
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A Lift leve	er of Norse			
	and the second	,	- TE TIOL	
Additional Works/Parts Replaced	1 - Catio	poill	Nall LTR	CTC
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	ange to	he grou	ond Filles	DC 220 -
A et		2.3.23	Buttons 6	KU2200
A cl	nd floo	ir up		
A Cl	nd floo	o Butt	ons A.D	5 300° -
A Cl	floor U	p Burtt	ons, AD	<u>\$ 300'</u> =
A Cl	nd floor	D Butt	ons AD	1200 -
A ct A 2 A 2 A Customer Comments	nd floor	p Butt	ons AD	1 300° -
A ct A 2 A 2 A G Customer Comments A Francisco	floor V	P BUTT	ons AD	
A ct A 2 A 2 A G Customer Comments A Frances Customer Comments	nd floor up	E Butt	ons 4.0 ele e gatty	
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7 AH. 72 VOH. P.	epiaced	Bartion Bartion	stignature	S 300
A Franciscian Name/Employee No. : Autons	é placed	Barbarbarbarbarbarbarbarbarbarbarbarbarba	Signature	s 300
A Francisco Augusta 7 A H - 72 Volt: P- Technician Name/Employee No.: August Sustamer Name	é placed	Barbarbarbarbarbarbarbarbarbarbarbarbarba	stignature	s 300 Lundy
A Franciscian Name/Employee No. : Autons	Epicice of Epicice of Epicice of Epicice of Epicipice of Epicipice of Epicipice of Epicipice of Epicipice of Epicice of Epice of Ep	Battar Battar 1 Technician S Customer S Route Supe	Signature	S 300 Autority KESV/F

Figurator India Di		Dedicated to Peo	1	
KONE Elevator India Private	e Ltd	Maintenand		Karach.
Customer Contact Number Plant Section	spitcy		City / Town	SENCE 9197
Product Type	Planner Group	DMGII	Nork Center	282 DING!" 41361675
Type of Visit	Escalator Cont Cont Cont Cont Cont Cont Cont Cont		Equipment Number Equipment ID	0803
Start Count Read			Closed Not C	losed
Meter Reading				
Technician Name Travel Time	Arrival Date	Arrival Time	Restored Date	Restored Time
Pres Carl	01612017	10130	30/6/2017	11:50
Status on Arrival		Rectification Result	and the second second second	
Running Correctly Running With F	roblem	1 Equipment Runnin	ng	
Not Running-On level Not Running-On level Not Running-On level Entrapment	ut of Level	E Equipment Bunni	na. not yet fixed	
Entrapment			inning, not yet fixed	
Maintenance Module	Completed	100000000000000000000000000000000000000	fication Area Escalator	Completed
rsic Inspection	M	Elevator Guide Rails	Drive Station	
Casic Module		Doors and Entrances	Track System	+=-
Shaft Module		M/C Room Equipments	Truss Safety Signs/Cladding	
Landing Door Module		Shaft Equipments	Safety Signs/Clauding Skirting	
Door Operator Module Control Panel Module		Car Car Sing	Handrail System	
Machine Module		Counter Weight	Step Band	
Signalization Module		Rope Assemblies	Floor Plate Comb Carrier	
MX Module		Control System	Electrical System	
Drive Module (Escalator)		Drive System Signalization	Deckings	
Brake Module (Escalator)		Peripheral Devices	Balustrades	
Handrail Module (Escalator) Comb Plate Module (Escalator)			Power Supply	
Guide Module (Escalator)			Others	
Step Module (Escalator)				State of the state
				Non-Kone Reason
echnician's Remarks	1			
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Additional Works/Parts Replaced & LOU			ture MM	

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KONE Elevato	or India Privat	e Ltd	Maintenance	Report	
Building Name Customer Contact Number	Krisna Int	itute of me	dical. City	/Town	47446186
Fight Section	INIZ I	Planner Group		the Constant	282DMG1)
Product Type Type of Visit	Elevator] Escalator	Autowalk Equ	ipment Number	42361675
Date/Time of Call Out	PM Ca	Il Out Repai		TClosed Not C	llosed
Start Count Reading / Hour Meter Reading					
Technician Name Avmash	Travel Time	Arrival Date	Arrival Time	Restored Date	Restored Time
Status on Arrival					
Running Correctly	Running With	Problem	Rectification Result		
Not Running-On level	Not Running-I	and the second se	E Equipment Running.	not yet fixed	
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Maintenance Modu	lle	Completed		ation Area Escalator	Completed
sichic Inspection			Elevator Guide Rails \	Drive Station	
Basic Module			Doors and Entrances	Track System	
Shaft Module			M/C Room Equipments	Truss Safety Signs/Cladding	
Landing Door Module			Shaft Equipments	Skirting	
Door Operator Module			Car Car Sling	Handrail System	
Control Panel Module Machine Module			Counter Weight	Step Band	
Signalization Module			Rope Assemblies	Floor Plate	
MX Module			Control System	Elèctrical System	
Drive Module (Escalator)	1		Drive System Signalization	Deckings	
Brake Module (Escalator)			Peripheral Devices	Balustrades	
Handrail Module (Escalator Comb Plate Module (Escala			Po	wer Supply	
Guide Module (Escalator)	1			Others	
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Step Module (Escalator)					Non-Kone Reaso
Step Module (Escalator)	Flevreter	om WI	Th Y.LM	odule	
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KONE Elevator India Priv	ate Ltd	Maintenand	ce Report	
Customer Contact Number	nstitute m	dical.	City / Town	Karrad.
Product Type JNL 12	Planner Group		Service Order Number Work Center	654705351
Type of Visit Elevator Date/Time of Call Out	Escalator] Autowalk	Equipment Number	282 DECG 11 42362796
Start Count President	Call Out Repair	A CONTRACTOR OF A CONTRACTOR O	Equipment ID	ot Closed
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Technician Name Travel Time	Arrival Date	Arrival Time	Restored Date	Restored Time
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Status on Arrival	- Instagn	Rectification Result	at long and adding	Constant of the second
Not Running-On level	Vith Problem	Equipment Runnin		
Not Running-Escalator	ng-Out of Level nt	Equipment Runnin	ng, not yet fixed	
Maintenance Module	Completed	Recti	lication Area	Completed
Basic Inspection		Elevator	Escalator Drive Station	
Basic Module		Guide Rails Doors and Entrances	Track System	
Shaft Module		M/C Room Equipments	Truss	
Landing Door Module		Shaft Equipments	Safety Signs/Claddin Skirting	
Door Operator Module Control Panel Module		Car Car Sling	Handrail System	
Machine Module		Counter Weight	Step Band	
Signalization Module		Rope Assemblies	Floor Plate	
MX Module		Control System Drive System	Comb Carrier Electrical System	
Drive Module (Escalator)		Signalization	Deckings	
Brake Module (Escalator) Handrail Module (Escalator)		Peripheral Devices	Balustrades	
Comb Plate Module (Escalator)		P	ower Supply	
Guide Module (Escalator)		Charles and	Others	
Step Module (Escalator)			and the second	
chnician's Remarks				Non-Kone Reason
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Customer Contract N	10 FT AN ALT NIL	Interior in mit	City/1	Town	antaol. 43assaga
	TODEL THE L	Planner Group	Servic	Center	OF THE
Product Type Type of Visit		Escalator	Autowalk Equip		20616752 5050803
Date/Time of Call Out	PM Call O	ut 🔄 Repair	Audit Equip	Closed Not Closed	sed
Start Count Reading / Hour					
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Technician Name	Travel Time	Arrival Date	Arrival Time	RESIDICO Data	Restored Time
AUTOASIL		BINI LOBTY	2130 Dm 3	27/1 2017 3	1.30 007
Status on Arrival			Rectification Result		
Running Correctly	Running With Pr	oblem	Equipment Running		the second second
Not Running-On level	Not Running-Out		Equipment Running, r	not yet fixed	
Not Running-Escalato	or Entrapment	A VALUE A			
Maintenanti		Completed	Rectificat	tion Area Escalator	Completed
Maintenance Mod	ule		Elevator	Drive Station	
ba Inspection		1900-	Guide Rails Doors and Entrances	Track System	XH
Basic Module Shaft Module			M/C Room Equipments	Truss	1-1-1
Landing Door Module			Shaft Equipments	Safety Signs/Cladding	+=1
Door Operator Module			Car	Skirting	
Control Panel Module			Car Sling	Handrail System Stép Band	
Machine Module			Counter Weight	Step Bano	
Signalization Module			Rope Assemblies	Comb Carrier	
MX Module			Control System Drive System	Electrical System	
Drive Module (Escalator)			Signalization	Deckings	
Brake Module (Escalator)	In T di		Signaization	D histordor	
			Peripheral Devices	Balustrades	
Handrail Module (Escalato	or)	10000	Peripheral Devices Pov	Ner Supply	
Comb Plate Module (Esca	alator)		Pov	1 Contraction of the second	
Comb Plate Module (Esca Guide Module (Escalator) Step Module (Escalator)	slator)		Pov	ver Supply	Non-Kone Reason
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Comb Plate Module (Esca Guide Module (Escalator) Step Module (Escalator) Technician's Remarks	ustor)	Inopito d Etherige	porte pli- ing light condition	ner Supply Others	
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KONE Elevator In Building Name	dia Priv	ate Ltd	Maintenar	nce Report	
Plant Section	usna h	ospital		City / Town	Karreich
Product Tune	Elevator	Planner Group	DIMGI	Service Order Number Work Center	65160 9197 282 Dong!
Date/Time of Call Out		Call Out Repai	Autowalk	Equipment Number Equipment ID	42361675
Meter Reading			Job Status		Not Closed
17112301	ravel Time	Arrival Date	Arrival Time	Restored Date	Restored Time
Status on Arrival	Social in	3062017	10130	3016 2017	11:50
Running Correctly Not Running-On level Not Running-Escalator		ith Problem 19-Out of Level 1		ining ining, not yet fixed Running, not yet fixed	
Maintenance Module		Completed	Rec	ctification Area Escalator	Completer
Basic Inspection	The Tori of	P	Guide Rails	Drive Station	
Basic Module /			Doors and Entrances	Track System	
Landing Door Module			M/C Room Equipment Shaft Equipments	ts Truss Safety Signs/Claddi	ng
Door Operator Module			Car	Skirting	
Control Panel Module			Car Sling	Handrail System	
Machine Module	and the second		Counter Weight	Step Band	
Signalization Module	Low and all		Rope Assemblies	Floor Plate	
MX Module			Control System	Comb Carrier Electrical System	
Drive Module (Escalator)			Drive System Signalization	Deckings	
Brake Module (Escalator)			Peripheral Devices	Balustrades	
Handrail Module (Escalator) Comb Plate Module (Escalator)	The second second			Power Supply	
Guide Module (Escalator)				Others	
Step Module (Escalator)	1				and the second second
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Technician's Remarks	2 105	it done.			
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echnician Name/Employee No. :	m. h.	V. KMDash			2
echnician Name/Employee No. : Customer Name Route Supervisor Name	m·p·	Dradhan	Route Superviso		

ONE Elevator India Private	1 td			
KTISTO Int	LIU	Maintenance		and a start
	tute of me		ry / Town rivice Order Number	CASE CLOU
aduct T	Planner Group 2	82DMG 11 W	ork Center	28=DMAI
pe of Visit	Escalator	and and and an and a second second	quipment Number	42361675 NID
ate/Time of Call Out	Out Repair			Closed
art Count Reading / Hour Leter Reading			In the strengt one	
Technician Name Travel Time	Arrival Date	Arrival Time	Restored Date	Restored Time
atus on Arrival	International International	Rectification Result		
Running Correctly Running With I	Problem	Equipment Running)	
Not Running-On level Not Running-C	out of Level	Equipment Runnin	g, not yet fixed	
Not Running-Escalator Entrapment	1			Completed
Maintenance Module	Completed	Elevator	cation Area Escalator	Completed
asic Inspection	E	Guide Rails	Drive Station	
asic Module		Doors and Entrances	Track System Truss	
haft Module		M/C Room Equipments Shaft Equipments	Safety Signs/Cladding	
anding Door Module		Car	Skirting	
oor Operator Module		Car Sling	Handrail System	
Iachine Module		Counter Weight	Step Band Floor Plate	
ignalization Module		Rope Assemblies Control System	Comb Carrier	
IX Module		Drive System	Elèctrical System	
Inve Module (Escalator)		Signalization	Deckings	
rake Module (Escalator) landrail Module (Escalator)		Peripheral Devices	Balustrades	
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echnician Name/Employee No //////0014	Carried Harris	Customer Signati	ILE THE	
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KONE Elevator India	Private I td	Maintena	nce Report	
Sullding Name	anda Institute		City / Town	Karad
Justomer Contact Number			Service Order Number Work Center	282 DMG 11
Product Type	Planner Group	2 8 2 Dan G-11 Autowalk	Equipment Number	42362796
Type of Visit PM Date/Time of Call Out	Call Out Re	pair Audit	Equipment ID	Not Closed
Start Count Reading / Hour		Job Status		
Meter Reading				Restored Time
Technician Name Travel T	Ime Arrival Date	Arrival Time	Restored Date	Heatoren Time
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itatus on Arrival		Rectification Resul	1	
	unning With Problem	Equipment Ru	nning, not vet fixed	
	ot Running-Out of Level	Equipment no	Running, not yet fixed	
		R	ectification Area	Completed
Maintenance Module	Completed	Elevator	Escalato Drive Station	1
Basic Inspection		Guide Rails Doors and Entrance		
Basic Module		M/C Room Equipme	nts Truss	
Shaft Module Landing Door Module		Shaft Equipments	Safety Signs/Cladd	
Door Operator Module		Car	Skirting Handrail System	
Control Panel Module		Car Sling Counter Weight	Step Band	
Machine Module		Rope Assemblies	Floor Plate	
Signalization Module MX Wodule		Control System	Comb Carrier Electrical System	
Drive Module (Escalator)		Drive System Signalization	Deckings	
Brake Module (Escalator)		Peripheral Devices	the second s	
Handrail Module (Escalator) Comb Plate Module (Escalator)			Power Supply	
Guide Module (Escalator)			Others	
Step Module (Escalator)				
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Technician's Remarks	ventrye mes	ntamasoce	SERVICE.	
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KONE Elevator India Pr	rivate I td	Maintenance	Report	
Building Name				
Plant Section	ALTRIBUNDOT STU	ENCE DEEMC City		CONTRACT.
Product Type	A STREET, A STRE			NOF IN 1
Type of Viela	Escalator	Autowalk Equ	ipment Number	623616754
Date/Time of Call O	Call Out Repair			5050803
Start Count Deadles 111		Job Status	Closed Not Cl	osed
Meter Reading				
Technician Name Travel Time			Restored Date	Restored Time
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Status on Arrival		Rectification Result		
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Maintenance Module	Completed	Rectifica	and the second se	Completed
basic Inspection		Elevator	Escalator Drive Station	
Basic Inspection Basic Module	Libert	Guide Rails Doors and Entrances	Track System	100
Shaft Module		M/C Room Equipments	Truss	
Landing Door Module		Shaft Equipments	Safety Signs/Cladding	
Door Operator Module		Car	Skirting	
Control Panel Module		Car Sling	Handrail System	
Machine Module		Counter Weight	Step Band	
Signalization Module		Rope Assemblies	Floor Plate	
MX Module		Control System	Comb Carrier	
I DEVICES I DEVICES MELCOLI		Drive System	Electrical System	
Drive Module (Escalator)		TOTOTO PLANTIC		
	TAY 1.000	Signalization	Deckings	
		Signalization Peripheral Devices	Deckings Balustrades	
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Brake Module (Escalator) Handrail Module (Escalator) Comb Plate Module (Escalator)		Signalization Peripheral Devices Power	Deckings Balustrades ar Supply Others	
Brake Module (Escalator) Handrail Module (Escalator) Comb Plate Module (Escalator) Guide Module (Escalator) Step Module (Escalator)		Signalization Peripheral Devices Power	Deckings Balustrades ar Supply Others	Ion-Kone Reason
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Elevator Indi	a Privato	Ltd	Maintenance	Report	
KONE Elevator Indi	no Inchi	tule of mee	Licral. City/	Town	erra.cl.
Plant Section			Servi	ce Order Number	2 2019-11
Product Type	12			Center 72	361675
Type of Visit		Escalator Dut Repair	Audit Equi	pment ID	0803
Date/Time of Call Out Start Count Reading / Hour			Job Status	Closed Not Cide	
Meter Reading					
Technician Name Trav AVITOSC	vel Time	Arrival Date	Arrival Time	Restored Date R 2.G17/2.017 /	testored Time
	20	51712017	CITOR DUT T		
Status on Arrival Bunning Correctly		- 24	Rectification Result		
Not Running-On level	Running With Pr		Equipment Running Equipment Running,	not yet fixed	
Not Running-Escalator	Not Running-Ou Entrapment	t of Level	Equipment not Runni	ng, not yet fixed	
	1 Entrapment			tion Area	Completed
Maintenance Module		Completed	Elevator	Escalator	10
Basic Inspection			Guide Rails	Drive Station	
Basic Module			Doors and Entrances	Track System Truss	
Shaft Module			M/C Room Equipments	Safety Signs/Cladding	
Landing Door Module			Shaft Equipments	Skirting	1
Door Operator Module	TI N		Car Car Sling	Handrail System	15
Control Panel Module			Counter Weight	Step Band	14
Machine Module			Rope Assemblies	Floor Plate	
Signalization Module	Contraction of the		Control System	Comb Carrier	
MX Module Drive Module (Escalator)			Drive System	Electrical System	
Brake Module (Escalator)			Signalization /	Deckings Balustrades	
Handrail Module (Escalator)	1.		Peripheral Devices		
Comb Plate Module (Escalator)	U		Por	Ver Supply Others	
Guide Module (Escalator)				Others	
Step Module (Escalator)				ALC: NO ALC: N	
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Technician's Remarks			e		Y
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Building Name			Maintenand		Leanst.
Customer	Lacombus	tute word	NO 31 1	City / Town Service Order Number	659050319
Product	111122	Planner Group	121226-11	Work Center	232 DAG 12 132 DAG 16 175
Type of Visit	PM Cal	Escalator		Equipment Number Equipment ID	STS OSARO
Date/Time of Call Out Start Count Reading / Hour		Cut [] Kepa	Job Status	Closed Not C	Slosed
Meter Reading					
Technician Name	Travel Time	And all Dates	Arrival Time	Restored Date	Restored Time
With the second of the second se	AND STATE STATES Y A	Arrival Date	1210	17/11/20171	10:10
Status on Arrival		Californ Tr	Rectification Result	STATISTICS STATISTICS	
Running Correctly] Running With F	roblem	C 1 Foulgment Runnig	ng	
Not Running-On level	Not Running-O	ut of Level	Equipment Runni	ng, not yet fixed unning, not yet fixed	
La Not Running-Escalator	Entrapment	The second second			
Maintenance Module		Completed	Elevator	fication Area Escalator	Completed
Basic Inspection		T	Guide Rails	Drive Station	
Basic Module	The second second		Doors and Entrances	Track System	
Shaft Module			M/C Room Equipments	Truss Safety Signs/Cladding	
Landing Door Module	Same Vallan you		Shaft Equipments	Skirting	
Door Operator Module	State on the second		Car Car Sling	Handrail System	
Control Panel Module Machine Module			Counter Weight	Step Band	
Signalization Module			Rope Assemblies	Floor Plate	
MX Module			Control System	Comb Carrier	
Drive Module (Escalator)	a contract of		Drive System	Electrical System	
Brake Module (Escalator)			Signalization	Balustrades	
Handrail Module (Escalator)	Statistical N		Peripheral Devices	14	
Comb Plate Module (Escalator)				Power Supply Others	
Guide Module (Escalator)			CHARGE STREET	Guidia	deter States
Step Module (Escalator)				and the second second second	Non-Kone Reason
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echnician Name/Employee No. : Customer Name Route Supervisor Name	m. Ishow	burr SIV	Customer Signatu Route Supervisor	COLOR HARD HARD HARD HARD HARD HARD HARD HAR	1012

KONE Elevator I	ndia Drive	ataltd	Dedicated to F	ice Report	
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Customer Contact Number	rispa Ir 258 Eng	titule medi	collage.	Service Order Number	6467254
Product T	INIZ	Planner Group	DMGU	Work Center	22 DIAGH
Type of Visit	Elevator [Escalator Call Out Repu	Autowalk	Equipment Number 4	VERENZ
Date/Time of Call Out		Call Out Rep.	Job Status	Closed Not Clo	sed
Start Count Reading / Hour Meter Reading					
				Restored Date F	Restored Time
Technician Name	Travel Time	Arrival Date	Arrival Time	18/12/2017 5	120
A A A A A A A A A A A A A A A A A A A	2/12/2017	18/12/2017	3:00		
Status on Arrival Running Correctly	· · · · · · · · · · · · · · · · · · ·	A	Rectification Result	mind	
Not Running-On level		ith Problem	E Equipment Ru	ning, not yet fixed	
Not Running-Escalator	Entrapmen	ng-Out of Level	Equipment not	Running, not yet fixed	
		1		ctification Area	Completed
Maintenance Module		Completed	Elevator	Escalator	
Basic Inspection			Guide Rails	Drive Station Track System	
Basic Module			Doors and Entrances	1	
Shaft Module			M/C Room Equipment Shaft Equipments	Safety Signs/Cladding	
Landing Door Module			Car	Skirting	+ =
Door Operator Module Control Panel Module			Car Sling	Handrail System	1
Machine Module			Counter Weight	Step Band Floor Plate	
Signalization Module	21.1.0		Rope Assemblies	Comb Carrier	
MX Module	ALL STREET		Control System	Electrical System	
Drive Module (Escalator)			Drive System Signalization	Deckings	
Brake Module (Escalator)			Peripheral Devices	Balustrades	
Handrail Module (Escalator)				Power Supply	
Comb Plate Module (Escalator)				Others	
Guide Module (Escalator)	the second second			A SHARE HE AND THE REAL PROPERTY OF	
Step Module (Escalator)					Non-Kone Reaso
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Technician Name/Employee No.		h 40102941	Customer Sign		18A INTER
Technician Name/Employee No. Customer Name Route Supervisor Name	m. Bho	n Howard Sir	Customer Sign Route Supervi		Bindy

2018

KONE Packaged Service Repair



Customer Name KRISHNA INSTITUTE OF MEDICAL

Site Name	KRISHNA INSTITUTE OF MEDICAL	Address	KIMS, KAHAD, KARAD
Contract Number	41231469	City	KARAD
Equipment Number	42361675	KONE Order	672271201
		Visit Date	12/8/2018
Equipment ID		Attended by	MADANE AVINASH SHIVAJI

Below is a summary of the work performed during this job:

MX Machine Check Points

Job Description

mx m/c brake or check points done **Customer** Comments N/A

Customer Signature

672271201

Signed By

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O REDMI NOTE 9 CO AI QUAD CAMERA

Mr Bhambure sir

KONE	
Status Closed	KONE
Dispatch number Caller Name / Time	10129421 at 10/04/2018 08:26
Site Name	KRISHNA INSTITUTE OF MEDICAL
Equipment Type	Elevator
Equipment ID	
Equipment Number	42361675
Street	KIMS, KARAD, KARAD
Postal Code / City	415110 KARAD
ailure Description	lift not work
itter Name / Accepted Time	MADANE AVINASH SHIVAJI at 10/04/2018 08:29
quipment Condition on Arrival	Running - Not stopping accurately
quipment Condition on Leaving	01
eason Code Description	Outdated component
ction Code Description	Adjusted
omments for Customer	
rrived Time	10/04/2018 08:30
nished Time	10/04/2018 10:57

10129421

Customer Name

Mr bhamure sir

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• REDMI NOTE 9

KONE Status Closed Dispatch number Caller Name / Time	10161799 at 02/05/2018 17:14
Site Name	KRISHNA INSTITUTE OF MEDICAL
Equipment Type	Elevator
Equipment ID	
Equipment Number	42361675
Street	KIMS, KARAD, KARAD
Postal Code / City	415110 KARAD
Failure Description	Additional work performed during Maintenance 668189884
Fitter Name / Accepted Time	MADANE AVINASH SHIVAJI at 02/05/2018 18:19
Equipment Condition on Arrival	No Applicable - No Applicable
Equipment Condition on Leaving	01
Reason Code Description	Misuse
Action Code Description	Reset
Comments for Customer	over lode use car
Arrived Time	02/05/2018 18:20
inished Time	02/05/2018 19:14

Extra Work 668189884

Customer Name

Mr Bhambure sir

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• C REDMI NOTE 9

KONE	KONE
Status Closed	KONE
Dispatch number	10129205
Caller Name / Time	at 09/04/2018 13:47
Site Name	KRISHNA INSTITUTE OF MEDICAL
Equipment Type	Elevator
Equipment ID	
Equipment Number	42361675
Street	KIMS, KARAD, KARAD
Postal Code / City	415110 KARAD
ailure Description	Additional work performed during Maintenance
	666692614 MADANE AVINASH SHIVAJI at 09/04/2018 14:49
itter Name / Accepted Time	No Applicable - No Applicable
quipment Condition on Arrival	No Applicable - No Applica
quipment Condition on Leaving	01
leason Code Description	Vandalism
ction Code Description	Adjusted
omments for Customer	
rrived Time	09/04/2018 14:50
inished Time	09/04/2018 16:37

Extra Work 666692614

Customer Name

6

Mr bhamure sir

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● ○ REDMI NOTE 9 ○ ○ AI QUAD CAMERA

KONE Status Closed Dispatch number Caller Name / Time	10092396 Avinash at 08/03/2018 13:24
Site Name Equipment Type Equipment ID	KRISHNA INSTITUTE OF MEDICAL Elevator
Equipment Number Street	- 42361675 KIMS, KARAD, KARAD
Postal Code / City	415110 KARAD
Failure Description	1)opening side panel noise problem 2)Car door noise problem 3)isolation pad check noise & foil oil
Fitter Name / Accepted Time	MADANE AVINASH SHIVAJI at 08/03/2018 13:36
Equipment Condition on Arrival	Running - Noisy
Equipment Condition on Leaving	04
Reason Code Description	Outdated component
Action Code Description	Adjusted
comments for Customer	
arrived Time	08/03/2018 16:43
inished Time	08/03/2018 18:00

Rank 10092396

Customer Name

Mr bhamure sir

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• C REDMI NOTE 9

Mainter	nance Visit Reco	rd R	ONE
Customer Name	KRISHNA INSTITUTE OF MEDICAL		ANDIA RANDONCH WALKING WALKING
Site Name	KRISHNA INSTITUTE OF MEDICAL	Address	KIMS, KARAD, KARAD
Contract Number	41231469	City	KARAD
Equipment Number	42361675	Service Order	678625954
-		Visit Date	14/11/2018
Equipment ID		Attended by	MADANE AVINASH SHIVAJI

- Y: Basic inspection
- Z: Signalisation module

This is a record of completion for the above maintenance modules. Should there be any items that we need to bring to your attention, following this visit a member of our team will be in contact.

Job Description

4

B

Preventive meantanance service done 1)1 Fan not working properly 2)intercom not work because ups damage 3)Emergency light not working because ups not avelable all landing door contact check working ok

Customer Comments

lubrication oil 1000ml all landing and car HLG Display check working ok that below material should be replaced 1) Fan 2)oil cup 4 mos 3)inspection box new 4)oil culector 4 nos 5)UPS 6) hand lamp

Arrived Time

Finished Time

14/11/2018 09:23 20/11/2018 12:11

Customer Signature

678625954

Mr Bhambure sir

Signed By

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● ○ REDMI NOTE 9 ○ ○ AI QUAD CAMERA

KONE Status Closed	KONE
Dispatch number Caller Name / Time	10328981 at 14/09/2018 09:49
Customer Name	KRISHNA INSTITUTE OF MEDICAL
Site Name	KRISHNA INSTITUTE OF MEDICAL
Equipment Type	Elevator
Equipment ID	
Equipment Number	42361675
Street	KIMS, KARAD, KARAD
Postal Code / City	415110 KARAD
Job Description	2nd and 1st landing door contact not working properly
Failure Description	Additional work performed during Maintenance 674635900
Fitter Name / Accepted Time	MADANE AVINASH SHIVAJI at 14/09/2018 10:50
quipment Condition on Arrival	No Applicable - No Applicable
Equipment Condition on Leaving	01
leason Code Description	Outdated component
ction Code Description	Adjusted
ustomer Comments	Not applicable
rrived Time	14/09/2018 10:52
inished Time	14/09/2018 12:41

Extra Work 674635900 Mr Bhambure

Signed By

T

Ca

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• O REDMI NOTE 9

OF MEDICAL

41231469

42361675

KRISHNA INSTITUTE



KIMS, KARAD, KARAD

KARAD 671415176 4/7/2018 MADANE AVINASH SHIVAJI

B: Basic module

Equipment ID

Site Name

Contract Number

Equipment Number

This is a record of completion for the above maintenance modules. Should there be any items that we need to bring to your attention, following this visit a member of our team will be in contact.

Address

Service Order

Attended by

Visit Date

City

Job Description

preventive maintenance service done fan Allarm and intercom check working ok ERD operation check working ok all landing door contact check working ok lubrication oil 1000ml Customer Comments

N/A

18

Arrived Time	04/07/2018 09:39
Finished Time	04/07/2018 12:58

Customer Signature

Roufe

671415176

Customer Name

KRISHNA INSTITUTE OF MEDICAL

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Tel No: +91 20252 86962, Fax: , www.kone.com, konein@kone.com

REDMI NOTE 9 ALOUAD CAMER

KRISHNA INSTITUTE



KIMS, KARAD, KARAD

KARAD 669655455 5/6/2018 MADANE AVINASH SHIVAJI

Equipment ID

Site Name

42361675

OF MEDICAL

41231469

City Service Order Visit Date Attended by

Address

B: Basic module

Contract Number

Equipment Number

This is a record of completion for the above maintenance modules. Should there be any items that we need to bring to your attention, following this visit a member of our team will be in contact.

Job Description

preventive maintenance service done fan Allarm and intercom check working ok all landing door contact check working ok emergency lights check working ok lubrication oil 1000ml

Customer Comments

NA

1100

F

Arrived Time **Finished Time** 05/06/2018 11:36 14/06/2018 14:52

Customer Signature

669655455

Customer Name

KRISHNA INSTITUTE OF MEDICAL

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●○ REDMI NOTE 9 ○○ AI QUAD CAMERA

KONETH	the second s	1 concernence		
KONE Elevator India Private	e Ltd	Maintenance		
Customer Contract Registering Indentity		Ci	tyridwn	anad
Plant Section	all'a contra de la c		ervice Order Number	2 DRIGH
Product Type	Planner Group		quipment Number	351575
Date/Time of Call Ord	Out Repai	r Audit E	quipment ID	15070505
Start Count Reading / How		Job Status	Closed Not Clos	500
Meter Reading			Contraction of the second second	
Technician Name Travel Time	Arrival Date	Arrival Time	Kestoren main	estored Time
A second se	10/02/2018	9:00	10/02/2018 1	0:20
Status on Arrival		Rectification Result		
Running Correctly Running With I	Problem	E Equipment Running	9	
Not Running-On level Not Running O		Equipment Runnin	g, not yet fixed	
Not Running-Escalator Entrapment		Equipment not Run	nning, not yet fixed	
Maintenance Module	Completed	Rectifi	ication Area	Completed
and the subscription of the second	Completed	Elevator	Escalator Drive Station	101
Basic Inspection		Guide Rails	Track System	
Basic Module Shaft Module		Doors and Entrances M/C Room Equipments	Truss	
		Shaft Equipments	Safety Signs/Cladding	
Landing Door Module Door Operator Module		Car	Skirting	
Control Panel Module		Car Sling	Handrail System	1-1-1-
Machine Module		Counter Weight	Step Band /	
Signalization Module		Rope Assemblies	Floor Plate Comb Carrier	1-1-1-
MX Module		Control/System	Electrical System	T
Drive Module (Escalator)		Drive System	Deckings	
Brake Module (Escalator)		Signalization Peripheral Devices	Balustrades	T CD
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comb Plate Module (Escalator)	Provide State		Others	
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		1000	Maintenance		1 1
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Customer Contact Number	Krispa Inch	lute of med	Servi	ce Order Number	The second s
Plant Section Product Type	ID112			Center	22 HMG 11-
Type of Visit	Elevator Call C		L Audit Equi	pment ID	nend
Date/Time of Call Out			Job Status	Glased Not C	und
Start Count Reading / Hou Meter Reading					
Technician Name	Travel Time	Arrival Date	Arrival Time	Restored Date	Restored Time
Aumael	- ALCONDER CONTRACTOR	stilable	g.40	05/01/2018	II sere
Status on Arrival			Rectification Result		
Running Correctly	Running With Pr	oblem	Equipment Running	not yet fixed	
Not Running-On leve	Not Running-Ou		Equipment Running, Equipment not Runn	ing, not yet fixed	
Not Running-Escalat	tor Entrapment		The second se	ation Area	Completed
Maintenance Mod	tule	Completed	Elevator	Escalator	
Basic Inspection			Guide Rails /	Drive Station	15
Basic Inspection Basic Module			Doors and Entrances	Track System	
Shaft Module			M/C Room Equipments	Truss Safety Signs/Cladding	
Landing Door Module			Shaft Equipments	Skirting	
Door Operator Module	State States		Car /	Handrail System	10
Control Panel Module	The south of the s		Car Sling / Counter Weight	Step Band/	
Machine Module			Rope Assemblies	Floor Plate	-+=
Signalization Module			Control System	Comb Carrier	-10
MX Module			Drive/System	Electrical System Deckings	TE
Drive Module (Escalator)	/		Signalization	Balustrades	TE
Brake Module (Escalator) Handrail Module (Escalat	from		Peripheral Devices	ower Supply	
Comb Plate Module (Escalat			Pe	Others	
Guide Module (Escalator)				Others	
Step Module (Escalator)					Non-Kone Re
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Site Name Contract Number Equipment Number

KRISHNA INSTITUTE OF MEDICAL 41231469 42361675

Address City Service Order Visit Date Attended by



KIMS, KARAD, KARAD

KARAD 668189884 2/5/2018 MADANE AVINASH SHIVAJI

Equipment ID

Y: Basic Inspection D: Door operator module L: Landing door module

This is a record of completion for the above maintenance modules. Should there be any items that we need to bring to up to the source of the s need to bring to your attention, following this visit a member of our team will be in contact.

Comments for Customer

Customer Signature

668189884

Customer Name

KRISHNA INSTITUTE OF MEDICAL

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• C REDMI NOTE 9

waintei	nance Visit Reco	rd B	ONE
Customer Name	KRISHNA INSTITUTE OF MEDICAL		KIMS, KARAD,
Site Name	KRISHNA INSTITUTE OF MEDICAL	Address	KARAD
Contract Number	41231469	City	KARAD
Equipment Number	42361675	Service Order	676261076
		Visit Date	8/10/2018 MADANE
quipment ID	e	Attended by	AVINASH SHIVAJI

B: Basic module

This is a record of completion for the above maintenance modules. Should there be any items that we need to bring to your attention, following this visit a member of our team will be in contact.

Job Description

Preventive meantanance service done Fan Allarm and intercom check working ok lubrication oil 1000ml emergency lights check working ok ERD operation check working ok

Customer Comments

Not applicable

Arrived Time	08/10/2018 16:45
Finished Time	08/10/2018 17:22

Customer Signature

676261076

Mr Bhambure sir

Signed By

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O REDMI NOTE 9 ○ AI QUAD CAMERA

Site Name

Contract Number Equipment Number

KRISHNA INSTITUTE OF MEDICAL 41231469 42361675

Address City

Service Order Visit Date

Attended by



KIMS, KARAD, KARAD

KARAD 666692614 9/4/2018 MADANE AVINASH SHIVAJI

B: Basic module

Equipment ID

This is a record of completion for the above maintenance modules. Should there be any items that we need to bring to your attention, following this visit a member of our team will be in contact.

Comments for Customer

Customer Signature

566692614

Customer Name

KRISHNA INSTITUTE OF MEDICAL

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REDMI NOTE 9 AI QUAD CAMERA

KONE Status Closed	KONE		
	10304835		
Dispatch number Caller Name / Time			
Caller Name / Time	Mr Bhambure sir at 25/08/2018 09:24		
Customer Name	KRISHNA INSTITUTE OF MEDICAL		
Site Name	KRISHNA INSTITUTE OF MEDICAL		
Equipment Type	Elevator		
Equipment ID			
Equipment Number	42361675		
Street	KIMS, KARAD, KARAD		
Postal Code / City	415110 KARAD		
Job Description	mc room controller wiring supply problem or finally fine problem 1 phase cable loose connections now lift running normally		
Failure Description	lift not work floor indication not show properly		
Fitter Name / Accepted Time	MADANE AVINASH SHIVAJI at 25/08/2018 09:28		
Equipment Condition on Arrival	Not running - At floor - door closed		
Equipment Condition on Leaving	01		
Reason Code Description	Technical failure		
Action Code Description	Repaired		
Customer Comments	N/A		
Arrived Time	25/08/2018 09:41		
inished Time	25/08/2018 14:10		

Str 10304835

Signed By

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Mr Bhambure

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Tel No: +91 20252 86962, Fax: , www.kone.com, konein@kone.com

• COREDMI NOTE 9

Customer Signature	No.
Finished Time	29/05/2018 13:32
Arrived Time	29/05/2018 08:29
Customer Comments	N/A
Action Code Description	Cleaned - Polished
Reason Code Description	Outdated component
Equipment Condition on Leaving	01
Equipment Condition on Arrival	Running - Running correctly (no fault found)
Fitter Name / Accepted Time	MADANE AVINASH SHIVAJI at 29/05/2018 14:39
Failure Description	car top or shaft and pit cleaning work
Job Description	all elevator equipment cleaning work done
Postal Code / City	415110 KARAD
Street	KIMS, KARAD, KARAD
Equipment Number	- 42361675
Equipment ID	Elevator
Site Name Equipment Type	KRISHNA INSTITUTE OF MEDICAL
Caller Name / Time	10192849 at 29/05/2018 08:29
Dispatch number	
Status Closed	KONE
KONE	

10192849

Mr Bhambure sir

1

Customer Name

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KONE Status Closed	KONE
Dispatch number Caller Name / Time	10239459
	at 04/07/2018 09:38
Site Name	KRISHNA INSTITUTE OF MEDICAL
Equipment Type	Elevator
Equipment ID	
Equipment Number	42361675
Street	KIMS, KARAD, KARAD
Postal Code / City	415110 KARAD
Job Description	1st 2nd landing door jam
Failure Description	Additional work performed during Maintenance
	671415176 MADANE AVINASH SHIVAJI at 04/07/2018 10:43
Fitter Name / Accepted Time	
Equipment Condition on Arrival	No Applicable - No Applicable
Equipment Condition on Leaving	01
Reason Code Description	Technical failure
Action Code Description	Adjusted
Customer Comments	
Arrived Time	04/07/2018 10:44
inished Time	04/07/2018 12:28

Extra Work 671415176

Mr Bhambure sir

Customer Name

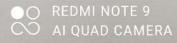
Finished Time

0

Ca

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KONE	
Status Closed	KONE
Dispatch number Caller Name / Time	10413797 at 05/12/2018 09:25
Customer Name Site Name	KRISHNA INSTITUTE OF MEDICAL KRISHNA INSTITUTE OF MEDICAL
Equipment Type Equipment ID	Elevator
Equipment Number Street	- 42361675
Postal Code / City	KIMS, KARAD, KARAD 415110 KARAD
Job Description	2nd or 3rd floor landing door closing time jam roling removed both door
Failure Description	Additional work performed during Maintenance 679575486
Fitter Name / Accepted Time	MADANE AVINASH SHIVAJI at 05/12/2018 10:29
Equipment Condition on Arrival	No Applicable - No Applicable
Equipment Condition on Leaving	01
Reason Code Description	Outdated component
Action Code Description	Adjusted
Customer Comments	
Arrived Time	05/12/2018 10:29
Finished Time	05/12/2018 12:18

Mm Extra Work 679575486

Signed By

Mr bhamure sir

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KONE			
Status Closed			
Dispatch number			
Caller Name / Time	Mr kokare sir at 16/07/2018 08:14		
Customer Name	KRISHNA INSTITUTE OF MEDICAL		
Site Name	KRISHNA INSTITUTE OF MEDICAL		
Equipment Type	Elevator		
Equipment ID			
Equipment Number Street	42361675		
	KIMS, KARAD, KARAD		
Postal Code / City	415110 KARAD		
Job Description	car door adjust		
Failure Description	lift not work door not closed properly		
Fitter Name / Accepted Time	MADANE AVINASH SHIVAJI at 16/07/2018 08:15		
Equipment Condition on Arrival	Not running - At floor - door open		
Equipment Condition on Leaving	01		
Reason Code Description	Technical failure		
Action Code Description	Adjusted		
Customer Comments	N/A		
Arrived Time	16/07/2018 08:42		
Finished Time	16/07/2018 09:42		

Brant 10254302

Signed By

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Mr Bhambure sir

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Tel No: +91 20252 86962, Fax: , www.kone.com, konein@kone.com

KONE Status Closed	KONE
Dispatch number	10565248
Caller Name / Time	Mr vivek bhambure at 25/05/2019 09:14
Customer Name	KRISHNA INSTITUTE OF MEDICAL
Site Name	KRISHNA INSTITUTE OF MEDICAL
Equipment Type Equipment ID Equipment Number Street	Elevator - 42361675 KIMS, KARAD, KARAD 415110 KARAD
Postal Code / City	ERD battery damage replaced 12voltage 12 AH 4
Job Description	nos
Failure Description	ERD battery replacement
Fitter Name / Accepted Time	MADANE AVINASH SHIVAJI at 25/05/2019 09:39
Equipment Condition on Arrival	Running - Not stopping accurately
Equipment Condition on Leaving Reason Code Description Action Code Description Customer Comments Arrived Time	01 Building power down Replaced Costomer satisfied from 25/05/2019 09:39 25/05/2019 10:51

Signed By

Customer Signature

Mr vivek bhambure sir

10565248

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Customer Name	KRISHNA INSTITUTE OF MEDICAL		KIMS, KARAD.	
Site Name	KRISHNA INSTITUTE OF MEDICAL	Address	KARAD	
Contract Number	41231469	City	KARAD	
Equipment	42361675	Service Order	695348214	
Number Equipment ID	-	Attended by	Pravin SHIGWAN	2
Y: Basic inspectio D: Door operator i L: Landing door m	nodule odule		the any items that	
This is a record of we need to bring t	completion for the above maintenance o your attention, following this visit a m	ember of our team w	ill be in contact.	
Job Description	mance done with 1)Light,Fan &Alarm	working ok 2)Lubric	ant Oli 1000ml	
Preventive mainte Customer Comm	enance done with 1)Light,Fan &Alarm	Wolling -		
Customer Comm	ents			
Arrived Time	26/09/2019 15:57			
	Time 26/09/2019 17:04			
Customer Signati				
	Vive 1 - bhambate			
	95582710			
Signed By	Mr vivek bhambure sir			nai
ssemination and any of	contained in this message or files attached to ally privileged information. If you are not the iner corresponding action in respect of this con- nessage and notify the sender immediately. of viruses; however, we cannot guarantee than the basis that we are not be liable for any Ltd., , PUNE, 411038 East www.kone.com, konein@kone.com	Thank you. Please note	that we take reasonable precaution	

REDMI NOTE 9
 AI QUAD CAMERA



Customer Name KRISHNA INSTITUTE OF MEDICAL Address KARAD KRISHNA INSTITUTE OF MEDICAL Site Name KARAD City Contract 41231469 Number 689634188 Service Order Equipment 42361675 5/6/2019 Number Visit Date MADANE AVINASH SHIVAJI Attended by Equipment ID

B: Basic module

This is a record of completion for the above maintenance modules. Should there be any items that we need to be a structure to be a structu we need to bring to your attention, following this visit a member of our team will be in contact.

Job Description

Preventive meantanance service done fan Allarm and intercom check working ok all landing and car HLG Display check working ok all landing door contact check working ok lubrication oil 1000ml all landing

Customer Comments

Costomer satisfied

05/06/2019 16:18 Arrived Time 08/06/2019 12:18 **Finished Time**

Customer Signature

689634188

Mr vivek bhambure sir

Signed By

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Customer Name	KRISHNA INSTITUTE OF MEDICAL		KIMS, KARAD,
Site Name	KRISHNA INSTITUTE OF MEDICAL	Address	KARAD
Contract Number	41231469	City	KARAD
Equipment	42361675	Service Order	
Number	42001070	Visit Date	6/2/2019 MADANE
Equipment ID		Attended by	AVINASH SHIVAJI
leed to bring to y	completion for the above maintenance our attention, following this visit a memb		
S: Shaft module This is a record of eed to bring to yo ob Description	completion for the above maintenance our attention, following this visit a memb	ntercom check wor	
S: Shaft module This is a record of eed to bring to yo ob Description Preventive mean ontact check wor	completion for the above maintenance our attention, following this visit a memb tanance service done fan Allarm and in king ok emergency lights check working	ntercom check wor	
S: Shaft module This is a record of reed to bring to yo ob Description Preventive mean ontact check wor ustomer Comm	completion for the above maintenance our attention, following this visit a memb tanance service done fan Allarm and in king ok emergency lights check working	ntercom check wor	
S: Shaft module This is a record of eed to bring to yo ob Description Preventive mean ontact check wor ustomer Comm not applicable	completion for the above maintenance our attention, following this visit a memb tanance service done fan Allarm and in king ok emergency lights check working	ntercom check wor	
S: Shaft module This is a record of reed to bring to yo ob Description Preventive mean ontact check wor ustomer Comm	completion for the above maintenance our attention, following this visit a memb tanance service done fan Allarm and in king ok emergency lights check workin tents	ntercom check wor	

Signed By

Mr Vivek bhambure

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Customer Name Site Name	KRISHNA INSTITUTE OF MEDICAL KRISHNA INSTITUTE OF MEDICAL	Address	KIMS, KARAD, KARAD
Contract Number	41231469	City KONE Order	675991538
Equipment Number	42361675	Visit Date	8/2/2019 MADANE
Equipment ID		Attended by	AVINASH SHIVAJI
Below is a summ	ary of the work performed during this job:		
Planned Order			
Job Description work complete Customer Comm	ants		
Arrived Time Finished Time	08/02/2019 16:16 08/02/2019 17:23		
Customer Signa	ture		
	675991538		
	Mr Bhambure sir		Li and may
Signed By	a contained in this message or files attached to	it are intended for the intended recipient, pl	exclusive use of the addressee and may ease note that the use, copying, any form is strictly prohibited. If you received this you. Please note that we take reasonable
ontain confidential of a f dissemination and a ressage in error, plea recautions to prevent ruses. We only send a	any other corresponding action in respect of se delete the message and notify the sender the transmission of viruses; however, we cann and receive emails on the basis that we are no	temodiately Thank	you. Please note that we take reason from
OTICE: The informatic ontain confidential or l dissemination and a essage in error, plea recautions to prevent ruses. We only send a	any other corresponding action in respect of any other corresponding action in respect of se delete the message and notify the sender the transmission of viruses; however, we cann and receive emails on the basis that we are no achments.	temodiately Thank	you. Please note that we take rousentrol

Mainter	nance Visit Recor	d	
Customer Name	KRISHNA INSTITUTE OF MEDICAL	Address	KIM
Site Name	KRISHNA INSTITUTE OF MEDICAL	Provent and	KAI
Contract Number	41231469	City	
Equipment	42361675	Service Order	50

S, KARAD, RAD 6414782 5/4/2019 Visit Date MADANE AVINASH SHIVAJI Attended by

Equipment ID

Number

B: Basic module

This is a record of completion for the above maintenance modules. Should there be any items that we need to be a set to be a set of the last of the set of we need to bring to your attention, following this visit a member of our team will be in contact.

Job Description

Preventive meantanance service done fan Allarm and intercom check working ok emergency lights check working ok all landing door contact check working ok lubrication oil 1000ml

Customer Comments

Costomer satisfied

Arrived Time

Finished Time

05/04/2019 09:22 09/04/2019 16:54

Customer Signature

686414782 Mr bhamure sir

Signed By

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	KRISHNA INSTITUTE OF MEDICAL		KIMS, KARAD.
Site Name	KRISHNA INSTITUTE OF MEDICAL	Address	KARAD
Contract Number	41231469	City	KARAD
Equipment Number	42361675	Service Order	698865063
Equipment ID		Attended by	AVINASH SHIVAJI
B: Basic module			
This is a record o we need to bring	f completion for the above maintenance to your attention, following this visit a me	nodules. Should the mber of our team wi	re be any items that Il be in contact.
Job Description			
CHECKED WORKING	ntenance service done fan alarm and int ok lub oil used 1000ml and car Ele OR (display or button checked working ok	ercom check workir nech safety checke	ig ok emergency isan d working ok all landing
Customer Comm	ients		
costcomer satisfie	ed		
Arrived Time	04/11/2019 13:54		
Work Completed	Time 04/11/2019 14:53		
Customer Signat	Ŵ		
	698055063		
	Mr Bhambure sir		
igned By	to files attached to i	I are interioco tor the	
TICE: The information tain confidential or leg emination and any off r, please delete the n ent the transmission d and receive emails o chments.	contained in this message or files attached to in hally privileged information. If you are not the inther corresponding action in respect of this com- nessage and notify the sender immediately. The of viruses; however, we cannot guarantee that on the basis that we are not be liable for any los Ltd.,, PUNE, 411038 Fax:, www.kone.com, konein@kone.com	nunication is strictly pro- lank you. Please note	that we take reasonable precautions to
TICE: The information tain confidential or leg emination and any off r, please delete the n ent the transmission d and receive emails o chments.	her corresponding action in respect of this commensate and notify the sender immediately. The of viruses; however, we cannot guarantee that on the basis that we are not be liable for any log	nunication is strictly pro- lank you. Please note	that we take reasonable precautions to



Customer Name	KRISHNA INSTITUTE OF MEDICAL		KIMS, KARAD,
Site Name	KRISHNA INSTITUTE OF MEDICAL	Address	KARAD
Contract Number	41231469	City	KARAD
Equipment	42361675	Service Order	681381670
Number	42301073	Visit Date	11/1/2019 MADANE
Equipment ID		Attended by	AVINASH SHIVAJI

B: Basic module

This is a record of completion for the above maintenance modules. Should there be any items that we need to bring to your attention, following this visit a member of our team will be in contact.

Job Description

t

Preventive meantanance service done fan Allarm and intercom check working ok emergency lights check working ok ERD operation check working ok lubrication oil 1000ml all

Customer Comments

*all lift safety check working ok *shaft up final and down final check working ok ERD operation check

working ok Arrived Time Finished Time

11/01/2019 12:12 12/01/2019 16:01

Mr Bhambure sir

Customer Signature



Signed By

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KONE I Repair	Packaged Service	ŀ	ONE
Customer Name	KRISHNA INSTITUTE OF MEDICAL	Address	KIMS, KARAD
Site Name	KRISHNA INSTITUTE OF MEDICAL	Address	KARAD
Contract Number	41231469	City	KARAD
Equipment		KONE Order	667718466
Number	42361675	Visit Date	13/5/2019
Equipment ID		Attended by	MADANE AVINASH SHIVAJI

Below is a summary of the work performed during this job:

MX BRAKE SETTING

Job Description

mx brake setting work done **Customer** Comments

13/05/2019 10:35 Arrived Time 18/05/2019 17:49 Finished Time

Customer Signature

Mr Bhambure sir

m771846

Signed By

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Contract Number 41231469 City Equipment Number 42361675 Service Order 683736894 Equipment ID	Customer Name Site Name	KRISH KRISH	NA INSTITUTE OF MEDICAL NA INSTITUTE OF MEDICAL	Address	KIMS, KARAD, KARAD KARAD
D: Door operator module L: Landing door module This is a record of completion for the above maintenance modules. Should there be any items that we need to bring to your attention, following this visit a member of our team will be in contact. Job Description Preventive meantanance service done fan Allarm and intercom check working ok all landing door contact check working ok ERD operation check working ok lubrication oil 1000ml Customer Comments Costomer satisfied Arrived Time 13/05/2019 09:08 Finished Time 13/05/2019 17:49 Customer Signature WITE Mr Bhambure sir NOTICE: The information contained in this message or files attached to it are intended tor the exclusive use of the addressee and may our are not interced the use of the addressee and may NOTICE: The information contained in this message or files attached to it are intended tor the exclusive use of the addressee and may oral a confidential or legally privileged information. If you are not the intended recipien, please note that we are eaconable precauces or oral confidential or legally privileged information. If you are not the communication is statchy provibed. If you received this message or please delete the message and notify the sender immediately. Thank you. Please note that we take reasonable precauces the prevent he transmission of vinuses; however, we cannot guarantee that this message or its attachments are free from viruses. We can prevent the transmission of viruses; however, we cannot guarantee that this message or its attachments are free from viruses. We can prevent the transmission of viruses; however, we cannot guarantee that this message or its attachments are free from viruses. We can prevent the transmission of viruses; however, we cannot guarantee that this message or its attachments are free from viruses. We can prevent the transmission of viruses; however, we cannot guarantee that this message or its attachments are free from viruses. We can prevent the transmission of viruses; however, we cannot guarantee	Number Equipment Number			Service Order Visit Date	688736894 13/5/2019
Job Description Preventive meantanance service done fan Allarm and intercom check working ok all tanding door customer Comments Costomer satisfied Arrived Time 13/05/2019 09:08 Finished Time 18/05/2019 17:49 Customer Signature Image: Signed By Mr Bhambure sir Image: Signed By NOTICE: The information contained in this message or files attached to it are intended for the exclusive use of the addresse and may other corresponding action in respect of this communication is sinctly prohibide. If you received this message or files attached to it are intended to it are intended to it are reasonable precausors of diservice or since and the sender the exclusive use of the addresse and may other corresponding action in respect of this communication is sinctly prohibide. If you received this message or files attached to it are intended to it are intended to it are reasonable precausors of diservice or since or is satisfied to its message or files attached to its message or the intended to its message or the addresse and may other corresponding action in respect of this communication is sinctly prohibited. If you received this message or files attached to its message or the transmission of viruses, however, we cannot guarantee that the message or the attachments are free or the intended receive emails on the basis that we are not be liable for any loss or damage resulting from the opening of this message and endify the sender immediately. Thank you.	D: Door operator L: Landing door r	module nodule		nce modules. Should th a member of our team v	ere be any items that vill be in contact.
Arrived Time 13/05/2019 09:08 Finished Time 18/05/2019 17:49 Customer Signature	Job Description Preventive mea contact check we Customer Com	n ntananc orking ol ments		check Work	ing ok all landing door
Signed By Mr Bhambure sir NOTICE: The information contained in this message or files attached to it are intended for the exclusive use of the addressee and may contain confidential or legally privileged information. If you are not the intended recipient, please note that the use, copying, any form of dissemination and any other corresponding action in respect of this communication is strictly prohibited. If you received this message in recipient, please delete the message and notify the sender immediately. Thank you. Please note that we take reasonable precautors to reverse the transmission of viruses, however, we cannot guarantee that this message or its attachments are free from viruses. We only send and receive emails on the basis that we are not be liable for any loss or damage resulting from the opening of this message and send and receive emails on the basis that we are not be liable for any loss or damage resulting from the opening of this message and send and receive emails on the basis that we are not be liable for any loss or damage resulting from the opening of this message and send and receive emails on the basis that we are not be liable for any loss or damage resulting from the opening of this message and send and receive emails on the basis that we are not be liable for any loss or damage resulting from the opening of this message and send and receive emails on the basis that we are not be liable for any loss or damage resulting from the opening of this message and send and receive emails on the basis that we are not be liable for any loss or damage resulting from the opening of this message and send and receive emails on the basis that we are not be liable for any loss or damage resulting from the opening of this message and send and receive emails on the basis that we are not be liable for any loss or damage resulting from the opening of this message and send and receive emails on the basis that we are not be liable	Arrived Time	neo .	13/05/2019 09:08 18/05/2019 17:49		
NOTICE: The information contained in this message or files attached to it are intended for the exclusive use of the addressee and may notatic confidential or legally privileged information. If you are not the intended recipient, please note that the use, copying, any form of dissemination and any other corresponding action in respect of this communication is strictly prohibited. If you received this message in refore, please delete the message and notify the sender immediately. Thank you. Please note that we take reasonable precautors the prevent the transmission of viruses; however, we cannot guarantee that this message or its attachments are free from viruses. We on send and receive emails on the basis that we are not be liable for any loss or damage resulting from the opening of this message and the basis that we are not be liable for any loss or damage resulting from the opening of this message and send and receive emails on the basis that we are not be liable for any loss or damage resulting from the opening of this message and send and receive emails on the basis that we are not be liable for any loss or damage resulting from the opening of this message and send and receive emails on the basis that we are not be liable for any loss or damage resulting from the opening of this message and send and receive emails on the basis that we are not be liable for any loss or damage resulting from the opening of this message and send and receive emails on the basis that we are not be liable for any loss or damage resulting from the opening of the sender the sender sender the sender sender the sender sender the sender sen	Customer Sign	ature	All and a second		
contain connection and any other corresponding action interpretering of the sender immediately. Thank you. Please note that the sender immediately. Thank you. Please note that the message and on the sender immediately. Thank you have a statchments are free from viruses, we cannot guarantee that this message or its attachments are free from viruses, we cannot guarantee that this message or its attachments are free from viruses, we cannot guarantee that this message or its attachments are free from viruses, now we cannot guarantee that this message or its attachments are free from viruses, however, we cannot guarantee that this message or its attachments are free from viruses, now we cannot guarantee that the message or its attachments are free from viruses, now we cannot guarantee that the message or its attachments are free from viruses, now we cannot guarantee that the message or its attachments are free from viruses, however, we cannot guarantee that the message or its attachments are free from viruses, however, we cannot guarantee that the message or its attachments are free from viruses, however, we cannot guarantee that the message or its attachments are free from viruses, however, we cannot guarantee that the message or its attachments are free from viruses, however, we cannot guarantee that the message or its attachments are free from viruses.	Signed By		Mr Bhambure sir		turing use of the addressee and may
errad, so t	contain connuernation dissemination and an error, please delete t prevent the transmiss send and receive em	ty other of he messa sion of vin ails on the	prresponding action in roder immedi uses, however, we cannot guaran e basis that we are not be liable to	ately. Thank you. Please no tee that this message or its or any loss or damage resulti	use note that the use, copying, any term to prohibited. If you received this message in te that we take reasonable precautions to attachments are free from viruses. We onli- ing from the opening of this message and/o



KARAD

KARAD

709530045

MADANE AVINASH SHIVAJI

Address

Service Order

Attended by

City

Customer Name KRISHNA INSTITUTE OF MEDICAL KRISHNA INSTITUTE OF MEDICAL Site Name Contract 41756319 Number

Equipment 42361675 Number

Equipment ID

Y: Basic inspection

D: Door operator module

L: Landing door module

This is a record of completion for the above maintenance modules. Should there be any items that we need to bring to your attention, following this visit a member of our team will be in contact.

Job Description

F

* Maintenance activity * 1) preventive maintenance service done 2)fan alarm and intercom check working ok 3)all landing and car Electrical or mechanical contact check working ok 4)Lubrication Oil used 1000ml 5) HLG Display check working ok

Customer Comments

costumer satisfied

Arrived Time	23/05/2020 09:20
Work Completed Time	23/05/2020 10:45

Customer Signature

Signed By

Mr Bhambure sir

70959656

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O REDMI NOTE 9 CO ALQUAD CAMERA



Customer Name	KRISHNA INSTITUTE OF MEDICAL		
Site Name	KRISHNA INSTITUTE OF MEDICAL	Address	KIMS, KARAD, KARAD
Contract Number	41756319	City	KARAD
Equipment	42361675	Service Order	704243448
Number Equipment ID		Attended by	MADANE AVINASH SHIVAJI

Y: Basic inspection

S: Shaft module

This is a record of completion for the above maintenance modules. Should there be any items that we need to bring to your attention, following this visit a member of our team will be in contact.

Job Description

preventive maintenance service done fan alarm and intercom check working ok all landing and car Electrical or mechanical contact check working ok all landing and car HLG Display check working ok shafts lights check working ok Lubrication Oil used 1000ml

Customer Comments

costumer satisfied

04/02/2020 09:20 Arrived Time Work Completed Time 04/02/2020 10:23

Customer Signature

Signed By

Mr Bhambure sir

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KONE Elevators India Pvt Ltd. , , , PUNE, 411038

Tel No: +91 20252 86962, Fax: , www.kone.com, konein@kone.com

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			and the second states of the s
Customer Name Site Name	KRISHNA INSTITUTE OF MEDICAL KRISHNA INSTITUTE OF MEDICAL	Address	KIMS, KARAD, KARAD
Contract	KRISHINA INSTITUTE C.	City	KARAD
Number	41756319	Service Order	702737991
Equipment Number	42361675		MADANE
Equipment ID		Attended by	AVINASH SHIVAJI

B: Basic module

This is a record of completion for the above maintenance modules. Should there be any items that we need to bring to your attention, following this visit a member of our team will be in contact.

Job Description

C

preventive maintenance service done fan alarm and intercom check working ok all landing and car Electrical or mechanical contact check working ok all landing and car HLG Display check working ok lubrication oil use 1000ml

Customer Comments

Arrived Time	01/01/2020 16:16
Work Completed Time	01/01/2020 17:23
Work Completed Time	A Second Construction of the second second

Customer Signature

Mr Bhambure sir

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Mainter	nance Visit Reco	rd B	CONE
Customer Name	KRISHNA INSTITUTE OF MEDICAL		KIMS, KARAD,
Site Name	KRISHNA INSTITUTE OF MEDICAL	Address	KARAD
Contract Number	41756319	City	KARAD
Equipment Number	42361675	Service Order	720760112
Continue and ID		Attended by	MADANE AVINASH SHIVAJI

Y: Basic inspection

D: Door operator module

L: Landing door module

This is a record of completion for the above maintenance modules. Should there be any items that we need to bring to your attention, following this visit a member of our team will be in contact.

Job Description

Routine maintenance completed, back to normal

720750112

Customer Comments

Due to Covid-19 situation Signature is not obtained for the services rendered in-your premises . However report is sent to the registered mail ID for record purpose.

 Arrived Time
 02/11/2020 11:53

 Work Completed Time
 02/11/2020 13:17

Customer Signature

Signed By

Mr vivek bhambure sir

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	Carlos and		Sec. 1

Customer Name	e KRISHNA INSTITUTE OF MEDICAL		KIMS, KARAD,
Site Name	KRISHNA INSTITUTE OF MEDICAL	Address	KARAD
Contract Number	41756319	City	KARAD
Equipment	42361675	Service Order	702737991
Number Equipment ID		Attended by	MADANE AVINASH SHIVAJI

B: Basic module

This is a record of completion for the above maintenance modules. Should there be any items that we need to bring to your attention, following this visit a member of our team will be in contact.

Job Description

-

preventive maintenance service done fan alarm and intercom check working ok all landing and car Electrical or mechanical contact check working ok all landing and car HLG Display check working ok lubrication oil use 1000ml

Customer Comments

Arrived Time	01/01/2020 16:16
Work Completed Time	01/01/2020 17:23

Customer Signature

Mr Bhambure sir

Signed By

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●○ REDMI NOTE 9 ○○ AI QUAD CAMERA



Customer Name	KRISHNA INSTITUTE OF MEDICAL		
Site Name	KRISHNA INSTITUTE OF MEDICAL	Address	KIMS, KARAD, KARAD
Contract Number	41756319	City	KARAD
Equipment Number	42361675	Service Order	720760112
Equipment ID		Attended by	MADANE AVINASH SHIVAJI

Y: Basic inspection

D: Door operator module

L: Landing door module

This is a record of completion for the above maintenance modules. Should there be any items that we need to bring to your attention, following this visit a member of our team will be in contact.

Job Description

Routine maintenance completed, back to normal

Customer Comments

Due to Covid-19 situation Signature is not obtained for the services rendered in your premises . However report is sent to the registered mail ID for record purpose.

Arrived Time 02/11/2020 11:53 Work Completed Time 02/11/2020 13:17

Customer Signature

Signed By

Mr vivek bhambure sir

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attachments. KONE Elevators India Pvt Ltd, , , , PUNE, 411038

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720750112

●○ REDMI NOTE 9 ◇◇ AI QUAD CAMERA

KONE	Packaged Service	P	CONE
Repair			ARAF
Customer Name Site Name	KRISHNA INSTITUTE OF MEDICAL KRISHNA INSTITUTE OF MEDICAL	Address	KIMS, KARAD. KARAD
Contract Number	41231469	City	KARAD
Equipment Number	42361675	KONE Order	694894359 MADANE
Equipment ID		Attended by	AVINASH SHIVAJ

Below is a summary of the work performed during this job:

MX BRAKE SETTING

Job Description

10

 Customer Comments

 Arrived Time
 15/01/2020 15:21

 Work Completed Time
 15/01/2020 17:40

Customer Signature

No signature available.

Signed By

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REDMI NOTE 9
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Callout Record	KONE
Status Closed	KONE
Dispatch number	10874399
Caller Name / Time	MR. ASHOK at 19/06/2020 09:59
Customer Name	KRISHNA INSTITUTE OF MEDICAL
Site Name	KRISHNA INSTITUTE OF MEDICAL
Equipment Type	Elevator
Equipment ID	*
Equipment Number	42361675
Street	KIMS, KARAD, KARAD
Postal Code / City	415110 KARAD
Job Description	pana 40 not working properly stuck on adjust and rectify now lift running normally
Failure Description	BreakDown - Lift Not working
Fitter Name / Accepted Time	MADANE AVINASH SHIVAJI at 19/06/2020 10:38
Equipment Condition on Arrival	Not running - At floor - door open
Equipment Condition on Leaving	01 Equipment running, back to normal operation
Reason Code Description	Shutdown by safety-related device -
Action Code Description	Not applicable
Customer Comments	
Arrived Time	19/06/2020 10:38
Work Completed Time	19/06/2020 12:30

Customer Signature

10874399

Signed By

140

Mr mane sir

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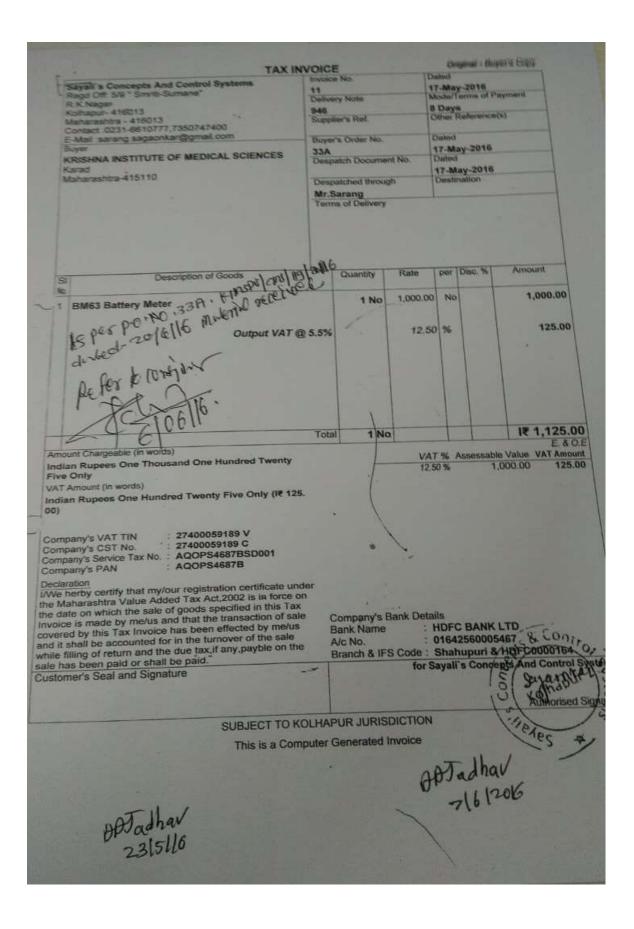
Site Name Contract Number Equipment Number Equipment ID	KRISHNA INSTITUTE OF MEDICAL KRISHNA INSTITUTE OF MEDICAL 41231469 42361675 - ary of the work performed during this job:	Address City KONE Order Visit Date Attended by	KIMS, KARAD, KARAD 667718466 13/5/2019 MADANE AVINASH SHIVAJI
mx brake setting Customer Comm Arrived Time Finished Time			
Customer Signa	467715465		
Signed By	Mr Bhambure sir	t are intended for the e	clusive use of the addressee and
contain confidential of it issemination and any of error, please delete the revent the transmission end and receive emails ttachments.	on contained in this message or files attached to it egally privileged information. If you are not the into ther corresponding action in respect of this commensage and notify the sender immediately. The nof viruses; however, we cannot guarantee that is on the basis that we are not be liable for any low vt Ltd.,, PUNE, 411038 2; Fax: , www.kone.com, konein@kone.com	nank you. Please note	that we take reasonable precautio

AI QUAD CAMERA

CALIBRATION REPORT

1) BATTERY METER New Purchase Meters

	TAX INV	0101	e			- Buyer's Copy
	Sayali's Concepts And Control Bystems	Inveno	n No.		Dated 13-May-201 Mode/Terms	
1	Sayali's Concepts And Control Bystems Rept Off 5/9 * Smith Sumane" R X Nager	Delive 945	ny Nobs	1	8 Days Other Refere	of Payment
6	Michierashtra - 416013	Suppl	lion's Ref. 2	8	Other Refer	auca(s)
	Mas saving and contained of the cont	Buye	ra Order No.		Dated	Se State State
10	REISHNA INSTITUTE OF MEDICAL SCIENCES	Desp	atch Docume	nt No.	Dated	116
N	daharashtra-415110		atched throug	ahs	13-May-20 Destination	
		Mr.N	attin a of Delivery			
US.		1	Quantity	Rate	per Disc.	& Amount
No T	Insulation Tester (Digital)Make-Meco,Model		1 No	1,150.00	No	1,160.00
2	-DIT99E Digital ClampmeterModel27T Auto(400A)		3 No	1,050,00	No .	3,150.00
-	Make: Meco DIGITAL CLAMPMETER Model 2502T Auto(1000	(AC	2 No	1,600.00	No	3,200.00
-	Make Meco Lux Meter Model 930/930P		1 No	2,000.00	D NO	2,000.00
5	Make Meco Clamp Meter DT2250hz		2 No	2,150.0	0 No	4,300.00
				1		13,800.00
	Output VAT @1	2.5% Total		12.5	50 %	1,725.00 I₹ 15,525.00
AT AT A A A A A A A A A A A A A A A A A	e Only Amount (in words) an Ruppes One Thousand Seven Hundred Twenty o Only (if 1,725.00) spany's VAT TIN ± 27400059189 V party's Service Tax No. ± 27400059189 V party's Service Tax No. ± AQOPS46877BSD001 party's PAN ± AQOPS46877B amon Three Centry that my/our registration certificate under ate on which the sale of goods specified in this Tax ce is made by me/os and that the transaction of sale of the tax Invoice has been effected by me/us thing of return and the due tax, if any, paybe on the tas been paid or shall be paid mer's Seal and Signature	G BA B		Code S	s DFC BANH 164266000 hahupuri i yali's Conc	LTD 2015 & Co, 15467 2010 & Co, 2010 And Control Syn A Can Shi a Control Syn A Can Shi a Control Syn A Control Syn Control Syn Con
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	INICAL SERV R344-35, Sant Tukaram A Telefax: 020-274211 774055755, 777405585 e1010@gmail.com abletechnicals.com ON CERTIFICA Page No. Centificate No. Date of Received Date of Calibration Due On Calibration method No. Range Least Count Type Location UUC Reading VDC 2.0	TE - 1 of 1 - 17,07,05,003 - 05,07,2017 - 05,07,2017	
CALIBRATI dical Sciences - 23.5 - 54 - In Lab/On site - OK - Battery Meter - KIMSDUIPH/BMI-01 - Meco - BMI-63 - 6% DMM - 70 (2017) - 70 (2017	ON CERTIFICA Page No. Certificatie No. Date of Calibration Next Calibration Due On Calibration method No. Range Least Count Type Location UUC Reading VDC	TE - 1 of 1 - 17.07.05.003 - 05.07.2017 - 04.07.2018 - RTS-WI-03 (A - Selectable - Selectable - Selectable - Analog - Power House Error in	Expanded Unc. In ±
- 23.5 - 54 - In Lab/On site - OK - Battery Meter - KIMSDUIPH/684-01 - Meco - 8M-63 - 6% DMM - 6% DMM - 6% DMM - CC/ECL/0709/16-17 - IDEMI - TW00005089 - 16.07.2017 - - Standard Reading VDC - 2.03	Certificate No. Date of Received Date of Calibration Next Calibration Due On Calibration method No. Range Least Count Type Location	- 1 of 1 - 17.07.05.003 - 05.07.2017 - 05.07.2017 - 04.07.2018 - RTS-WI-03 (A - Selectable - Analog - Power House Error in	Expanded Unc. In ±
- 23.5 - 54 - In Lab/On site - OK - Battery Meter - KIMSDUIPH/684-01 - Meco - 8M-63 - 6% DMM - 6% DMM - 6% DMM - CC/ECL/0709/16-17 - IDEMI - TW00005089 - 16.07.2017 - - Standard Reading VDC - 2.03	Certificate No. Date of Received Date of Calibration Next Calibration Due On Calibration method No. Range Least Count Type Location	- 1 of 1 - 17.07.05.003 - 05.07.2017 - 05.07.2017 - 04.07.2018 - RTS-WI-03 (A - Selectable - Analog - Power House Error in	Expanded Unc. In ±
- In Lab/On site - OK - Battery Meter - KIMSDUIPH/BM-01 - Meco - BM-63 used for calibration - 6% DMM - CC/ECL/0709/16-17 - IDEMI - TW00005089 - 16.07.2017 - - Standard Reading VDC 2.03	Use of Calibration Next Calibration Due On Calibration method No. Range Least Count Type Location	- 05.07.2017 - 04.07.2018 - RTS-WI-03 (A - Selectable - Selectable - Analog - Power House Error in	Expanded Unc. In ±
- KIMSDUIPHIBM-01 - Meco -BM-63 used for calibration - 6% DMM - CC/ECL/0709/16-17 - IDEMI - TW00005089 - 16.07.2017 - - Standard Reading VDC 2.03	Least Count Type Location	- Selectable - Analog - Power House Error in	Expanded Unc. In ±
- 63% DMM - CC/ECL/0709/16-17 - IDEMI - TW00005089 - 16.07.2017 - - - Standard Reading VDC 2.03	VDC		
Standard Reading VDC 2.03	VDC		
VDC 2.03	VDC		
2.03		1 000	
12.11	6.0 12.0	-0.03 -0.08 -0.11	0.06 0.06 0.06
rresponds to a coverage probab the particular item submitted to ted in the certificate are valid at ted as per customer specificatio eproduced, except in full unless choiced Manager of 'Reliable To	ility of approximately 95% for x calibration. UUC stands for the time of and under the sta ns. s written permission for the pu echnical Services, Pune".	normal distribution Unit Under Calibra ted conditions of m blication of an app Approved Technical	By Bauly
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	CALIBRAT	International Company		
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Const Dat Satara-415110			> 1 of 1	
The second se	- 23.7	Certificate No.	- 18.07.03.002	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
ecation of calibration	- 49	Date of Received Date of Calibration	- 03.07.2018	and the second second
Contract of Items	- In Lab/On site		- 03.07.2018	
Description of Item		Calibration method No.	- RTS-WI-03 (A	0
lame	- Battery Meter			
NO uke	- KIMSDU/PH/BM-01	Range Least Count	> Selectable	
and a second		Type	:- Selectable	
a Freedomenant		Location	- Analog - Power House	
Details of Equipment u	- 6½ DMM		- COMBI PICOSE	
me stificate No.	- CC/ECL/0701/17-18			
tified By	:- IDEMI			
Kr NO.	:- TW00005089			
bration Validity	- 06.07.2018			
alibration Results	3-	and the second second		
Calibration Points	Standard Reading	1.000		
VDC	VDC	UUC Reading VDC	Error in	Expanded Unc. In ±
2	2.02	2.0	-0.02	VDC 0.06
	6.06	6.0	-0.02	0.06
10.01	12.10			
12	12.10 e expanded uncertainty in me esponds to a coverage proba	12.0	-0.10	0.06
12 ereported uncertainty is the age factor k=2, which corr is certificate refers only to calibration results reports bration point were selected is certificate shall not be re- ten obtained from the Teo		12.0 asurement obtained by multiply ibility of approximately 95% for for calibration. UUC stands for at the time of and under the sta ions. ss written permission for the pu Technical Services, Pune".	-0.10 ing the standard u normal distribution Unit Under Calibra ted conditions of m approved Approved Technica	ncertainty by the stion. leasurement. roved abstract
12 reported uncertainty is the log factor k=2, which corr calibration results reporte bration point were selecte certificate shall not be re en obtained from the Tec Standard used are tracea ated By Surfuences	e expanded uncertainty in me esponds to a coverage proba- the particular item submitted ed in the certificate are valid a ed as per customer specificat produced, except in full unlet hnical Manager of "Reliable able to National / International Balance (Reliable)	12.0 asurement obtained by multiply ibility of approximately 95% for for calibration. UUC stands for at the time of and under the sta- ions. ss written permission for the pu Technical Services, Pune". Standard.	-0.10 ing the standard u normal distribution Unit Under Calibra ted conditions of m approved Approved Technica	ncertainty by the stion. easurement. roved abstract By L Manager

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Krishna Institute Of M	edical Sciences	Page No.	ATE	
Deemed University, Karad Dist Satara- 415110			- 1 of 1	State of the local division of the local div
Temperature (°C)	2.24.0	Certificate No. Date of Received	- 19.06.25.002	
Relative Humidity (% R)	1) :- 51	Date of Calibration	- 25.06.2019	
Location of calibration	- In Lab/On site	Next Calibration Due O	- 25.06.2019 n :- 24.06.2020	
2. Description of Item	- OK	Calibration method No.	- RTS-WI-03 (A)
Name	- Battery Meter			100 million (1990)
ld No Make	- KIMSDU/PH/Phanes	Range	- Selectable	
AND CONTRACTOR	- Maco -BM-63	Least Count Type	:- Selectable	
		Location	- Analog	
3.Details of Equipment	used for calibration		:- Power House	0
NOT THE	- 6% DMM	and a second of the		
Certificate No.	:- CC/ECL/0615/18-10			
tertified By D/Sr. No.	- IDEMI			
alibration Validity	- TW00005089 - 04.07.2019			
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	Charles and the second s			
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VDC 2 6 12 e: reported uncertainty is the rage factor k=2, which corre	VDC 2.02	VDC 2.0 6.0 12.0	VDC -0.02 -0.05 -0.08	VDC 0.06 0.06 0.00

2) CLAMP METER

		Telefas : 020-2 ett : 7709196666, 777405 E-mail : reliable1010 Web. : www.reliable1	AL SERVICES 49772834-35 m, Pune - 411018. 421170 5755, 7774055855 Regmail.com	C DALLES	(43)
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ALC: NO.	Humidity (%RH	- 22.4	COMP OF RECENTION	- 17 07 05 001	
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andition	n of Item	- OK	Calibration method N	0 RTS-WI-02, 03 (
Dercei	iption of Item			11.1. WI-02. 03 (1,07
me	Distance Local S	- Clamp Meter	and the second s		
No		- KIMSDILIDLUCAL	Range	- Selectable	
Ace & N	lodel	- Meco -2502T-Auto	Least Count	> Selectable	
			Location	- Digital	
etails .	of Equipment	used for calibration			
ne		- Universal Calibrator	Resistance Box	Universal Calibrat	
ficate fied B r. No. ration	y :	- CC/ECL/0695/16-17 - IDEMI - 20090604 - 05.07.2017	CC/ECL/0702/16-17 IDEMI 20160610 11.07.2017	CC/ECL/0698/16- IDEMI 20090604 11.07.2017	
ibrati					
	on Results	5-			
Volt	age	Contraction of the second	T INCO		
		Standard Reading	UUC Reading	Error in	
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volt nge m∨ v v	Cal Points 100 1 10	Standard Reading 100.00 1.0000 10.00	100.3 1.005 10.07	Error in 0.3 0.005 0.07	Uncertainty 0.31 0.03 0.60
volt nge m∨ v v v	age Cal Points 100 1 10 100	Standard Reading 100.00 1.0000 10.00 100.00	100.3 1.005 10.07 100.9	Error in 0.3 0.005 0.07 0.9	Uncertainty 0.31 0.03 0.60 0.64
Wolt nge mV V V V V	age Cal Points 100 1 10 100 500	Standard Reading 100.00 1.0000 10.00	100.3 1.005 10.07	Error in 0.3 0.005 0.07	Uncertainty 0.31 0.03 0.60
Volta	age Cal Points 100 1 10 100	Standard Reading 100.00 1.0000 10.00 100.00	100.3 1.005 10.07 100.9	Error in 0.3 0.005 0.07 0.9 102	Uncertainty 0.31 0.03 0.60 0.64 2.30 Expande
Volta	age Cal Points 100 1 100 500 ge , 50 Hz	Standard Reading 100.00 1.0000 10.00 100.00 500.0	100.3 1.005 10.07 100.9 602	Error in 0.3 0.005 0.07 0.9 102	Uncertainty 0.31 0.03 0.60 0.64 2.30 Expande Uncertain 0.02
Wolt nge mV V V V	age Cal Points 100 1 100 500 ge , 50 Hz Cal Points 1	Standard Reading 100.00 1.0000 10.00 100.00 500.0 Standard Reading	100.3 1.005 10.07 100.9 602 UUC Reading	Error in 0.3 0.005 0.07 0.9 102 Error in 0.002 0.05	Uncertainty 0.31 0.03 0.60 0.64 2.30 Expande Uncertain 0.02 0.20
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2. Descrip Name Id No Make & M		- Clamp Meter - KIMSDU/PH/CM-01 - Meco -2502T-Auto	Least Count Type	- Selectable - Selectable - Digital - Power House	
		- IDEMI	IDEMI 20090604		
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ID/Sr. No. Calibration 4.Calibrati A) DC Volt Range 200 mV 2 V 20 V 20 V 200 V 1000 V	Validity age Cal Points 100 1 10 100 900	- 02.07.2019 :- Standard Reading 100.00 1.0000 10.00 10.00 900.0	02.07.2019 UUC Reading 100.3 1.002 10.07 100.8 902	0.3 0.002 0.07 0.8 2	Uncertainty : 0.32 0.03 0.60 0.65 2.25
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Name		- Clamp Meter		Contraction of the local division of the loc	
id No Make & N	fodel	- KIMSDU/PH/CM-01 - Meco -2502T-Auto	Range Least Count Type Location	:- Selectable :- Selectable :- Digital :- Power House	
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Range	Cal Points	Standard Reading	UUC Reading	Error in	Expanded Uncertainty ±
200 mV 2 V 20 V 200 V 1000 V	100 1 10 100 900	100.00 1.0000 10.00 100.00 900.0	100.2 1.004 10.08 100.9 902	0.2 0.004 0.08 0.9 2	0.31 0.03 0.60 0.65 2.25
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Range	Cal Points	Standard Reading	UUC Reading	chorm	Uncertainty ±
2 V 20 V 200 V 1000 V	1 10 100 900	1.0000 10.00 100.00 900.0	1.002 10.05 100.7 901	0.002 0.05 0.7 1	0.02 0.20 0.98 2.81
	ent, 50 Hz			Error in	Expanded
Range	Cal Points	Standard Reading	UUC Reading	0.004	Uncertainty : 0.02
2 A 20 A 200 A 1000 A	1 10 100 900	1.0000 10.00 100.00 900.0	1.004 10.06 100.8 902	0.06 0.8 2	0.20 0.98 0.98
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Range	Cal Points	Standard Reading	LAUSE		Page No 2
200 0	100	100	UUC Reading	Error in	Expanded
2 KO 20 KD	10	1	100.3	0.3	Uncertainty 0.50
200 kΩ	100	100	10.09	0.005	1.16
2 MQ 20 MQ	10	1	100.9	0.9	0.12
esta:	- 20 m 7 m	10	10.11	0.006	0.12
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2. Descrip Name Id No Make & Mi		- Clamp Meter - KIMSDU/PH/CM-01 - Meco -2502T-Auto	Range Least Count Type Location	- Selectable - Selectable - Digital - Power House	
Name Certificate Certified B D/Sr. No. Calibration	Validity	- UNIVERSAL CALIBRA - CC/ECL/0619/18-19 - IDEMI - 09050591 - 02.07.2019	T Universal Calibrator with CC/ECL/618/18-19 IDEMI 20090604 02.07.2019	icc	
Range	age Cal Points	Standard Reading	UUC Reading	Error in	Expanded Uncertainty ±
200 mV 2 V 20 V 200 V 1000 V	100 1 10 100 900	100.00 1.0000 10.00 100.00 900.0	100.3 1,002 10.07 100.8 902	0.3 0.002 0.07 0.8 2	0.32 0.03 0.60 0.65 2.25
	ige , 50 Hz		1	Error in	Expanded
Range	Cal Points	Standard Reading	UUC Reading	CHOUNT	Uncertainty
2 V 20 V 200 V 1000 V	1 10 100 900	1.0000 10.00 100.00 900.0	1.005 10.04 100.5 901	0.005 0.04 0.5 1	0.02 0.20 0.98 2.62
AC Curre Range	Cal Points	Standard Reading	UUC Reading	Error in	Expande
2 A 20 A	1 10 100	1.0000 10.00 100.00 900.0	1.006 10.08 100.6 100.6	0.006 0.08 0.6 2	0.02 0.20 0.98 0.98

3) Clamp Meter 2

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Details of Equipment used for calibration Certificate No. CC/ECL/0595/18-17 Resistance Box CC/ECL/0595/18-17 Universal Calibrator with CC Certificate No. CC/ECL/0595/18-17 DEM DEM CC/ECL/0595/18-17 DSr. No. 20050604 20160610 20050604 20050604 Calibration Validity 05.07.2017 11.07.2017 10.07.2017 Calibration Results A) DC Voltage Universal Calibrator with CC Zabration Validity 05.07.2017 11.07.2017 11.07.2017 200 mV 100 100.00 100.1 0.1 0.31 2 V 1 1.0000 1.004 0.004 0.03 2 N 10 100.00 100.8 0.8 0.05 2 N 1	PROSE & INC		Meco -25021-Auto	Туре		
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20 V 10 10.00 10.00 10.09 0.6 0.8 0.98 200 V 100 100.00 100.6 0.6 0.8 0.9 0.9 0.9 0.9 0.9 0.9 0.9 0.9 0.9 0.9 0.9 0.9 0.9 0.9 0.9 0.9	2 V 20 V 200 V 1000 V B) AC Volt	10 100 500 age , 50 Hz	100.00 500.0	100.8 501 UUC Reading	1 Error in	2.29 Expanded Uncertainty
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Range Cal Points Standard Heating Uncertain 2 A 1 1.0000 1.003 0.003 0.02 20 A 10 10.00 10.04 0.04 0.20 20 A 10 100.00 100.8 0.6 0.98 200 A 100 500.0 503 3 0.99	2 V 20 V 200 V 1000 V 3 AC Volt Range 2 V 20 V 20 V 20 V	10 100 500 age , 50 Hz Cal Points 1 10 100	100.00 500.0 Standard Reading 1.0000 10.00 100.00	100.8 501 UUC Reading 1.003 10.04 100.6	1 Error in 0.003 0.04 0.6	2.29 Expanded Uncertainty 0.02 0.20 0.98
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RELIABLE TECHNICAL SERVICES

(Division of Reliable Technocare Pvt. Ltd.) Division of Reliable Technocare Pvt. Ltd., *RELIABLE HOUSE 497/2834-35, Sant Tukaram Nagar, Pimpri, Pune 411018, MH, India. Telefax : 020-27421170 Cell : 7774053755, 7774058855, 7774058855, 7774022900 sall : reliable10100gmail.com / reliabletechnocaredgmail.cr Web, : www.reliabletechnicals.com / www.reliable.world



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19.06.25.001 12 14/14

Range	Cal Points	Standard Reading	UUC Reading	Error in	Expanded Uncertainty in
200 Ω	100	100	100.3	0.3	0.50
2 kΩ	1	1	1.003	0.003	1.16
20 kΩ	100	100	10.05	0.05	0.12
200 kΩ	100	100	10.05	0.5	1.16
2 MΩ	1	1	1.006	0.006	0.12
20 MΩ	10	10	10.11	0.11	1.16

Note: 1) The reported uncertainty is the expanded uncertainty in measurement obtained by multiplying the standard uncertainty by the civerage factor *k* =2, which corresponds to a coverage probability of approximately 95% for normal distribution 2) This certificate refers only to the particular item submitted for calibration. U/C stands for Unit Under Calibration. 3) The calibration results reported in the certificate are valid at the time of and under the stated conditions of measurement. 4) Calibration point were selected as per customer specifications. 5) This certificate shall not be reproduced, except in full unless written permission for the publication of an approved abstract. Item certificate shall not be reproduced, except in full unless written permission for the publication of an approved abstract. Item certificate used are traceable to National / International Standard.

Calibrated By

Pisable .

Assistant Technical Manager Rahul Soble



Approved By

Sm_. Technical Manager SACHIN A. MHASAWADA

RF-21, R0 UNE I BRANKSHING MANAGEMENT MANAGEMENT

R	S REL	IABLE TECHNIC/ RELIABLE HOUSE 40 ret Tukaram Nager Pomor Telefax 020 27 di 17774055755 17714055 E-mail : reitablet0100 Web : www.retiablet00	Pune 411018. 21170 855.7774058855 97588.com	CONCERNING AND	
TCUST	OMER	CALIBRATI	ON CERTIFICAT		2440244024463
	Humidity (%RH of calibration of item	10 23.2 54 In Lab/On Site OK	NABI According	- 1012 - C-0692 - 18.07.03.003 - 03.07.2018 - 03.07.2018	A), 07
Name		- Clamp Meter - KIMSDU/PH/CM-02	Range		
Make & I		- Meco-27-Auto - Digital	Least Count	> As per Manual - As per Manual	The second
	of Equipment	used for calibration			
Canifodia Destilled B DIST No. Castration	a Mai. Ay	- CC/ECL/0699/17-18 - IDEMI - 20090604 - 04.07.2018		Universal Calibrat CC/ECL/0700/17- IDEMI 20090604	
A Calibrat	ion Results	2		05.07.2018	
A DC Vol Range	Cal Points	Standard Reading	1	100 million (1999)	
	1	1.0000	UUC Reading	Error in	Expanded Uncertainty ±
2V 20V	10	10.00	1.999	0.999	0.03
200 V 500 V	550	100.00	99.8 549	-0.2	0.65
BLAC Volt	age , 50 Hz Cal Points	Standard Reading			
Range			UUC Reading	Error in	Expanded Uncertainty ±
2V 20 V	1	1.0000	1.998	0.998	0.02
205 V	100	100.00 550.0	99.4 548	-0.6	0.98
STO V	550 ent , 50 Hz	550.0	040	-2	2.01
Range	Cal Points	Standard Reading	UUC Reading	Error in	Expanded Uncertainty ±
2.4	1	1.000	0.996	-0.004	0.43
20 A	10	10.00	9.92	-0.08	1.60 .
20 4	100	100.0 400.0	CAL 399	-1	8.00
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Destrates	WATER OF MUCH	oal Sciences	Page No.	1 of 2	
No. of Concession, Name	at Satara-4151	10	Cartificate No.	CC-2927 19.06.25.005	-
and the second second	ure (*C) Jumidity (%RH	> 22.6	Date of Received	25.06.2019	
and the second second	of calibration	- In Lab/On Site	Date of Calibration Next Calibration Due On	25.06.2019	
Condition	of Hern	- OK	Caubration method No.	RTS-WI-02, 03 (A).	07
Descrit	tion of Item		ULR No.	CC2927190000112	31F
lama		- Clamp Meter	Daniel		
d No Auko & M		- KIMSDU/PH/CM-02 - Meco-27-Auto		- As per Manual - As per Manual	
yuke a m	over	- Digital		- yes per manual	
	of Equipment	used for calibration			
Carrow C		- UNIVERSAL CALIBRA	T(Universal Calibrator with C		
ertificate			CC/ECL/618/18-19	C	
ertified B	Y	- IDEMI - 09050591	IDEMI		
Sr. No.		- 02.07.2019	20090604		200
			02.07.2019		1000
Calibrati	on Results	3+			
Calibration DC Volta Range	on Results age Cal Points	:- Standard Reading	UUC Reading	Error in	Expanded
DC Volt Range	age Cal Points	Standard Reading			Uncertainty ±
DC Volt Range 2 V	Cal Points	Standard Reading	1.999	0.999	the second se
2 V 20 V	age Cal Points	Standard Reading			Uncertainty ± 0.03
2 V 20 V 200 V 200 V	Cal Points 1 10 100 550	Standard Reading 1.0000 10.00	1.999 9.95	0.999 -0.05	Uncertainty ± 0.03 0.60
2 V 20 V 200 V 200 V	Cal Points 1 10 100 550 100 550	Standard Reading 1.0000 10.00 100.00 550.0	1.999 9.95 99.7 549	0.999 -0.05 -0.3 -1	Uncertainty ± 0.03 0.60 0.65 2.27
2 V 20 V 200 V 200 V	Cal Points 1 10 100	Standard Reading 1.0000 10.00 100.00	1.999 9.95 99.7	0.999 -0.05 -0.3	Uncertainty ± 0.03 0.60 0.65
2 V 20 V 20 V 200 V 500 V AC Volta tange	Cal Points 1 10 100 550 100 550	Standard Reading 1.0000 10.00 100.00 550.0	1.999 9.95 99.7 549 UUC Reading 1.996	0.999 -0.05 -0.3 -1 Error in 0.996	Uncertainty ± 0.03 0.60 0.65 2.27 Expanded Uncertainty ± 0.02
DC Volt Range 2 V 20 V 200 V 500 V AC Volta tange 2 V	Cal Points 1 10 100 550 ge , 50 Hz Cal Points	Standard Reading 1.0000 10.00 100.00 550.0 Standard Reading	1.999 9.95 99.7 549 UUC Reading 1.996 9.95	0.999 -0.05 -0.3 -1 Error in 0.996 -0.05	Uncertainty ± 0.03 0.60 0.65 2.27 Expanded Uncertainty ± 0.02 0.20
DC Volt Range 2 V 20 V 200 V 200 V 200 V 200 V 200 V 200 V 200 V 20 V 2	age Cal Points 1 10 100 550 see , 50 Hz Cal Points 1	Standard Reading 1.0000 10.00 100.00 550.0 Standard Reading 1.0000	1.999 9.95 99.7 549 UUC Reading 1.996 9.95 99.3	0.999 -0.05 -0.3 -1 Error in 0.996 -0.05 -0.7	Uncertainty ± 0.03 0.60 0.65 2.27 Expanded Uncertainty : 0.02 0.20 0.98
DC Volt Range 2 V 20 V 200 V 500 V AC Volta tange 2 V 20 V 200 V 500 V 200 V	age Cal Points 1 10 100 550 ge , 50 Hz Cal Points 1 10 100 550	Standard Reading 1.0000 10.00 100.00 550.0 Standard Reading 1.0000 10.00 10.00	1.999 9.95 99.7 549 UUC Reading 1.996 9.95	0.999 -0.05 -0.3 -1 Error in 0.996 -0.05	Uncertainty ± 0.03 0.60 0.65 2.27 Expanded Uncertainty ± 0.02 0.20
DC Volt Range 2 V 20 V 200 V 500 V AC Volta Range 2 V </td <td>age Cal Points 1 10 100 550 ge , 50 Hz Cal Points 1 10 100 550 nt , 50 Hz</td> <td>Standard Reading 1.0000 10.00 100.00 550.0 Standard Reading 1.0000 10.00 100.00 550.0</td> <td>1.999 9.95 99.7 549 UUC Reading 1.996 9.95 99.3 548</td> <td>0.999 -0.05 -0.3 -1 Error in 0.996 -0.05 -0.7</td> <td>Uncertainty ± 0.03 0.60 0.65 2.27 Expanded Uncertainty : 0.02 0.20 0.98</td>	age Cal Points 1 10 100 550 ge , 50 Hz Cal Points 1 10 100 550 nt , 50 Hz	Standard Reading 1.0000 10.00 100.00 550.0 Standard Reading 1.0000 10.00 100.00 550.0	1.999 9.95 99.7 549 UUC Reading 1.996 9.95 99.3 548	0.999 -0.05 -0.3 -1 Error in 0.996 -0.05 -0.7	Uncertainty ± 0.03 0.60 0.65 2.27 Expanded Uncertainty : 0.02 0.20 0.98
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DC Volt Range 2 V 200 V	age Cal Points 1 10 100 550 cal Points 1 10 100 550 nt , 50 Hz Cal Points	Standard Reading 1.0000 10.00 100.00 550.0 Standard Reading 1.0000 10.00 100.00 550.0 Standard Reading 1.0000 10.00 10.00 Standard Reading	1.999 9.95 99.7 549 UUC Reading 1.996 9.95 99.3 548 UUC Reading UUC Reading	0.999 -0.05 -0.3 -1 Error in 0.996 -0.05 -0.7 -2 Error in Error in	Uncertainty ± 0.03 0.60 0.65 2.27 Expanded Uncertainty : 0.02 0.20 0.98 2.60 Expanded Uncertainty 0.43

4) Clamp Meter

A COMPANY	100.00	Contraction of the second s	IN CEPTERSON		
	antifute Of Media	Cal Balance	ON CERTIFICATE		
Automatical State	a Batana: 415110		PADE Anna I	of 2	
1.000	un (95)	22.4		7.07.05.005	-
	THERE A CHARTER IN CONTRACTOR	178.	terms of Conferences		
Concession of the	COMPANY -	In Lab	PREMI Confidentiation Character	0.07.2017 04.07.2018	
Condition		OK	Calibration method No. > 1	RTS-WE02, 03 (A).	07
Descript	tion of Item	21	the second se		
Marriel		Clamp Meter KIMISDU/PH/CM-03	Range	-	
MARC & MA	sdel	Meco -27-Auto	Least Count	Selectable Selectable	
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A) DC Volt Range 200 mV 2 V 20 V	age Cal Points 100 1	Standard Reading 100.00 1.0000	100.2 1.004	0.2	Uncertainty ± 0.31 0.03 0.60 0.65
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	ption of Item			- RTS-WI-02, 03	(A), 07
Name No		- Clamp Meter - KIMSDU/PH/CM-03	Range		
Make & M	hoder	- Meco-27-Auto	Least Count	- As per Manual - As per Manual	
	of Equipment	used for calibration			
lame ertificate		- Universal Calibratas	And the second second	Haber	
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Calibrat	ion Results	*			
DC Vol	tage				
Range	Cal Points	Standard Reading	UUC Reading	Error in	Expanded Uncertainty ±
2 V 20 V	10	1.0000	1.998	0.998	0.03
200 V	100	100.00	99.7	-0.3	0.65
600 V	550	550.0	549	-1	2.28
AC Volt Range	age , 50 Hz Cal Points	Standard Reading	UUC Reading	Error in	Expanded
2 V	1	1.0000	1.999	0.999	Uncertainty ± 0.02
20 V	10	10.00	9.98	-0.02	0.20
00 V	100	100.00	99.7 546	-0.3	2.61
00 V	550	550.0			
ange	Cal Points	Standard Reading	UUC Reading	Error in	Expanded Uncertainty ±
2.0		1.000	0.998	-0.002	0.43
2A OA	1 10	10.00	9.97 99.6	-0.03	4.00 .
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		et Satara 4151 ure (*C) tumidity (%RH) of celibration of item etion of item edet of Equipment No. y Validity on Results age Cal Points 1 10 100 550 age , 50 Hz Cal Points 1 10 100 550 ent , 50 Hz Cal Points 1 10 100 550 ent , 50 Hz	at Satisra 415110 22.8 tumidity (%RH - 55 55 of calibration - In Lat/On Site of term - OK pillon of item - OK pillon of item - Clamp Meter - KIMSDU/PH/CM-03 - Meco-27-Auto - Digital - Meco-27-Auto odel - Meco-27-Auto - Digital - CC/ECL/0019/18-19 y - IDEMI - 09050591 - 09050591 Validity - 02.07.2019 on Results - age - Cal Points Standard Reading 1 1.0000 10 10.00 10 10.00 10 10.00 10 10.00 10 10.00 10 10.00 10 10.00 10 10.00 10 10.00 10 10.00 10 10.00 10 10.00 10 10.00 10 10.00 10	at Saters 415110 NABL Accreditention No. Calibration Store une (*C) -22.8 Date of Recensed - tamidity (%ER)+ 55 Date of Calibration Store - of calibration - In Lab/On Site Date of Calibration Store - of them - OK Date of Calibration Store - pition of Rem - Clamp Meter - - - KIMSDU/PH/CM-03 Range - - codel - Meco-27-Auto - - - of Equipment used for calibration - - - - No. - CC/ECL/0019/18-19 CC/ECL/018/18-19 - - y - IDEMI - 02.07.2019 02.07.2019 02.07.2019 on Results - - - - - - age - - - - - - Cal Points Standard Reading UUC Reading - - 10 10.00 <t< td=""><td>Art Stature Attention NABL Accreditation No. C.G.2927 une (C) 22.8 Date of Reserved 26.09.25.000 of term 0 Extension 25.09.2016 of term 0 K Date of Reserved 25.09.2016 of Equipment used for calibration 26.09.2016 20.09.2020 of Equipment used for calibration 26.09.2016 20.09.2016 of Equipment used for calibration 0 CC/ECL/0010/18-19 CC/ECL/010/18-19 20.090004 validity 0 2.07.2019 0 2.07.2019 0 2.07.2019 on Results 2 2 2 age Cal Points Standard Reading UUC Reading Error in 1 1.0000 9.98 -0.02 10 10.00 9.98 -0.02</td></t<>	Art Stature Attention NABL Accreditation No. C.G.2927 une (C) 22.8 Date of Reserved 26.09.25.000 of term 0 Extension 25.09.2016 of term 0 K Date of Reserved 25.09.2016 of Equipment used for calibration 26.09.2016 20.09.2020 of Equipment used for calibration 26.09.2016 20.09.2016 of Equipment used for calibration 0 CC/ECL/0010/18-19 CC/ECL/010/18-19 20.090004 validity 0 2.07.2019 0 2.07.2019 0 2.07.2019 on Results 2 2 2 age Cal Points Standard Reading UUC Reading Error in 1 1.0000 9.98 -0.02 10 10.00 9.98 -0.02	

5) Clamp Meter

RELIABLE TECHNICAL SERVICES TRELIABLE HOUSE" 497/2834-35, Sant Tukaram Nagar. Pimpri, Pume - 411018, Tetefax : 020-22421170 Cett : 7709196666, 7774055755, 7774055855 E-mail : retlable1010segmail.com Web. : www.retlabletechnicals.com And these is not [DAkks CALIBRATION CERTIFICATE and in CAL mas institute Of Medical Bolences and University. 9 Dist Satara-415110 Page No. 1 61 1 Certificate No Date of Received Date of Calibration 17 07 05 006 rature (°C) - 22.7 05.07.2017 we Humidity (%RH > 52 05.07.2017 Next Calibration Dup On - 04 07 2018 on of calibration - In Lab Calibration method No. > RTS-WI-02, 03 (A), 07 mon of item - OK Description of Item Multimeter Range Least Count Selectable KIMSDU/PH/MM-01 Selectable - Sanwa -YX-360 TRF te & Model Analog Power House Type Location Details of Equipment used for calibration Resistance Box CC/ECL/0702/16-17 Universal Calibrator aticate No. - CC/ECL/0695/18-17 ned By - IDEMI IDEMI - 20090604 20160610 St. No. - 05.07 2017 bration Validity 11.07.2017 Calibration Results DC Voltage Expanded UUC Reading Error in Standard Reading Cal Points tange Uncertainty ± % 0.10 -0.0005 5.0005 5 10 V 0.10 -0.003 30 30.003 50 V 250 V 30 0.10 200 -0.1 200.06 200 0.10 -1 1000 1001.0 V 0001 1000 AC Voltage , 50 Hz Expanded Error in **UUC Reading** Standard Reading Cal Points Uncertainty ± % lange 0.20 0.0003 5.0003 0.20 5 -0.005 10 V 30 30.005 0.20 -100.1 50 V 250 V 750 V 30 200 300.08 0.20 200 -1 750 751.0 750 IN REAL PROPERTY AND INCOME. IN CASE OF A DESCRIPTION OF

R	S RELL San Cel	ABLE TECHNICA RELIABLE HOUSE 497 Telefax: 020-2743 Totefax: 020-2743 7774055755, 7774055 E-mail: retiable101000 Web.: www.retiabletec	Pune 411018. 21170 355,7774058855 8mail.com hnicals.com	ATTRICATION 001:2015 VCRISOTERY MCRISOTERY MCRISOTERY	
	MER	CALIBRATI	ONCEPT] [[_]64	ent Conna Connel
Karad ,Di Temperat Relative H Location C Condition	st.Satara-415111 ure (°C)	0	Date of Calibrati :- 0	03.07.2018 03.07.2018 03.07.2018	, 07
2. Descrip	ntion of Item	01			
Name Id No Make & M Type	odel :- ;-	Clamp Meter KIMSDU/PH/CM-04 Fluke-303 Digital sed for calibration		As per Manual As per Manual	
Certificate Certified B D/Sr. No. Celibration	y i-	CC/ECL/0699/17-18 IDEMI 20090604 04.07.2018	Universal Calibrator with Co CC/ECL/0700/17-18 IDEMI 20090604 05.07.2018		
DC Volt	age				
Range	Cal Points	Standard Reading	UUC Reading	Error in	Expanded
600 V	10 100 300 400 590	10.00 100.00 300.00 400.00 590.00	9.6 99.7 299.6 399.3 589.2	-0.4 -0.3 -0.4 -0.7 -0.8	Uncertainty ± 0.31 0.31 0.13 0.60 0.65
000 0	000				
					Expanded
AC Volta	ge , 50 Hz Cal Points	Standard Reading	UUC Reading	Error in	Uncertainty ±
	ge , 50 Hz Cal Points 10 100 300 400	10.000 100.00 300.00 400.00	UUC Reading 9.8 99.5 299.4 399.2 589.1	-0.2 -0.5 -0.6 -0.8 -0.9	Control Control of Con
AC Volta Range	ge , 50 Hz Cal Points 10 100 300 400 590	10.000 100.00 300.00	9.8 99.5 299.4 399.2 589.1	-0.2 -0.5 -0.6 -0.8 -0.9	Uncertainty ± 0.40 0.40 0.14 0.20 0.98
AC Volta Range	ge , 50 Hz Cal Points 10 100 300 400	10.000 100.00 300.00 400.00	9.8 99.5 299.4 399.2 589.1 UUC Reading	-0.2 -0.5 -0.6 -0.8 -0.9 Error in	Uncertainty ± 0.40 0.40 0.14 0.20 0.98 Expanded Uncertainty ±
AC Volta tange 00 V C Curre	10 10 100 300 400 590 nt, 50 Hz	10.000 100.00 300.00 400.00 590.00 Standard Reading 100.000	9.8 99.5 299.4 399.2 589.1	-0.2 -0.5 -0.6 -0.8 -0.9	Uncertainty ± 0.40 0.40 0.14 0.20 0.98 Expanded

TOMER to institute Of Me d University. Dist.Satara-4151 mature (°C) the Humidity (%RH on of calibration	10	N CERTIFICATE Page No.	12	
Dist. Setara- 4151 rature (°C) Humidity (%RH	10		22	
Dist. Setara- 4151 arature (°C) re Humidity (%RH				The second second
erature (°C) e Humidity (%RH		NABL Accreditation No C Certificate No 1	30-2927	1
e Humidity (%RH	- 22.6	The second se	19.06.25.004	
no of calibration	- 53	Date of Calibration	25.06.2019	and the second second
af lease		Next Calibration Due On :- 2	24.06.2020	~
ion of Item	:- OK	Catibration method No. :- ULR No.	RTS-WI-02, 03 (A). CC29271900001123	07 33F
cription of Item			GGESETTSGUGSTTS	
	- Clamp Meter	Range :-	As per Manual	
& Model	- KIMSDU/PH/CM-04	Least Count :-	As per Manual	
2 Million .	- Fluke-303 - Digital			-1- 141 201
De Tuta de La				
ils of Equipment	used for calibration			
ate No.	UNIVERSAL CALIBRATO		C	
d By	:- IDEMI	CC/ECL/618/18-19 IDEMI		
	:- 09050591	20090604		
NO.	:- 02.07.2019			
No. ition Validity		02.07.2019		
tion Validity		02.07.2019		
tion Validity		02.07.2019		
tion Validity pration Results Voltage	t -	02.07.2019 UUC Reading	Error in	Expanded
ition Validity pration Results Voltage ge Cal Points	:- Standard Reading	UUC Reading	Error in	Expanded Uncertainty ± 0.32
tion Validity pration Results Voltage ge Cal Points 10	:- Standard Reading 10.00			Uncertainty ± 0.32 0.32
tion Validity pration Results Voltage Ge Cal Points 10 100	:- Standard Reading	UUC Reading 10.0 99.8 299.7	0.0 -0.2 -0.3	Uncertainty ± 0.32 0.32 0.14
tion Validity ration Results Voltage Ge Cal Points 10 100 V 300	:- Standard Reading 10.00 100.00	UUC Reading 10.0 99.8 299.7 399.3	0.0 -0.2 -0.3 -0.7	Uncertainty ± 0.32 0.32 0.14 0.60
tion Validity vation Results Voltage Ge Cal Points 10 100		UUC Reading 10.0 99.8 299.7	0.0 -0.2 -0.3	Uncertainty ± 0.32 0.32 0.14
tion Validity voltage ge Cal Points 10 100 V 300 400 590 Voltage , 50 Hz	:- Standard Reading 10.00 100.00 300.00 400.00 590.00	UUC Reading 10.0 99.8 299.7 399.3 589.3	0.0 -0.2 -0.3 -0.7	Uncertainty ± 0.32 0.32 0.14 0.60 0.65 Expanded
tion Validity pration Results Voltage ge Cal Points 10 100 V 300 400 590 Voltage, 50 Hz	:- Standard Reading 10.00 100.00 300.00 400.00 590.00	UUC Reading 10.0 99.8 299.7 399.3	0.0 -0.2 -0.3 -0.7 -0.7 Error in	Uncertainty ± 0.32 0.32 0.14 0.60 0.65 Expanded Uncertainty ±
tion Validity pration Results Voltage ge Cal Points 10 100 V 300 400 590 Voltage , 50 Hz ge Cal Points	:- Standard Reading 10.00 100.00 300.00 400.00 590.00 Standard Reading	UUC Reading 10.0 99.8 299.7 399.3 589.3 UUC Reading 10.0	0.0 -0.2 -0.3 -0.7 -0.7 Error in 0.0	Uncertainty ± 0.32 0.32 0.14 0.60 0.65 Expanded
tion Validity voltage ge Cal Points 10 100 V 300 400 590 Voltage, 50 Hz ge Cal Points 10 100 100 100 100 100 100 100	:- Standard Reading 10.00 100.00 300.00 400.00 590.00	UUC Reading 10.0 99.8 299.7 399.3 589.3 UUC Reading 10.0 99.9	0.0 -0.2 -0.3 -0.7 -0.7 Error in 0.0 -0.1	Uncertainty ± 0.32 0.32 0.14 0.60 0.65 Expanded Uncertainty ± 0.40
tion Validity voltage ge Cal Points 10 100 V 300 400 590 Voltage, 50 Hz 10 10 100 100 100 100 100 100 100 100	:- Standard Reading 10.00 100.00 300.00 400.00 590.00 Standard Reading 10.000	UUC Reading 10.0 99.8 299.7 399.3 589.3 UUC Reading 10.0 99.9 299.7	0.0 -0.2 -0.3 -0.7 -0.7 Error in 0.0	Uncertainty ± 0.32 0.32 0.14 0.60 0.65 Expanded Uncertainty ± 0.40 0.41 0.41 0.14 0.20
tion Validity ration Results Voltage ge Cal Points 10 100 V 300 400 590 Voltage, 50 Hz 10 100 100 V 300		UUC Reading 10.0 99.8 299.7 399.3 589.3 UUC Reading 10.0 99.9 299.7 399.2	0.0 -0.2 -0.3 -0.7 -0.7 Error in 0.0 -0.1 -0.3	Uncertainty ± 0.32 0.32 0.14 0.60 0.65 Expanded Uncertainty ± 0.40 0.41 0.14
tion Validity voltage ge Cal Points 10 100 V 300 400 590 Voltage, 50 Hz ge Cal Points 10 100 V 300 400 590 Voltage, 50 Hz 0 10 100 V 300 400	:- Standard Reading 10.00 100.00 300.00 400.00 590.00 Standard Reading 10.000 100.00 300.00	UUC Reading 10.0 99.8 299.7 399.3 589.3 UUC Reading 10.0 99.9 299.7	0.0 -0.2 -0.3 -0.7 -0.7 Error in 0.0 -0.1 -0.3 -0.8	Uncertainty ± 0.32 0.32 0.14 0.60 0.65 Expanded Uncertainty ± 0.40 0.41 0.14 0.20 0.98
tion Validity voltage ge Cal Points 10 100 V 300 400 590 Voltage , 50 Hz ge Cal Points 10 100 V 300 400 590 Voltage , 50 Hz 10 10 100 590	:- Standard Reading 10.00 100.00 300.00 400.00 590.00 Standard Reading 10.000 100.00 300.00 400.00 300.00 400.00 590.00	UUC Reading 10.0 99.8 299.7 399.3 589.3 UUC Reading 10.0 99.9 299.7 399.2	0.0 -0.2 -0.3 -0.7 -0.7 Error in 0.0 -0.1 -0.3 -0.8	Uncertainty ± 0.32 0.32 0.14 0.60 0.65 Expanded Uncertainty ± 0.40 0.41 0.14 0.20 0.98 Expanded
tion Validity pration Results Voltage ge Cal Points 10 100 V 300 400 590 Voltage , 50 Hz Ge Cal Points 10 10 100 V 300 400 590 Voltage , 50 Hz 0 0 0 0 0 0 0 0 0 0 0 0 0	:- Standard Reading 10.00 100.00 300.00 400.00 590.00 Standard Reading 10.000 100.00 300.00 400.00 590.00 Standard Reading	UUC Reading 10.0 99.8 299.7 399.3 589.3 UUC Reading 10.0 99.9 299.7 399.2 589.3 UUC Reading UUC Reading	0.0 -0.2 -0.3 -0.7 -0.7 Error in 0.0 -0.1 -0.3 -0.8 -0.7 Error in	Uncertainty ± 0.32 0.32 0.14 0.60 0.65 Expanded Uncertainty ± 0.40 0.41 0.14 0.20 0.98 Expanded Uncertainty
tion Validity rration Results Voltage ge Cal Points 10 100 V 300 400 590 Voltage , 50 Hz 10 10 V 300 400 590 Voltage , 50 Hz 10 10 0 0 0 0 0 0 0 0 0 0 0 0 0	:- Standard Reading 10.00 100.00 300.00 400.00 590.00 Standard Reading 10.000 100.00 300.00 400.00 590.00 Standard Reading Standard Reading	UUC Reading 10.0 99.8 299.7 399.3 589.3 UUC Reading 10.0 99.9 299.7 399.2 589.3 UUC Reading UUC Reading UUC Reading	0.0 -0.2 -0.3 -0.7 -0.7 Error in 0.0 -0.1 -0.3 -0.8 -0.7 Error in Error in -0.1	Uncertainty ± 0.32 0.32 0.14 0.60 0.65 Expanded Uncertainty ± 0.40 0.41 0.14 0.20 0.98 Expanded
tion Validity rration Results Voltage ge Cal Points 10 100 V 300 400 590 Voltage, 50 Hz ge Cal Points 10 100 V 300 400 590 Current, 50 Hz e Cal Points 100 100		UUC Reading 10.0 99.8 299.7 399.3 589.3 UUC Reading 10.0 99.9 299.7 399.2 589.3 UUC Reading UUC Reading UUC Reading 99.9 299.7 399.2 589.3	0.0 -0.2 -0.3 -0.7 -0.7 Error in 0.0 -0.1 -0.3 -0.8 -0.7 Error in Error in -0.1 -0.3	Uncertainty ± 0.32 0.32 0.14 0.60 0.65 Expanded Uncertainty ± 0.40 0.41 0.14 0.20 0.98 Expanded Uncertainty 0.43
tion Validity ration Results Voltage ge Cal Points 10 100 V 300 400 590 Voltage, 50 Hz 10 Cal Points 10 V 300 400 590 Current, 50 Hz e Cal Points	:- Standard Reading 10.00 100.00 300.00 400.00 590.00 Standard Reading 10.000 100.00 300.00 400.00 590.00 Standard Reading Standard Reading	UUC Reading 10.0 99.8 299.7 399.3 589.3 UUC Reading 10.0 99.9 299.7 399.2 589.3 UUC Reading UUC Reading UUC Reading 99.9 299.7 399.2 589.3	0.0 -0.2 -0.3 -0.7 -0.7 Error in 0.0 -0.1 -0.3 -0.8 -0.7 Error in Error in -0.1	Uncertainty ± 0.32 0.32 0.14 0.60 0.65 Expanded Uncertainty ± 0.40 0.41 0.14 0.20 0.98 Expanded Uncertainty 0.43 1.60

6) Insulation Tester

RELIABLE TECHNICAL SERVICES "RELIABLE HOUSE" 497/2834-35. Sant Tukaram Nagar. Pimpri, Pune - 411018. Telefax: 020-27421170 Cell: 7709196666, 7774055755, 7774055855 E-mail: reliable10100gmail.com ----Web. : www.reliabletechnicals.com DAkks CALIBRATION CERTIFICATE CUSTOMER Institute Of Medical Sciences Page No. 1 of 1 ad Dist Satara 415110 Certificate No. mperature (°C) - 22 : utive Humidity (% RH) - 51 Date of Received Date of Calibration 17.07.05.004 - 22.5 - 05.07.2017 Next Calibration Due On - 04.07.2018 Calibration method No - RTS-WI-07 ation of calibration - In Lab/On site on of Item - OK Description of Item - Insulation Tester - KIMSDU/PH/DIT-01 Range Least Count Selectable - Meco -DIT-99E - Selectable take & Model Type - Digital - Power House Location Details of Equipment used for calibration - Resistance Box High Resistance Jig Certificate No. Certified By - CC/ECL/0702/16-17 16172525/ET/01 - IDEMI ASPI :- 20160610 DIST. No. 201609285 Calibration Validity :- 11.07.2017 12.09.2017 Calibration Results Exp. Uncertain Error in Test Voltage Standard Reading **UUC** Reading MQ MQ MQ 2.34 1 2.34 -3 197 200.0 2.34 -5 495 500.0 1000 V 2.34 7 993 1000.0 2.36 1991 -9 2000.0 1) The reported uncertainty is the expanded uncertainty in measurement obtained by multiplying the standard uncertainty by the coverage factor k = 2, which corresponds to a coverage probability of approximately 95% for normal distribution
 2) This certificate refers only to the particular item submitted for calibration. UUC stands for Unit Under Calibration. 3) The calibration results reported in the certificate are valid at the time of and under the stated conditions of measurement. a) This certificate shall not be reproduced, except in full unless written permission for the publication of an approved abstract () Calibration point were selected as per customer specifications. tas been obtained from the Technical Manager of "Reliable Technical Services, Pune") The Standard used are traceable to National / International Standard. Approved By Back Calibrated By Technical Manager man SACHIN A. MHASAWA Calibration Engineer ayur More RF-21, RO AL DESCRIPTION OF TAXABLE PARTY OF TAXABLE PARTY.

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1.CUSTOMER	CALIBRAT	ION CERTIFICAT		
Krishna Institute Of N	ledical Sciences	Page No.	E	and the second second
Deemed University, Karad ,Dist Satara- 41511 Temperature. (*C) Relative Humidity (% R Location of calibration Condition of Item 2, Description of Item	10 22.5 IH) 51 In Lab/On site OK	Certificate No. Date of Received Date of Calibration Next Calibration Due On	- 18.06.25.001 - 26.06.2018 - 26.05.2018	
Name	:- Insulation Tester			
ld No Make & Model	- KIMSDU/PH/DIT-01 - Meco -DIT-99E	Range Least Count Type Location	:- Selectable :- Selectable :- Digital :- Power House	
3.Details of Equipmen	nt used for calibration			
Name Certificate No. Certified By ID/Sr. No. Calibration Validity	- Resistance Box - VI/17-18/1823-02 - VI - 20160610 - 27-06-2018	High Resistance Jig CC/ECL/1133/17-18 IDEMI RTS-RB-05 13.09.2018		
4.Calibration Results	14			
Test Voltage	Standard Reading	UUC Reading	Error in	Exp. Uncertainty in
1000 V	MQ 100.0 200.0 500.0 1000.0 2000.0	<u>ΜΩ</u> 99 198 496 995 1993	<u>ΜΩ</u> -1. -2 -4 -5 -7	% 2.34 2.34 2.34 2.34 2.34 2.36
overage factor k =2, which c This certificate refers only The calibration results reputed and the calibration point were sele	the expanded uncertainty in measuresponds to a coverage probat to the particular item submitted for orted in the certificate are valid al acted as per customer specification a reproduced, except in full unless rechnical Manager of "Deltable T able to National / Information	asurement obtained by multiplyin bility of approximately 95% for n or calibration. UUC stands for L the time of and under the state ons. s written permission for the pub echnical Services, Pune".	ng the standard un ormal distribution Jnit Under Calibra d conditions of me	certainty by the tion. easurement.

	AND DESCRIPTION OF THE OWNER OWNER OF THE OWNER		 Sakar Talearan Stagar. Shakran (Stagar) Shakran (Stagar) Stagar (Stagar)	THE ALL STAT	CANTER ALS NO.
Keinsteren	MITTER.	CALIBRAT	ON CERTIFICATE		1 05-9997
		dical Sciences	Page No	a line	
		10	PARTER AN	~ 1 cf 1	and the second se
			Certificate No.	- CC-2927 - 19.05.25.003	and the second second
	umidity (% RH) calibration	>49	Date of Calibration	- 25.05.2019	1 1 1 1 1 1 1 1 1 1
		> In Lab		- 25.05.2019	
Descrip	tion of Item		Calibration method No. ULR No.	- RTE-WI-03 (43
INAMO		> Insulation Tester		- CC29271900	0011236F
Mana & Mo	and	- PUINSISENU//PUINS	Rango	- As per manu	al here
		- Meco -DIT-99E	Least Count	> As per manu	
Type		a distance of the second se	Losation		
3 Details of	Equipment u	sed for calibration	and the second se	> Power House	
ALATTAR		- Resistance fic-	High D.		
Certificate N Certified By	0.	- VI/18-19/5174-01	High Resistance Jig CC/ECL/711/18-19		
owir No.		- 20160610	IDEMI		
allonation V	alidity	- 13.11.2019	RTS-RB-05		
			15.07.2019		
Calibration est Voltage	Cal Point	Charles 1			
VDC	MO	Standard Reading MO	UUC Reading	Error in	Expanded Unc. In s
1000	20	20	MQ	MO	%
1000	200	200	19.98	-0.02	1.2
1000	500	500	499	-0.1	2.3
1000	2000	2000	1998	-2	2.4
e: A recorded ut	certainty is the	WY CLEVENCE CONTRACT OF A DESCRIPTION OF			
e reported un rage factor k is certificate e calibration ibration poin s certificate s ien obtained	refers only to the results reported t were selected thail not be report from the Techn	 particular item submitted for in the certificate are valid at t as per customer specification 	ity of approximately 65% for no calibration. UUC stands for Ur the time of and under the stated is written permission for the public chnical Services, Pune*.	mail distribution nit Under Calibre I conditions of me	ion. sasurament.
e reported un rage factor k is certificate e calibration libration poin s certificate s sen obtained	refers only to the results reported t were selected thail not be report from the Techn	particular item submitted for in the certificate are valid at t as per customer specification oduced, except in full unless ical Manager of "Reliable Ter e to National / International S	ity of approximately 65% for no calibration. UUC stands for Ur the time of and under the stated is written permission for the public chnical Services, Pune*.	mail distribution nit Under Calibre I conditions of me	lion. saturement. oved abstract
e reported un rege factor k la cestificate e calibration libration poin a certificate s en obtained Standard us ated By	refers only to the results reported t were selected thail not be repor- from the Techn red are traceable	provide to a coveringe probability of particular item submitted for in the certificate are valid at the as per customer specification oduced, except in full unless lical Manager of "Reliable Test	ity of approximately 65% for no calibration. UUC stands for Ur the time of and under the stated is written permission for the public chnical Services, Pune*.	rmal distribution nit Under Calibre Loonditions of me cation of an appr	tion. securement. oved abstract I By
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e reported un rege factor k la cestificate e calibration libration poin a certificate s en obtained Standard us ated By	refers only to the results reported t were selected thail not be repor- from the Techn led are traceable	particular item submitted for in the certificate are valid at t as per customer specification oduced, except in full unless ical Manager of "Reliable Ter e to National / International S	ity of approximately 65% for no calibration. UUC stands for Ur the time of and under the stated is written permission for the public chnical Services, Pune*.	mail distribution in Under Calibre I conditions of m cation of an appr Approvec <u>Sm</u> Technica	tion. securement. oved abstract I By

Complaint Summary Year 2016

Sr. No	Months	Complaints	Complaints Resolves
1	Jan	300	300
2	Feb	270	270
3	mar	380	380
4	Apr	350	350
5	may	370	370
6	Jun	480	480
7	Jul	346	346
8	Aug	457	457
9	Sep	456	456
10	Oct	286	286
11	Nov	312	312
12	Dec	283	283

Complaint Summery Year 2017

Sr. No	Months	Complaints	Complaints Resolves
1	Jan	273	273
2	Feb	222	222
3	mar	379	379
4	Apr	307	307
5	may	367	367
6	Jun	378	378
7	Jul	449	449
8	Aug	303	303
9	Sep	264	264
10	Oct	278	278
11	Nov	312	312
12	Dec	312	312

Complaint Summery Year 2018

Sr. No	Months	Complaints	Complaints Resolves
1	Jan	298	298
2	Feb	257	257
3	mar	424	424
4	Apr	313	313
5	may	394	394
6	Jun	500	500
7	Jul	431	431
8	Aug	326	326
9	Sep	357	357
10	Oct	360	360
11	Nov	314	314
12	Dec	332	332

Complaint Summery Year 2019

Sr. No	Months	Complaints	Complaints Resolves
1	Jan	372	372
2	Feb	365	365
3	mar	349	349
4	Apr	376	376
5	may	351	351
6	Jun	414	414
7	Jul	436	436
8	Aug	379	379
9	Sep	350	350
10	Oct	227	227
11	Nov	384	384
12	Dec	398	398

Sr. No	Months	Complaints	Complaints Resolves
1	Jan	418	418
2	Feb	372	372
3	mar	406	406
4	Apr	212	212
5	may	157	157
6	Jun	400	400
7	Jul	402	402
8	Aug	266	266
9	Sep	386	386
10	Oct	nil	nil
11	Nov	nil	nil
12	Dec	nil	nil

Complaint Summery Year 2020

	KIMSDU	Doc Number	KIMSDU/MAIN/SOP/01
Tanila share	Name of the Document Name of the		SOP
	Process/Areas		<u>CIVIL / MAINTENANCE</u>

CIVIL MAINTAINANCE

1] S.O.P. -

- After getting written or verbal requisition.
- Prepare what type of work.
- Consider type of work and then give letter to employees.
 1. Plumber 2. Car painter 3. Fabrication 4. Masonry
- Visit to site & arrange the material for that type of work & complete the work as early as possible.
- If more material required take material permission & sanction from Medical Director.
- Then order to store office.
- Collect the material & completed the work.

S.O.P

Civil / Maintenance Dept.

• सकाळी ९:०० ते ५:००

१] तक्रारीचे रजिस्ट्रर मध्ये नोंद केली जाते.

२] तक्रार कोणत्या स्वरुपाची आहे.त्याप्रमाणे त्यासाठी प्लंबर ,कारपेंटर ,गवंडी,वेल्डर यापैकी कोणते काम आहे ते पाहिले जाते.

३] नंतर त्याकामासाठी कामगार जाग्यावरती आहे.का ते पाहिले जाते.

४] नसेल तर त्या कामगारास फोन करून कळविले जाते.

५] नंतर त्याची ते काम करण्यास नेमणूक केली जाते.

६] त्याकामासाठी डिपार्टमेंटमधील स्टॉक मेंटेनन्समध्ये मटेरियल शिल्लक आहे का ते पाहिले जाते.

७] मेटेरीयल शिल्लक नसेल तर सी.एम.स्टोअरकडून मागविले जाते.

८] व ते मटेरियल घेऊन त्या कामगारास कामाच्या ठिकाणी पाठविले जाते.

९] तसेच काम पूर्ण झाले कि नाही याची मेंटेनन्स इनचार्ज /मुकादम/सुपरवायझर यांचे कडून केली जाते.

संध्याकाळी ५:०० ते सकाळी ९:००
 १] मेनगेट वरील विभाग फोन नंबर -२६४

२] त्या तक्रारीचे निवारण सकाळी ९:०० ते संध्याकाळी ५:०० वाजे पर्यंत केले जाते.

- सिव्हील मेंटेनन्स विभाग फोन नंबर -२६४
- सिव्हील ऑफिस फोन नंबर -२४१
- काही अत्यावश्यकता असल्यास खालील नंबरवरती फोन करावा.

१] झेले साहेब :- ९८ २३ १६ ८६ ६३ २] काशीद साहेब :- १०१९ / ९१ ७५ ३० ३६ ०९ ३] चव्हाण साहेब :- ९९ ७५ ७१ ३२ ७१ ४]डुबल साहेब :- १०२१/ ९५ ४५ ८८ ९० ४५

Canal Canal	KIMSDU	Doc Number	KIMSDU/MAIN/OBJ/03	Issue date	21/12/2013	
		Rev No	0.0	Issue No		
E grander dweere 3	Name of the Document	Objectives				
	Name of the Process/Areas	CIVIL / MAINTENANCE				

- After getting written, verbal requisitions.
- Complete the work as early as possible.
- Minor maintenance for i.e. leakages, plumbing complete work as priority basis within 24 hours.
- Some requisitions if requires material, take approval form medical director & collect the material from store & complete the work.

A REDICAL STREET	KIMSDU	Doc Number	KIMSDU/MAIN/R&R/04	Issue date	21/12/2013
		Rev No	0.0	Issue No	
E main training	Name of the Document	Rights & Responsibilities			
	Name of the Process/Areas	<u>CIVIL / MAINTENANCE</u>			

1) HOD :-

All requisitions issued form department & give instruction to maintenance engg. & supervise the work.

2) Maintenance Engg. :-

Getting instruction form HOD visit the site & complete the work with the help of employees. Arrange required material for same type of work supervision & complete work.

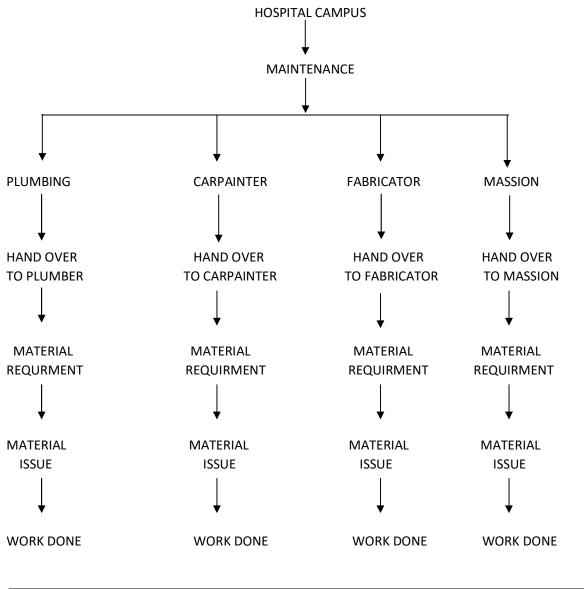
3) Supervisor / Mucadam :-

Getting information from incharge & arrange the material, complete the work & inform to incharge.

4) Worker :-

Follow the instruction form Maintenance incharge, Supervisor / Macadam.

a neact at	KIMSDU	Doc Number	KIMSDU/MAIN/FC/02	Issue date	21/12/2013	
		Rev No	0.0	Issue No		
NXX/	Name of the	FLOW CHART				
BERTHARD ADDRESS	Document					
Z Z	Name of the	CIVIL/ MAINTENANCE				
	Process/Areas					



PREPARED BY & ISSUED: Mr.	Page 410 of 1
S.V. Jagtap	

2] Policies / Flow chart-

DRINKING WATER SUPPLY POLICY

- KIMSDU have fully automatic water treatment plant 75 m³/hr.(75000 lit/hr).The hospital has a total storage capacity for 01-02 days.
- There are seven submersible pumps of 750 lpm capacity and two spare for emergency.
- To ensure smooth functioning of all pumps, plumbing works complete in hospital including water treatment plant.
- Be prepared for any type of water instruction in any area by means
- Sources of water : Koyana river (7,50,000 Lit/Day) Gov. Maharashtra Sangli path –bandhare vibhag.
- Alternate source bore wells act as a an alternate source in the case of supply failure from river water.

Presently the bore well water is being used for domestic.

• Testing of water:

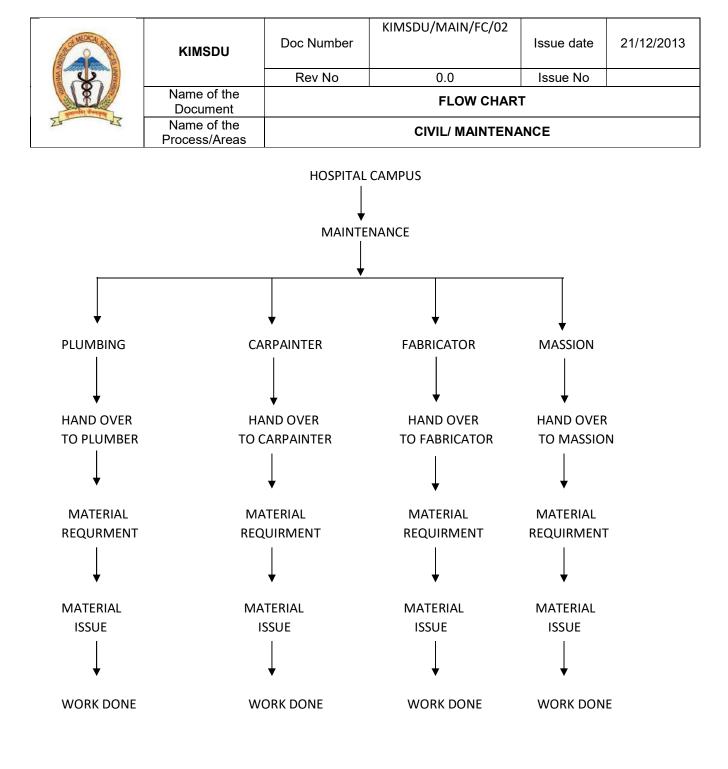
The water shall be tested for biochemical and microbiological analysis. The reports of the same shall be maintained in Engineering and Maintenance department.

- Water testing done by govt, approval lab.
- Alternate source for electricity & generator

Contact Person Name :-

1] Shahaji chavan -9975713271 / 9511710451

2] Dilip Kashid -9175303609 / 80109



APPROVED BY: Asst. Registrar – Estate and Security	PREPARED BY & ISSUED: Mr. S.V. Jagtap	Page 412 of 1
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3] Inspection Reports -

SHREERAM KULKARNI B.E. (Civil) M.E. (Structures) A.M.I.E. (India)



STRUCTURAL CONSULTANT & CHARTERED ENGINEER

Office & Residence : 'Maitra', 484, Sadarbazar, Old R.T.O. Satara. Off. : 232805, 228705, Resi. : 238994 Mobile : 9822057378, 9284334693 E-mail : sakulkarn103@gmail.com

STABILITY CERTIFICATE

To, C.O. Malkapur Nagar Parishad, Karad.

C

SUB: Stability certificate for Krishna Institute of Medical sciences, Deemed to be University, Malkapur, Karad.

OWNERS: Krishna Institute of Medical sciences, Deemed to be University, Malkapur, Karad. S. No. 144/B, Malkapur, tal- Karad, Dist- Satara.

Architects / Engg. : Ar. Vikas Ghadge.

This is to certify that the structural design of proposed construction at S. No. 144/B, Malkapur, tal-Karad, Dist- Satara is done by us as per provision specified in the prevailing I.S. Code including seismic provisions and use of only grade -1 structural steel is allowed in R.C.C. structural designs. The R.C.C. structural design will be done after

The R.C.C. structural design will be done after considering actual bearing capacity of soil taken from the building site itself.

The building is structurally safe and sound for the intended use.

Shreeram Kulkarni.



Karad Office : Flat No. : B-4, 'Shriswami Samarth' Phase - I, Near Krishna Canal, Vidyanagar, Govari Rasta, Karad - 415124



Certificate of Structural stability

To, C.O. Malkapur Nagar Panchayat, Karad.

Sub: Stability Certificate for Proposed extension of existing 200 Intake Medical College Increased to 250 Intake for Krishna Medical Sciences at Karad.

Owner: K.I.M.S. Deemed to be University, Karad. S.No. 144/B, At- Malkapur, Tal- Karad, Dist- Satara.

Engineer: Pramod Beri Beri Urban & Environmental Planners LLP, Pune – Kolhapur.

This is to certify that the structural design of proposed Construction of Proposed extension building of existing 200 Intake Medical College Increased to 250 Intake at S.No. 144/B, At- Malkapur, Tal- Karad, Dist- Satara is done by us as per provision specified in the prevailing I.S. code including seismic provisions and use of only grade – 1 structural steel is allowed in R.C.C. structural designs.

The R.C.C. structural design will be done after considering actual bearing capacity of soil taken from the building site itself.

The building will be structurally safe and sound for the intended use.

PRAMOD BERI

PRAMOD BERI Registered Architect (CA/76/2745) Chartered Engineer (F-012418/0) Beri Urban and Enviromental Planners LLP Plane Kolhapur (Signature of Structural engineer)

H.O.: 102, Fortune House. Near Regent Plaza, Baner Pashan Link Road, Pune - 411 045, India. Telefax : +91-20-27293039,

E-mail : beri.pune@gmail.com Branch : 'Gumpha', Tarabai Park, Kolhapur - 416 003, India. Tel : +91-231-2654719, Telefax : +91-231-2658519, E-mail : admin@beriae.com

Biomedical Engineering department

	Krishna Hosp	ital, Karad
JE OF MEDICAL SCIE		Version No.: 1.0
autorial Persons	KH-DOM-BME	Version Date: 01.01.2014
	Biomedical Engeenering	Rev No.:
		Rev. Date:
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Distribution				
Controlled Hard Copy:				
Controlled Soft Copy:				
	Version History			
V 1.0	01.01.2014			

Relevant Point

- 1. This is the Department Operating Manual of KIMSDU& all staff abide by the details written in this document.
- 2. The distributed copy is kept in custody of the HOD / in-charge, who ensures its proper maintenance & communication to other staff.
- 3. Authorized Approval of Documents & Amendment rights in this document are reserved with the management & are approved by MD. All the Documents / Manuals are accessible hospital wide in Hospital information system (soft copies) for the Staff / Employees.
- 4. Amendments & additions in this document are communicated through separate documents, which are maintained in the same file. All amendments & additions are included in the main text in next issue of the manual.
- 5. The custodian of the document marks at the appropriate place in this document, if any amendment is communicated to him/her.

	KIMSDU	KIMSDU Karad		
STE OF MEDICAL SCIER		Version No.: 1.0		
	KIMSDU-DOM-BMW	Version Date: 01.01.2014		
	Biomedical Engeenering	Rev No.:		
रायस्थीमेव जीवनागुकू		Rev. Date:		
Da AB		Effective Date:		

Amendment Sheet

Amendment No.	Amendment Date	Revision status	Section	Page No.	Summary of change

	Krishna Hosp	ital, Karad	
SEOF MEDICAL SCH		Version No.: 1.0	
Constant Strategy	KIMSDU-DOM-BMW	Version Date: 01.01.2014	
	Biomedical Engeenering	Rev No.:	
		Rev. Date:	
		Effective Date:	

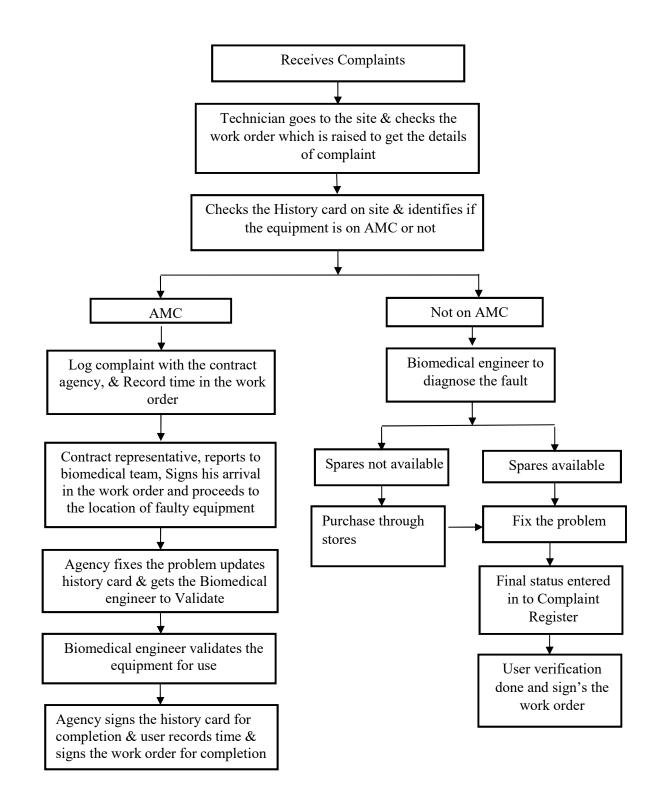
INDEX

Sr. No	Content	Page Number
1	Purpose	4
2	Scope	4
3	Responsibility:	4
4	Complaint/Breakdown:	4
5	Preventive Maintenance:	6
6	Annual Maintenance Contract	6
7	Calibration:	7
8	Mission of Policy:	7
9	Policy:	7
10	Organizational Structure:	8
11	Process Map	9
12	Medical Gas:	10
13	Fire Safety of Biomedical Equipment :	10
14	Quality Indicator	11
15	Records Generated :	11
16	SOPs	

- 1. **Purpose**: The appropriate and safe operation of clinical equipment is paramount to the proper functioning of any health care facility. The Biomedical Engineering Services is responsible for testing, repairing, calibration and maintaining in proper and safe operating condition.
- 2. Scope: Hospital Wide.
- 3. Responsibility: Medical Director.

4. Complaint/Breakdown:

- 4.1 In case of breakdown of any biomedical equipment, the user department notifies the In charge of the department.
- 4.2 The in charge enters the details in the Biomedical Equipment Breakdown record book.
- 4.3 The clerk identifies whether the equipment is under annual maintenance contract (AMC) or not.
- 4.4 If the equipment is under AMC the contract agency is informed. Time and date of the same is noted.
- 4.5 The contract agency personnel will report to the clerk who is then escorted to the location of the faulty equipment.
- 4.6 The personnel from the contract agency rectifies the defect. The equipment history record is updated with the required information and is validated by the service engineer.
- 4.7 In case the equipment is not under AMC, the clerk informs the Medical Director
- 4.8 If the machine cannot be repaired at the hospital and is required to be taken to the service center, a receipt for the equipment is provided by the service center with details of the equipment. The same is recorded by the clerk.
- 4.9 After the fault is rectified and the equipment is brought back to the hospital, the clerk ensures that the equipment is installed at the site of the user department by the service engineers.



5. Preventive Maintenance:

- 5.1 Preventive maintenance schedules are prepared based on manufacturers' recommendations review of History Card maintained. The intimation of preventive maintenance is communicated in advance to the various departments for release of equipment.
- 5.2 The availability of necessary spares, consumables, tools and necessary materials are ensured through standardization and /or advance planning, through Stores under the guidance of the Medical Superintendent and the concerned user department's head.
- 5.3 Preventive maintenance is carried out as per Maintenance Schedule and Records. The concerned clerk checks the maintenance activities regularly.
- 5.4 After completion of maintenance (whether preventive or breakdown) the O K report is taken from the user department.
- 5.5 All preventive maintenance jobs done are recorded in Equipment History Register maintained for all biomedical equipment.
- 5.6 The following is checked when maintenance is done
 - 5.6.1 Physical condition of the equipment/ facility
 - 5.6.2 Maintenance report verification
 - 5.6.3 Maintenance / Service report to be obtained from service agency and after verification marked as O.K. /Not O.K.

6. Annual Maintenance Contract :

- 6.1 The Equipments on AMC are identified and marked in the History register.
- 6.2 The history record contains the preventive maintenance frequency and calibration requirements and break down maintenance details.
- 6.3 On the basis of the information gathered on the history record, Periodic Preventive Maintenance (PPM) schedule is made.
- 6.4 The clerk follows the PPM schedule in conjunction with the user department on the availability of the machine to conduct the preventive maintenance by the contract agency.
- 6.5 The clerk collects and documents the Service report of the maintenance conducted on the equipment by the AMC contractor
- 6.6 The break down time is recorded.
- 6.7 All the spares details are recorded.
- 6.8 The response time of the AMC contractor is recorded.
- 6.9 After the Service, the Machine is thoroughly tested by the user department.
- 6.10 The user department signs the service order/ work order request if the service was done on a break down.

7. Calibration:

- 7.1 All the equipments when purchased the manufacturer defined frequency of calibration is taken as frequency of calibration if not recommended the legitimate or the as per the laws of land the frequency of calibration is defined
- 7.2 The frequency of calibration is entered in the history record
- 7.3 As the per the frequency stipulated the equipments are calibrated internally or through the AMC provider or through the third party agency or through the Government agency
- 7.4 All the necessary certification are maintained
- 7.5 Most of the Calibration is done with the periodic Prevention maintenance schedule
- 7.6 The history record is upgraded with calibration codes
- 7.7 The next calibration due is also mentioned in the history record.

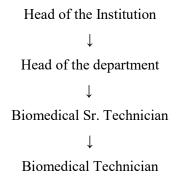
8. Mission of Policy:

To maintain all medical equipments to the appropriate standards as prescribed by equipment manufacturer, so as to ensure that all medical equipments to be used to provide the best health care services to patients should be safe, efficient, effective, reliable and long lasting.

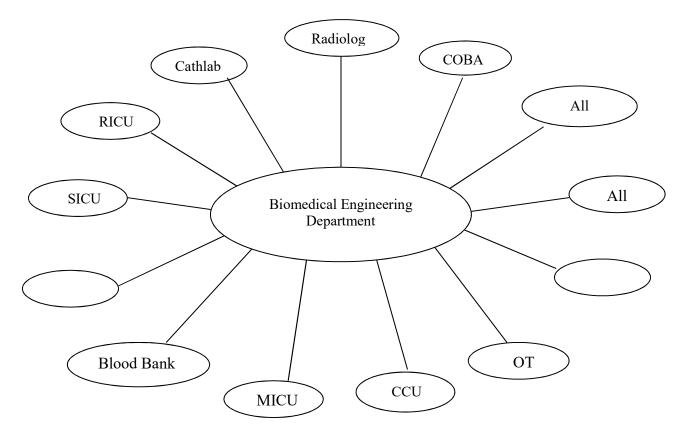
9. Policy:

- 9.1 There shall be a documented Preventive Maintenance and breakdown maintenance.
- 9.2 Maintenance activities shall include all biomedical equipments.
- 9.3 Maintenance staff shall be available for emergency.
- 9.4 Preventive Maintenance of equipment covered under AMC/under warranty/in house shall be carried out periodically time in year(duration of six months) or as per preventive maintenance schedule for the equipment.
- 9.5 Biomedical engineering department shall maintain technical log book in the form of register.
- 9.6 All documents pertaining to installation report, service reports, PM (Preventive Maintenance) reports, calibration certificates shall be maintained by Biomedical Engineering department.
- 9.7 All biomedical equipments which have undergone PM shall have stickers labeled onto it with the necessary details specified.

10. Organizational Structure:



11. Process Map:



12. Medical Gas:

- 12.1 Medical Gas cylinders are to be checked every day by:
 - 12.1.1 The maintenance staff in the medical gas cylinder storage room.
 - 12.1.2 The nursing staff in the Operation Theatre/Emergency Department/Diagnostic Facilities / Wards.
- 12.2 Regular Inspection of Medical Gas cylinders are done :
 - 12.2.1 To ensure that there is no leakage in the cylinders.
 - 12.2.2 To ensure Cylinders are adequately filled.
 - 12.2.3 To ensure that there is no malfunction in the cylinders.

13. Fire Safety of Biomedical Equipment :

- 13.1 In the event of Fire the area is electrically isolated by cutting of the Main circuit Breaker
- 13.2 Elevators are brought to ground level and power shut off
- 13.3 Bio-medical engineer monitors and shuts off the section affected by fire of medical gases or the entire Manifold room if required
- 13.4 All electrical equipment will be effectively grounded.
- 13.5 Gasoline powered equipment will be operated in well ventilated areas.
- 13.6 Fuel and flammable gas cylinders will be stored separately from oxidizing gas cylinders.
- 13.7 Staff shall be adequately trained on fire fighting. Department shall be equipped with adequate no. of fire extinguishers
- 13.8 Once the Patients are shifted from the area on fire, Equipments are salvaged

14. Quality Indicator

Quality Indicator is based on average downtime for rectification, repair or purchase of the required product. Example:

- Internal Repair : 24 hrs
- External Repair : 72 hrs
- Out station assistance : within a week

No	Objectives	Performance	Measurement Criteria	
		Parameters	Method	Period
1	Reduce cost of	Reduce break down	Break down Records	Quarterly
	maintenance	Stand arise the spares	Number	Quarterly
2	Response Time	Time of repair	Days / hours	Quarterly

15. Records Generated :

- 1. Maintenance Record Book.
- 2. On call Book.
- 3. Out House Repairing Book.

	KIMSDU Karad	
E Taumade shareye		Version No: 1.0
	KIMSDU-DOM-BME /SOP/1	Version Date: 01.01.2014
		Rev No. :
	SOP for Medical Gas	Rev. Date:
		Effective Date:01.01.2014

1. Aim:

- 1.1 To provide Medical Gas
- 1.2 To ensure appropriate maintenance of the system providing Medical Gases.

- 2.1 Medical Gas cylinders are to be checked every day by:
 - 2.1.1 The maintenance staff in the medical gas cylinder storage room.
 - 2.1.2 The nursing staff in the Operation Theatre/Emergency Department/Diagnostic Facilities / Wards.
- 2.2 Regular Inspection of Medical Gas cylinders are done :
 - 2.2.1 To ensure that there is no leakage in the cylinders.
- 2.3 To ensure Cylinders are adequately filled.
- 2.4 Satisfactory mechanical operation and non interchangeability of each terminal outlet.
- 2.5 The medical gas pressure alarm has to be checked by the user end everyday by pressuring the test button.
- 2.6 Any Alarm in the medical gas monitoring system will be informed immediately to the facility technician.

KIMSDU Karad		Karad
		Version No: 1.0
	KIMSDU-DOM-BME /SOP/2	Version Date: 01.01.2014
		Rev No. :
	SOP for Ventilator Care	Rev. Date:
		Effective Date:01.01.2014

1. Aim: Ensuring proper servicing of the Life Saving Equipment Ventilator Units.

2. Responsibility:

2.1 Biomedical Engineer.

- 3.1 Get cleaned the ventilator externally.
- 3.2 Keep ventilators for charging when they found ideal / free.
- 3.3 Make sure that ventilator is working on 'mains' supply before connects to the patient.
- 3.4 Please check the ventilators functions by using test lung before connect to the patient.
- 3.5 Tubing circuit compliance needs to be check for every patient.
- 3.6 Every ventilator needs to be used on battery backup for 10-15 minutes, strictly under user's supervision.
- 3.7 Kindly change bacteria / humidifier filter per patient, strictly follow this procedure at the time of nebulization.
- 3.8 For transport ventilator make sure that machine is working on battery.
- 3.9 Backup before use whenever it is ideal keep it for charging.

	KIMSDU Karad	
E Transferrer L		Version No: 1.0
	KIMSDU-DOM-BME /SOP/3	Version Date: 01.01.2014
		Rev No. :
	SOP for Servicing of the Multiparameter Monitor	Rev. Date:
		Effective Date:01.01.2014

1. Aim:

Ensuring proper servicing of the Multiparameter monitor.

2. Responsibility:

Biomedical Engineer.

ECG waveform is coming & respiration waveform is not coming, first go to set up mode & check that respiration is made ON. Then clean all the three leads of ECG Patient cable. Check chest ECG leads. Apply jelly if found dry Reposition them on chest proper.

- 3.1 Proper preparation of patient 7 proper positioning of electrodes needs to be checked before taking ECG / Respiration.
- 3.2 Electrodes need to be replaced periodically after 72 hours.
- 3.3 Take care of ECG / SPO2 /NIBP cables should not trap in the railing of bed.
- 3.4 Insert the connectors of ECG / SPO2 / NIBP cable's connector in the module's slot properly.
- 3.5 While using the NBP cuff:-
 - 3.5.1 Handle the cuff properly, stretched Velcro should not damaged.
 - 3.5.2 Lock & unlock adapter between cuff & extension cable properly, please don't pull forcefully.
- 3.6 For transport monitor make sure that machine is working on battery back up before use, whenever it is ideal keep it on charge.
- 3.7 Connect properly all accessories to the module.
- 3.8 If monitor is connecting to the patient, verify that all parameters are working Ok.

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KIMSDU Karad	
	Version No: 1.0
KIMSDU-DOM-BME /SOP/4	Version Date: 01.01.2014
	Rev No. :
SOP for Servicing of the Defibrillator	Rev. Date:
	Effective Date:01.01.2014

- 1. Aim: Ensuring proper servicing of the Defibrillator.
- 2. Responsibility: Biomedical Engineer.

- 3.1 Make sure that ampoules should not drop on top of defibrillator, while removing the paddies.
- 3.2 Check defibrillator by operating it on mains supply & on battery supply.
- 3.3 Make sure that there is printer paper roll inside printer module.
- 3.4 Verify that paddles are cleaned & properly placed.
- 3.5 Avoid open paddle discharge; since high voltage exists on the paddle when defibrillator is discharged.
- 3.6 Avoid touching any metal surfaces on the instrument during discharge.
- 3.7 Disconnect other devices when using defibrillator.
- 3.8 Keep defibrillator for charging.

	KIMSDU Karad	
Safe OF MEDICAL ICH		Version No: 1.0
	KIMSDU-DOM-BME /SOP/5	Version Date: 01.01.2014
NUMERICAL PROPERTY OF		Rev No. :
	SOP for Servicing of the Syringe Pump	Rev. Date:
		Effective Date:01.01.2014

- 1. Aim: Ensuring proper servicing of the syringe pump.
- 2. Responsibility: Biomedical Engineer.

- 3.1 If syringe pump & Infusion pumps are free, keep for charging.
- 3.2 Verify that syringe & infusion pumps are properly placed & are cleaned externally.
- 3.3 Kindly make sure that battery backup of pump being used at least once in a week.
- 3.4 First switch off the pump using start/stop buttons & then shut down the mains supply.
- 3.5 Handle the pumps properly, make sure that pumps should not be fallen down.

	KIMSDU Karad	
E Transfer shareen		Version No: 1.0
	KIMSDU-DOM-BME /SOP/6	Version Date: 01.01.2014
		Rev No. :
	SOP for Servicing of the AVL Blood	Rev. Date:
	Gas Analyzer	Effective Date:01.01.2014

- 1. Aim: Ensuring proper servicing of the AVL Blood Gas Analyzer Compact -3.
- 2. Responsibility: Biomedical Engineer.

3. Procedure:

3.1 # Daily Checkup:

3.1.1 Fill Port : To cleaned the fill port follow the procedure:-

User programs? = press 'YES' & then up/down arrow key till display is, System test? = press 'YES'

Open the flap & cleaned the fill port. Closed the flap & press 'ESC' two Times to come to ready mode

- 3.1.2 Sample drip tray : To cleaned the sample drip tray follow the procedure:
 - a) Open bottle compartment cover.
 - b) Pull sample drip tray & cleaned it.
 - c) Place sample drip tray & close bottle compartment.
- 3.1.3 Waste bottle :
 - a) Check waste bottle, empty it regularly.
 - b) Checked the entire reagent bottles viz. buffer 1, 2, ph reference, rinse, cleaning solution. If anyone is found empty changed it by new one.
 - c) Close tight all bottles ideally.
- 3.1.4 Gas supply :
 - a) Check the gas cylinders. See the pressure i.e. should be between 3 to 4 bar range (green zone)

3.2 Weekly checkup:

3.2.1 PCO2 & PO2 electrodes:

Check the filling solution in PCO2 & PO2 Electrodes. If electrodes found dry fill them with respective filling solution.

- 1. **PURPOSE**: The appropriate and safe operation of clinical equipment is paramount to the proper functioning of any health care facility. The Biomedical Engineering Services is responsible for testing, repairing, calibration and maintaining in proper and safe operating condition.
- 2. SCOPE: Hospital Wide.
- 3. **RESPONSIBILITY:** Medical Director.

4. COMPLAINT / BREAKDOWN:

- 4.1 In case of breakdown of any biomedical equipment, the user department notifies the In charge of the department.
- 4.2 The in charge enters the details in the Biomedical Equipment Breakdown record book.
- 4.3 The clerk identifies whether the equipment is under annual maintenance contract (AMC) or not.
- 4.4 If the equipment is under AMC the contract agency is informed. Time and date of the same is noted.
- 4.5 The contract agency personnel will report to the clerk who is then escorted to the location of the faulty equipment.
- 4.6 The personnel from the contract agency rectifies the defect. The equipment history record is updated with the required information and is validated by the service engineer.
- 4.7 In case the equipment is not under AMC, the clerk informs the Medical Director.
- 4.8 If the machine cannot be repaired at the hospital and is required to be taken to the service center, a receipt for the equipment is provided by the service center with details of the equipment. The same is recorded by the clerk.
- 4.9 After the fault is rectified and the equipment is brought back to the hospital, the clerk ensures that the equipment is installed at the site of the user department by the service engineers.

5. PREVENTIVE MAINTENANCE:

5.1 Preventive maintenance schedules are prepared based on manufacturers' recommendations review of History Card maintained. The intimation of preventive maintenance is communicated in advance to the various departments for release of equipment.

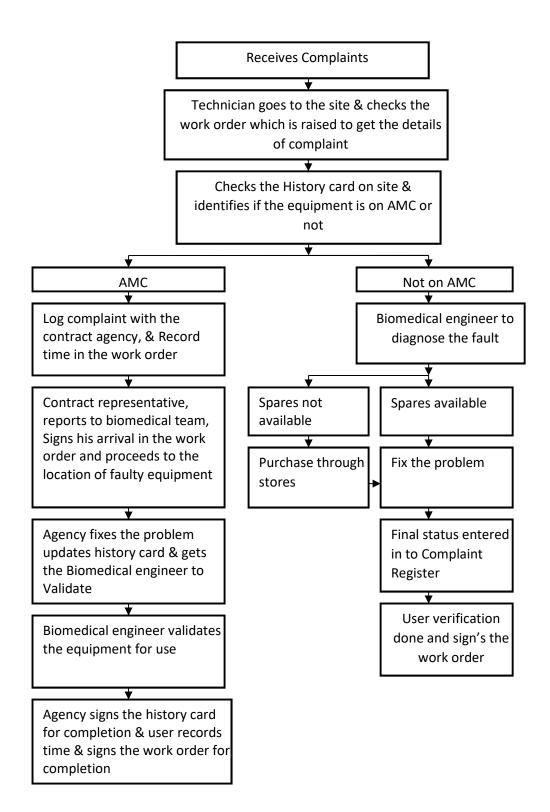
- 5.2 The availability of necessary spares, consumables, tools and necessary materials are ensured through standardization and /or advance planning, through Stores under the guidance of the Medical Superintendent and the concerned user department's head.
- 5.3 Preventive maintenance is carried out as per Maintenance Schedule and Records. The concerned clerk checks the maintenance activities regularly.
- 5.4 After completion of maintenance (whether preventive or breakdown) the O K report is taken from the user department.
- 5.5 All preventive maintenance jobs done are recorded in Equipment History Register maintained for all biomedical equipment.
- 5.6 The following is checked when maintenance is done :
 - 5.6.1 Physical condition of the equipment/ facility.
 - 5.6.2 Maintenance report verification.
 - 5.6.3 Maintenance / Service report to be obtained from service agency and after verification marked as O.K. / Not O.K.

6. ANNUAL MAINTENANCE CONTRACT:

- 6.1 The Equipments on AMC are identified and marked in the History register.
- 6.2 The history record contains the preventive maintenance frequency and calibration requirements and break down maintenance details.
- 6.3 On the basis of the information gathered on the history record, Periodic Preventive Maintenance (PPM) schedule is made.
- 6.4 The clerk follows the PPM schedule in conjunction with the user department on the availability of the machine to conduct the preventive maintenance by the contract agency.
- 6.5 The clerk collects and documents the Service report of the maintenance conducted on the equipment by the AMC contractor.
- 6.6 The break down time is recorded.
- 6.7 All the spares details are recorded.
- 6.8 The response time of the AMC contractor is recorded.
- 6.9 After the Service, the Machine is thoroughly tested by the user department.
- 6.10 The user department signs the service order/ work order request if the service was done on a break down.

7. CALIBRATION:

- 7.1 All the equipments when purchased the manufacturer defined frequency of calibration is taken as frequency of calibration if not recommended the legitimate or the as per the laws of land the frequency of calibration is defined.
- 7.2 The frequency of calibration is entered in the history record.
- 7.3 As per the frequency stipulated the equipments are calibrated internally or through the AMC provider or through the third party agency or through the Government agency.
- 7.4 All the necessary certification is maintained.
- 7.5 Most of the Calibration is done with the periodic Prevention maintenance schedule.
- 7.6 The history record is upgraded with calibration codes.
- 7.7 The next calibration due is also mentioned in the history record.



Working Flow Chart

Calibration Reports

Monitor

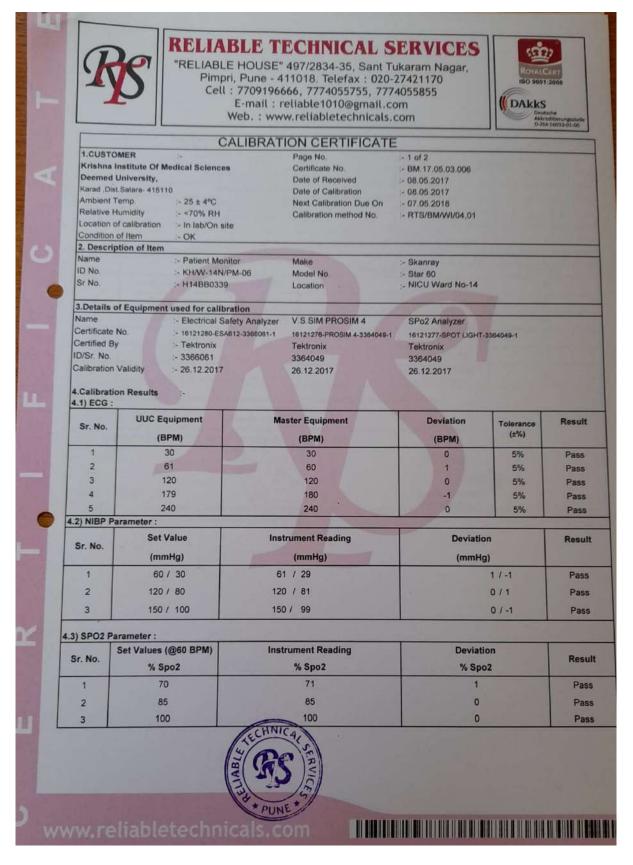
May 2016 – May 2017

1.CUSTO		: www.reliabletechnicals.c		DAkkS Deutache Akreditierungsaterlie D-7M-16033-01-00
	C	ALIBRATION CERTIFI	CATE	
Krishna Ir	nstitute Of Medical Sciences	Page No.	:- 1 of 2	
Deemed L	University, it.Satara- 415110	Certificate No.	:- B.16.05.01.174	
Ambient T	emp. (°C) :- 22.8	Date of Received Date of Calibration	11.05.2016 11.05.2016	
	umidity (%RH) :- 49 f calibration :- In lab/On site	Next Calibration Due C	On :- 10.05.2017	(Customer suggested)
Condition		Calibration method No	. :- RTS/BM/WI/04	
	tion of Item			
Name Id No	Patient Monitor KIMSDU/NICU	TTTTTTTTTTT	:- Skanray	The second second
Sr No	- H14BB0339	Location	:- Star 60 :- NICU(Ward No-14)	
	of Equipment used for calibrati	ion	1	
Name	:- Electrical Safet		SPo2 Analyzer	
D/Sr. No.	y :- Fluke :- 3366061	Fluke 3364049	Fluke 3364049	
Calibration	the second se	21.12.2016	21.12.2016	
.Calibrati	on Results :-			
C	UUC Equipment	Master Equipment	De	viation
Sr. No.	(BPM)	(BPM)	(BPM)
1	30	30		0
2	61	60		1
3	120	120		0
4	180	180		0
5	240	240	and the state of the	0
2) NIBP F	Parameter :	the second second		
-	Set Value	Instrument Reading	D	eviation
Sr. No.	(mmHg)	(mmHg)		(mmHg)
1	120 / 80	120 / 81		0/1
2	80 / 50	80 / 50		0/0
	Set Value	Set Reading	C)beserved
		(mmHg)		
		(mmmig)		OK
3) IBP Pa	(mmHg)	120/81		
3) IBP Pa	Artial Wave120/81	120/81		OK
3) IBP Pa Sr. No.	Artial Wave120/81 Radial Wave120/81	121/81		ок ОК
3) IBP Pa Sr. No. 1	Artial Wave120/81			

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		mail : reliable1010@ . : www.reliabletec	gmail.com hnicals.com	Contactae Akirnelitierungsat 0-7/4-160731-01-0
Certificate 4.4) SPO2	No. B.16.05.01.174 Parameter :			Page No. 2 of
Sr. No.	Set Values (@60 BPM)	Instrument Readi	ng	Deviation
	% Spo2	% Spo2		% Spo2
1	70	70		0
3	93 97	93		0
4.5) EST :		96		1
Sr. No.		Tests		Remarks
1		ds, Cables Checking		Ok
2		Socket Checking		Ok
4		nt Type (B, BF, CF)		в
		ent Class (I, II, III)		1
	I-Property Fa	dy Type, BF-Body Float Ty rthed .II-Double Insulation	be,CF-Cardiac Float Type III-With Extra Low Safety Voltage	
FUNCTION	AL TEST:		In-with Extra Low Salety Voltage	
Sr.No	Parameters		Measured Values	Remarks
1	Voltage between Live and	Neutral (VIn)	235.80 (210-240V)	OK
2	Voltage between Live an	d Earth(Vle)	237.87 (210-240V)	ОК
3	Voltage between Neutral and	and Earth (Vne)	2.30 (0-5V)	ОК
4			0.8 (0-10µA)	OK
	Enclosure Curre	ent		
5	Leakage Current	.(IL)	114 (0-500µA)	ОК
6	Patient Leakage Curr	ent (PL)	0.6 (BF-0-100µA) (CF-0-10µA)	ОК
) Calibration p) This certifica	ioint were selected as per custome te shall not be reproduced, except ned from the Technical Manager of	er specifications. In full unless written permissi	Approved By Quality Manag	ubstract
Calibrated By Calibration El Rahul Sable	ngineer		R.D.Bodhe	

May 2017 – May 2018



Y	S "RELIABLE HOUSE" 497/283 Pimpri, Pune - 411018. T Cell : 7709196666, 777 E-mail : reliable1 Web. : www.reliab	Telefax : 020-27 4055755, 77740 010@gmail.com	7421170 055855 n	DAKKS Deutsche Ablicistinerur D-274-16035
ertificate	No. BM.17.05.03.006			Page No
.4) EST : Sr. No.	Tests		Remark	ks
1	Power Cords, Cables Checking		Ok	
2	Mains Socket Checking		Ok	
3 '	Equipment Type (B, BF, CF)		8	
4	Equipment Class (I, II, III) B-Body Type,BF-Body I-Property Earthed ,II-Double In	Float Type,CF-Cardia solution,III-With Extra	ac Float Type	
20 - CO - CA	NAL TEST: Parameters	Measure	d Values	Remark
Sr.No	Voltage between Live and Neutral (Vin)	236.14	(210-240V)	OK
1	Voltage between Live and Earth(Vie)	237.89	(210-240V)	OK
2	Voltage between Neutral and and Earth (Vne)	1.98	(0-5V)	OK
3	Voltage between Neutral and and Caron (Vite)	0.8	(0-10µA)	OK
4	Enclosure Current	115	(0-500µA)	OK
5	Leakage Current (IL)		(BF-0-100µA)	OK
		0.3	(CF-0-10µA)	
2) The calib 3) Calibratio	Patient Leakage Current (PL) ificate refers only to the particular item submitted for calibration pration results reported in the certificate are valid at the time of on point were selected as per customer specifications. ificate shall not be reproduced, except in full unless suffering bitained from the Technical Manager of "Reliast" Tambés Se	mission for the publicatio	on of an approved abstract	
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May 2018 – May 2019

1.CUSTOM Krishna Ins Deemed Unit Karad .Dist.S Ambient Ter	titute Of Medical Scier	ices	LIBRATION CERTIF	ICATE		
Karad .Dist S	versity,	Ices	rage No.			_
Karad , Dist S			Certificate No.	-1 of 3		
Ambient Ter	alara- 415110		Date of Received	- BM.18.05.01.129 - 06.05.2018		
Relative Hu	np 25±4°C		Date of Calibration	- 06.05.2018		
Location of o			Next Calibration Due On Calibration method No.	~ 05.05.2019		
Condition of	Item : OK	6	and the second rep.	- RTS/BM/W/04,01		
2. Descripti	on of Item					
			Make			-
Sr No.			Model No.			-
2011/24 20 1	- 114860339		Location			
3.Details of	Equipment used for ca	libration				
Name	:- Electrical Sa	fety Analyzer	Vital Signs Simulator	0.010		-
). :- 18444407-ESAI	812-3386061-1		SpO2 Functional Tester 184444011-SPOT LIGHT TESTOR	6% DMM	
			Tektronix	Tektronix		8
Contraction of the second	alidity - 27 12 2018			3364049		
		AL AL AL	27.12.2018	28.12.2018	06.07.2018	
.1) ECG (Be	ats/min) :					
Sr.	Master Reading	1000	UUC Reading	Destro	1 1	
No.	(BPM)	1. 1.	and the second	and the second	Tolerance (1%)	Result
1	30		and the second s			
2	80				5%	Pass
3	120	1 Same				Pass
4	180	and the local division of			Sector and	Pass
5	270	1.1.1				Pass
2) ECG Amp	litude (mV) :				076	Pass
Sr. I	Master Reading		UUC Reading	Deviation		
lo.	(mV)		(mV)	(mV)	Tolerance (1%)	Result
1	0.50		0.50		5%	Pass
2	1.00		1.02	0.02		Pass
3	2.00		2.01	0.01	5%	Pass
Respiratio	n Test (Breaths/min):					
1			UUC Reading	Deviation		
	1-11-1			(mV)	Tolerance (1%)	Resul
	10000°		9	-1	5%	Pass
	10			0	5%	Pass
			30			Pass
	30 50		50	0	5%	
	Condition of 2. Description Name ID No. Sr No. 3. Details of I Name Certificate No Certificate No Certified By D/Sr. No. Calibration Vi Calibration Vi Calibratio Vi Calibratio Vi Calibratio V	Condition of Item OK 2. Description of Item OK Name Patient Mon ID No. KH/W-14N/F Sr No. H14BB0339 3. Details of Equipment used for ca Name Electrical Sa Certificate No. 15444407-ESA Calibration Kesults Tektronix D/Sr. No. 3366061 Calibration Results .1) ECG (Beats/min) : Sr. Master Reading No. (BPM) 1 30 2 80 3 120 4 180 5 270 2 0.0 1 0.50 2 1.00 3 2.00 1 0.50 2 1.00 3 2.00	Condition of Item OK 2. Description of Item Name Name Patient Monitor ID No. KHW-14N/PM-06 Sr No. H14BB0339 3. Details of Equipment used for calibration Name Electrical Safety Analyzer Certificate No. 1844407-ESA812-3366061-1 Certified By Tektronix D/Sr. No. 3366061 Calibration Results - C1) ECG (Beats/min) : - Sr. Master Reading No. (BPM) 1 30 2 80 3 120 4 180 5 270 2) ECG Amplitude (mV) : - 3r. Master Reading 0. (mV) 1 0.50 2 1.00 3 2.00	Condition of Item OK 2. Description of Item OK Name Patient Monitor Make ID No. KH/W-14N/PM-06 Model No. ID No. H14BB0339 Location 3. Details of Equipment used for calibration Location Name Electrical Safety Analyzer Vital Signs Simulator 10 No. 1844407-ESA812-3388081-1 1844407-ESA812-3388081-1 2. Details of Equipment used for calibration 1844407-ESA812-3388081-1 Name Electrical Safety Analyzer Vital Signs Simulator 12 Certificate No. 1844407-ESA812-3388081-1 1844407-ESA812-3388081-1 2. Calibration Results 3366061 3364049 2. Calibration Results . .	Condition of Item OK 2. Description of Item Name Name - Patient Monitor DI No. - KHW-14N/PM-06 Model No. - Star 60 ST No. - H145B0339 J.Details of Equipment used for calibration Name - Electrical Safety Analyzer Vital Signs Simulator SD2 Functional Tester Tektronix Tektronix Tektronix Tektronix D/Sr. No. - 3366061 2386061 3364049 2386061 3364049 2386061 3364049 2386061 3364049 2386061 3364049 2386061 3364049 2386061 3364049 2386061 3364049 2386061 3364049 2386061 3364049 2386061 3364049 2386061 3364049 2386061 3364049 238607 0 20107 Master Reading VUC Reading Deviation 1 30 30 2 80 60 3 120 121 4 180 179 5 270 269 2<	Condition of Item OK 2. Description of Item Name 2. Description of Item Patient Monitor Make Name - Patient Monitor Make ID No. - KHW-14N/PM-06 Model No. 3.Details of Equipment used for calibration Sp02 Functional Tester Name - Electrical Safety Analyzer Vital Signs Simulator Sp10 1544407-55412-338601-1 Sp02 Functional Tester Condition Validity - Tektronix Tektronix Tektronix Tektronix Tektronix D/Sr. No. - 3366061 3364049 TW00005089 2alibration Validity - 27.12.2018 27.12.2018 28.12.2018 06.07.2018 CG (Beats/min) : - - - - - Sr. Master Reading UUC Reading Deviation 0 5% 1 30 0 5% 5% 5% 2 80 60 0 5% 5% 3 120 121 1 5%

Certific	ate No. BM.18.05.01.	129	reliabletechnicals.	com		S, USA SCB-127
ər.	G Arrhythmia :				Page	No. 2 of 3
No.		Observed on UUC	Set on Master	-		
1	V Tach 160bpm	Ok	TV Paced 75 bpm	Observed or	n UUC	Result
Children ()	V Tach 200bpm	Ok	A Fib Coarse	Ok		Pass
Sr.	P Parameter :			Ok		Pass
No.	Master Reading	UUC F	Reading	Deviation		1
1	(mmHg)	(mi	mHg)	(mmHg)	Tolerance (±%)	Result
2	60 / 30	61 / 30		1/0	5%	Pass
3	120 / 80 200 / 150	120 / 8		0 / 1	5%	Pass
		200 / 1	51	0 / 1	5%	Pass
1	02 Parameter : Master Reading @60			The second second		
Sr. No.	BPM	UUCI	Reading	Deviation	Toleran	Resu
	% SpO2	% :	SpO2	% SpO2	(±%)	Resu
1	70	70		0		Pass
2	85		85	0	5%	Pas
3	100		100	0	5%	Pas
4.7) Tem	perature :					
Sr. No.	Master Reading		Reading	Deviation	Tolera (±%	
	°C	and the second sec	°C	°C	(1.)	
1	25.0		24.8	-0.2	5%	
2	30.0		29.2	-0.8	5%	
3	40.0		39.3	-0.7	59	6 Pa
			THE TRUNE	RVID		



2	Mains Socket Check	Ok				
FUNCTIO	NAL TEST:	ung	Ok			
Sr.No	Parameters					
1	20 Million Constant	Туре	Measured Values	Tolerance	Remarks	
	Supply Voltage	Live-Neutral	234.87	210 to 240 V	Pass	
2	Supply Voltage	Live-Earth	237.56	210 to 240 V	Pass	
3	Supply Voltage	Neutral-Earth	1.76	0 to 5 V	Pass	
4	Protective Earth Resistance		0.606	< 5 ohm	Pass	
5	Earth Leakage Current	Normal Close (NC)	1.3	< 10 µA	Pass	
6	Earth Leakage Current	Normal Open (NO)	2.0	< 10 µA	Pass	
7	Enclosure Leakage Current	NCC	1.7	< 10 µA	Pass	
8	Enclosure Leakage Current	NOC	2.0	< 10 µA	Pass	
9	Enclosure Leakage Current	NCO	1.6	< 10 µA	Past	
10	Patient Auxiliary Leakage Current	NCC	1.6	< 10 µA	Pase	
11	Patient Auxiliary Leakage Current	RCC	1.5	< 10 µA	Pas	
12	Patient Sink Leakage Current	NCC	2.1	Au 10 >	Pas	
13	Patient Sink Leakage Current	RCC	1.4	< 10 µA	Pas	

Note:

1) This certificate refers only to the particular item submitted for calibration. UUC stands for Unit Under Calibration.

2) The calibration results reported in the certificate are valid at the time of and under the stated conditions of measurement.

Calibration point were selected as per customer specifications.

4) This certificate shall not be reproduced, except in full unless written permission for the publication of an approved abstract

has been obtained from the Technical Manager of "Reliable Technical Services, Pune".

.) The Standard used are traceable to National / International Standard.

Calibrated By Drord

Calibration Engineer Anand Dalvi.

RF-21, R0

www.reliabletechnicals.com

Approved By

R.D.Bodhe

Bail

Quality Manager

May 2019 – May 2020

Deem	STOMER	CALIBRATION CERT	IFICATE		
	hna Institute Of the	Page No.	:-1 of 3		
Karad	ed University, 1. Dist. Satara- 415110	Certificate No. Date of Received	- BM.19.04.20.093		
AMDI	ent Temp	Date of Calibration	:-22.04.2019 :-22.04.2019		
Relat	ive Humidity	Next Calibration Due On	-21.04.2020		
Locat	ion of cal "	Calibration method No.	:- RTS/BM/WI/04,01		
2 Do	tion of Item : OK				
Name	scription of Item		and the second		_
ID No	- Patient Monitor	Make	:- Skanray		_
Sr No	- H14BB0339 - KH/W-14N/PM-06	Model No.	:- Star 60		
		Location	:- NICU Ward No-14		
3.Deta Name	ails of Equipment used for calibration	1	the second second	1	-
	cate No Electrical Safety Ana		SpO2 Functional Tester		-
Certifie	ed By :- RTS	18.12.IH.005	18.12.IH.007		
ID/Sr.		RTS 3364049	RTS		
Calibra	ation Validity :- 16.12.2019	20.12.2019	3364049 20.12.2019		
4.Calib	bration Results :-		20.12.2019		_
	CG (Beats/min) :	hard and hard	Start Walter and		
Sr. No.	Master Reading	UUC Reading	Deviation		
NO.	(BPM)	(BPM)	(BPM)	Tolerance (±%)	Resi
1	30	30	0	5%	Pas
2	80	81	1	5%	Par
3	120	120	0	5%	Pa
	180	179	-1	5%	Pa
4		269	-1	5%	Pa
5	270	209			
5 4.2) EC	G Amplitude (mV) :				
5 4.2) EC Sr.	G Amplitude (mV) : Master Reading	UUC Reading	Deviation	Tolerance (±%)	Re
5 4.2) EC Sr. No.	G Amplitude (mV) : Master Reading (mV)	UUC Reading (mV)	(mV)	Tolerance (±%)	Re
5 4.2) EC Sr. No. 1	G Amplitude (mV) : Master Reading (mV) 0.50	UUC Reading (mV) 0.51	(mV) 0.01	5%	
5 4.2) EC Sr. No. 1 2	G Amplitude (mV) : Master Reading (mV) 0.50 1.00	UUC Reading (mV) 0.51 1.02	(mV) 0.01 0.02	5%	Re P
5 4.2) EC Sr. No. 1 2 3	G Amplitude (mV) : Master Reading (mV) 0.50 1.00 2.00	UUC Reading (mV) 0.51	(mV) 0.01	5%	P
5 4.2) EC Sr. No. 1 2 3	G Amplitude (mV) : Master Reading (mV) 0.50 1.00 2.00 piration Test (Breaths/min):	UUC Reading (mV) 0.51 1.02 2.02	(mV) 0.01 0.02 0.02	5%	P
5 4.2) EC Sr. No. 1 2 3 4.3) Res Sr.	G Amplitude (mV) : Master Reading (mV) 0.50 1.00 2.00 piration Test (Breaths/min): Master Reading	UUC Reading (mV) 0.51 1.02 2.02 UUC Reading	(mV) 0.01 0.02 0.02 Deviation	5%	PFF
5 4.2) EC Sr. No. 1 2 3 4.3) Res	G Amplitude (mV) : Master Reading (mV) 0.50 1.00 2.00 piration Test (Breaths/min):	UUC Reading (mV) 0.51 1.02 2.02	(mV) 0.01 0.02 0.02	5% 5% 5%	PFF
5 4.2) EC Sr. No. 1 2 3 1.3) Res Sr.	G Amplitude (mV) : Master Reading (mV) 0.50 1.00 2.00 piration Test (Breaths/min): Master Reading	UUC Reading (mV) 0.51 1.02 2.02 UUC Reading	(mV) 0.01 0.02 0.02 Deviation	5% 5% 5%	PFF
5 4.2) EC Sr. No. 1 2 3 4.3) Res Sr. No.	G Amplitude (mV) : Master Reading (mV) 0.50 1.00 2.00 piration Test (Breaths/min): Master Reading (mV)	UUC Reading (mV) 0.51 1.02 2.02 UUC Reading (mV)	(mV) 0.01 0.02 0.02 Deviation (mV)	5% 5% 5% Tolerance (±%	PFF

Sr. No.	CG Arrhythmia : Set on Master	Observed on UUC	Set on Master	01	ed on UUC	No. 2 of 3	
1	V Tach 160bpm	Ok	TV Paced 75 bpm		Ok	Result	
2	V Tach 200bpm	Ok	A Fib Coarse		Ok Ok	Pass Pass	
120	BP Parameter :					1 1 035	
Sr. No.	Master Reading	UUC R	eading	Deviation	Tolerance (±%	Result	
1	(mmHg)	(mm	Hg)	(mmHg)	Tolerance (1%) Result	
2	60 / 30 120 / 80	61 / 29		1 / -1	5%	Pass	
3	120 / 80 200 / 150	121 / 80		1/0	5%	Pass	
	O2 Parameter :	199 / 149	9	-1 / -1	5%	Pass	
Sr.	Master Reading	1					
No.	@60 BPM	UUC R		Deviation	Toleran (±%)		
1	% SpO2 70	% SpO2		% SpO2		0	
2	85	69 85		-1		5% Pa	
3	100	9		-1	5%	1000	
4.7) Ten	nperature :					1	
Sr. No.	Master Reading	UUC R	eading	Deviation	Tolera (±*		
NO.	°C	•(11 MIL	°C		-	
1	25.0	24	120	42 -1.0		% F	
2	30.0	29		-0.2		%	
3	40.0	39	7	-0.3	1 5	5%	
			*PUT	NE			

acking ng Type Live-Neutral Live-Earth Neutral-Earth 	Measured Values 235.78 237.18 1.63 0.876 110 116	Tolerance 210 to 240 V 210 to 240 V 210 to 5 V < 5 ohm	Remarks Pass Pass
ng Type Live-Neutral Live-Earth Neutral-Earth 	Measured Values 235.78 237.18 1.63 0.876 110 116	Tolerance 210 to 240 V 210 to 240 V 0 to 5 V	Pass
ng Type Live-Neutral Live-Earth Neutral-Earth 	Measured Values 235.78 237.18 1.63 0.876 110 116	Tolerance 210 to 240 V 210 to 240 V 0 to 5 V	Pass
Type Live-Neutral Live-Earth Neutral-Earth — Normal Close (NC) Normal Open (NO) Normal Open Close (NCC) Normal Open Close (NCC) Normal Close Open (NCO) Normal Close Close (NCC)	Measured Values 235.78 237.18 1.63 0.876 110 116	Tolerance 210 to 240 V 210 to 240 V 0 to 5 V	Pass
Live-Neutral Live-Earth Neutral-Earth 	235.78 237.18 1.63 0.876 110 116	210 to 240 V 210 to 240 V 0 to 5 V	Pass
Live-Neutral Live-Earth Neutral-Earth 	235.78 237.18 1.63 0.876 110 116	210 to 240 V 210 to 240 V 0 to 5 V	Pass
Live-Earth Neutral-Earth — Normal Close (NC) Normal Open (NO) Normal Close Close (NCC) Normal Close Open (NCO) Normal Close Close (NCC)	237.18 1.63 0.876 110 116	210 to 240 V 0 to 5 V	Concerned of the
Normal Close (NC) Normal Open (NO) Normal Close Close (NCC) Normal Open Close (NOC) Normal Close Open (NCO) Normal Close Close (NCC)	1.63 0.876 110 116	0 to 5 V	Pass
Normal Open (NO) Normal Close Close (NCC) Normal Open Close (NOC) Normal Close Open (NCO) Normal Close Close (NCC)	0.876 110 116		Dees
Normal Open (NO) Normal Close Close (NCC) Normal Open Close (NOC) Normal Close Open (NCO) Normal Close Close (NCC)	110 116		Pass
Normal Open (NO) Normal Close Close (NCC) Normal Open Close (NOC) Normal Close Open (NCO) Normal Close Close (NCC)	116	< 500 µA	Pass
Normal Open Close (NOC) Normal Close Open (NCO) Normal Close Close (NCC)		< 500 µA	Pass
Normal Close Open (NCO) Normal Close Close (NCC)	0.7	< 10 µA	Pass
Normal Close Close (NCC)	0.8	< 10 µA	Pass
	0.8	Aµ 10 ×	Pass
everse Close Close (RCC)	0.5	< 10 µA	Pass
	0.4	< 10 µA	Pass
Normal Close Close (NCC)	0.3	< 10 µA	Pass
ntten permission for the publication nical Services, Pune". Indard H N I Ca	Approved By		
*PUNE *	Quality Manager		
alibr e tim ritten nica	e of and under the stated co n permission for the publication I Services, Pune".	ation. UUC stands for Unit Under Calibration. the of and under the stated conditions of measurement. In permission for the publication of an approved abstract a Services, Pune". In HALL Approved By	ation. UUC stands for Unit Under Calibration. te of and under the stated conditions of measurement. a permission for the publication of an approved abstract a Services, Pune". d. H.N. Approved By f. SM.

Neonatal Warmer Care

May 2016 – May 2017

				PH	HOENI
		CERTI	FICATE OF CAL	IBRATION	
Certificate No	: PMS/C100	/16-17		Date of Iss	ue: 23.05.2016
This is to certi referred below	ify that the f	ollowing	equipment has b	een calibrated a	as per the details
CUSTOMER			; Krishna Instit	ute of Medical S	ciences, Karad
Ref: Service R	Report No an	d Date	: 12156, 05.05.20	016	
EQUIPMENT	Details:				
Equipment	Model	SI. No	Set Temperature	Baby Temp. On Calibrated Probe	Baby Temp. After Calibration
Neonatal Warmer Care System	NWC100	2278	36.6 °C	36.6 °C	36.8°C
Master Fauin	mont Used:		$\left(\begin{array}{c} \varphi \end{array} \right)$	12	
Master Equip		Phoeni	x SI No. 444532	X	
Carrow Streamer	ated Probe -		x SI. No. A44532 : Ma¥ 5 th 2016	X	
• Calibra DATE OF CA	ated Probe – LIBRATIO	N		TH	
• Calibra DATE OF CA	ated Probe – LIBRATIO	N	: Ma¥ 5th 2016	N.D.	
• Calibra DATE OF CA CALIBRATIC Remarks: > The rec	ated Probe – LIBRATIO ON NEXT D calibration in	N UE ON	: Ma¥ 5 th 2016 : Ma¥ 4 th 2017 should be determ		the user's requirement
• Calibra DATE OF CA CALIBRATIC Remarks: > The rec	ated Probe – LIBRATIO ON NEXT D calibration in	N UE ON	: Ma¥ 5 th 2016 : Ma¥ 4 th 2017		
• Calibra DATE OF CA CALIBRATIC Remarks: > The rec	ated Probe – LIBRATIO ON NEXT D calibration in calibration in	N DUE ON nterval : n this ce	: MaY 5 th 2016 : MaY 4 th 2017 should be determ ertificate relate o		
 Calibra DATE OF CA CALIBRATIC Remarks: > The res > The res 	ated Probe – LIBRATIO ON NEXT D calibration in calibration in	N DUE ON nterval : n this ce	: MaY 5 th 2016 : MaY 4 th 2017 should be determ ertificate relate o		
 Calibra DATE OF CA CALIBRATIC Remarks: > The res > The res 	ated Probe - LIBRATIO ON NEXT D calibration in sults stated in ledical System D SIGNATIO	N DUE ON nterval : n this ce	: MaY 5 th 2016 : MaY 4 th 2017 should be determ ertificate relate o		
• Calibra DATE OF CA CALIBRATIO Remarks: > The res > The res For Phoenix M	ated Probe - LIBRATIO ON NEXT D calibration in calibration in cali	N DUE ON Interval in in this co	: MaY 5 th 2016 : MaY 4 th 2017 should be determ ertificate relate o	nly to the item o	calibrated.

June 2017 – June 2018

				PH	
	CER	TIFICA	TE OF CALIBRA	TION	
Certificate No:	PMS/C003/17-1	8		Date of Issue:	17.07.2017
	y that the follow		oment has been ca		
CUSTOMER			\bigcirc	C	as Karad
Ref: Service Re	Dont No. 1 D		shna Institute of	Medical Scier	ices, Karao
EQUIPMENT		te : M2	809 / 28.06.2017		
	ortans:	7	5	1 11	
Equipment		B		Baby Temp. On Calibrated	
	re System NWC100	SI. No 2278	Set Temperature 36.5 ° C	Probe 36.6 ° C	Calibration 36.5 °C
ATE OF CALI		: 28.0	06.2017		
OATE OF CALI ALIBRATION emarks: ➤ The recali	BRATION NEXT DUE O bration interva	: 28.0 N : 28.0 I should	6.2017 6.2018 be determined b		
OATE OF CALI ALIBRATION emarks: ➤ The recali	BRATION NEXT DUE O bration interva s stated in this	: 28.0 N : 28.0 I should certificat	6.2017 6.2018		
ATE OF CALI ALIBRATION emarks: > The recali > The result r Phoenix Med THORISED S	BRATION NEXT DUE O bration interva s stated in this ical Systems P ICNATORY	: 28.0 N : 28.0 I should certificat	6.2017 6.2018 be determined b	the item calil	

May 2018 – May 2019

				PF		XIL
	c	ERTIF	ICATE OF CALL	BRATION		
Certificate No:					e: 30.05.2018	
This is to certif referred below	y that the fo	llowing	equipment has be	een calibrated as	per the details	
CUSTOMER			: Krishna Institu			
Ref: Service Ro	eport No and	Date	: N02356 dt. 25.0	05.2018	iences, Karad	
EQUIPMENT	DETAILS					
Equipment	Model	SI. No	Set Temperature	Baby Temp. On Calibrated Probe	Baby Temp. After Calibration	
Neonatal Warmer Care	NWC100	2278	36.5 °C	36.4 °C	36.4 °C	
DATE OF CAI CALIBRATIO Remarks:	LIBRATION N NEXT DU	JE ON	x Sl. No. A74760 : 25.05.2018 : 25.05.2019 ould be determin ificate relate only	ed based on the	e user's requir librated.	rements
For Phoenix M AUTHORISET		RELW .	Ltd			
32/ CIN	4. Jawaharlal Ne	hru Salai.	dical Systems Ekkattuthangal, P.O.B 3 9144 2225 11 Toll Free No. 1 800 42 1.com • www.phoet	77, 2225 1178 Fax :	91 44 2225 0 194	
	sales : sales	@pmsinc	I.com			

May 2019 – May 2020

			PH	
	CERTIF	ICATE OF CALI	BRATION	
Certificate No:	PMS/C003/19-20		Date	of Issue: 26.04.2019
This is to certify	that the following equips		ibrated as per the de f Medical Science, K	
Ref: Service Re EQUIPMENT I		1722 dt. 23.03.201), \
Equipment	Model No	Set Temperature	Baby Temp. On Calibrated Probe	Baby Temp. After Calibration
Neonatal Warmer Care	NWC100 2278	36.5 °C	36.4 °C	36.4 °C
Master Instrum • Calibra	nent Used: nted Probe – Phoenix SI.	No. A74760	K	20
	JBRATION N NEXT DUE ON	: 23.03.2019 : 22.03.2020	5 C	5
Remarks:	pration interval should b	e determined ba	sed on the user's ro	equirements
> The results	s stated in this certificate	e relate only to the	e item calibrated.	
X	edical Systems Per Lid	and the second s		
AUTHORISTO	SIGNATOR	ANT		
	Phoenix Med	ical System	s Private Limi	ted
	2/4, Jawaharlal Nehru Salai, IN : U85110TN1987PTC014743	14		DO 032 INDIA

Defibrillator

May 2016 – May 2017

TYS A	LIABLE HOUS Pimpri, Pune Cell : 770919 E-mail Web. : y	6666, 777	34-35, Sant Telefax : 02/ 4055755, 7; 010@gmail. letechnical	0-27421170	gar,	0 9001:2008
	C	ALIBRATIC	ON CERTIF			Akkreditierungsstel D-7M 16033-01-00
1.CUSTOMER Krishna Institute Of Medical	:- Sciences		Page No.	ICATE		
neemed University.				:- 1	of 1	
Karad ,Dist.Satara- 415110			Certificate No.			
Ambient Temp. (°C)	:- 23.7		Date of Received	1 - 1	3.16.05.01.079 18.05.2016	
Relative Humidity (%RH) Location of calibration	:- 53 :- In lab/On site		Date of Calibration	on - O	8.05.2016	
Condition of Item	:- OK		Calibration meth		7.05.2017	(Customer sugge
2. Description of Item				50 NO. :- F	TS/BM/WI/05	Costoner sogge
Name	:- Defibrilliator					
Id No	- KIMSDU/CVTS/DF	-01	Make	:- 2	Coll	
Sr No	:		Model No. Location	:- 1	A series	
3.Details of Equipment used t	or calibration			1- 0	CVTS (Ward No-1)	
Name	:- Defibrillator Analyz	ter				
Certified By	:- Fluke					
ID/Sr. No.	:- 3387041					
Calibration Validity	:- 12.01.2017					
4.Calibration Results	:-					
1.ECG Test(with ECG Cable or	with Patient Pads)				Sector Sector	
Parameter	Set	Obeserved	Set	Obeserved	Tolomous	
	30 NSR	30 NSR			Tolerance	Result
Heart Rate(Beats/min)	60 NSR		120 NSR	120 NSR	5%	Pass
	90 NSR	61 NSR	180 NSR	180 NSR	5%	Pass
	0.5	90 NSR	240 NSR	241 NSR	5%	Pass
Amplitude(mV)	1	0.5	1.5	1.3	5%	Pass
	Bigeminy	ОК	Vent fib	OK	5%	Pass
	Vent tach	OK	Atrl fib	OK	-	Pass
ECG Arrythmia	Atrl tach	ОК	Supravent tach	ОК	-	Pass
2.Energy Test(in Joule)						1 000
Set	Obesei	rved	Set	Observed	Tolerance	Result
5.00		ar (esta)	50.00	50.00	5%	Pass
10.00	5.0		70.00	70.00	5%	Pass
CHARGE TIME TEST(in second		12	10.00	10.00		
Set Energy(joule)			Tolerance(%)	Target Time(sec)	Charge Time(sec)	Result
	Obeserved Er		5%	3.00	3.40	Pass
200.00	200.0	100	5%	5.00	5.00	Pass
Data: This certificate refers only to the part The calibration results reported in the Calibration point were selected as point This certificate shall not be reproduce a been obtained from the Technical allibrated By	e certificate are valid at the er customer specifications.	libration. UUC sta time of and under tten permission for	the publication of an		Approved Balling Quality Manager	-
bration Engineer	121	- 10 13	Ell.	and the second second	R.D. Bodhe	
moration Engineer	litt	1 25 18	//	1		
N.Borse	1de	-	/		and the second s	t tatti bit imit bit ibt mi

May 2017 – May 2018



RELIABLE TECHNICAL SERVICES

"RELIABLE HOUSE" 497/2834-35, Sant Tukaram Nagar, Pimpri, Pune - 411018. Telefax : 020-27421170 Cell : 7709196666, 7774055755, 7774055855 E-mail : reliable1010@gmail.com Web. : www.reliabletechnicals.com



Akkreditierungsstelle D-7M-16033-01-00

	CALIE	SRATION C	CERTIFICATE			
1.CUSTOMER Krishna Institute Of Medical Scier Deemed University, Karad, Dist Satara- 415110 Ambient Temp. Relative Humidity Location of calibration Condition of Item	25 ± 4°C 270% RH In lab/On site OK		Page No. Certificate No. Date of Received Date of Calibration Next Calibration Due Calibration method f	:- E :- 1 :- 1	of 2 IM 17.05.03.400 I1.09.2017 I1.09.2017 I0.09.2018 RTS/BM/WI/05,01	
2. Description of Item						-
Name ID No. Sr No.	- Defibrillator - KH/W-1/DFB-01 - T12CL8192		Make Model No. Location	(+)	Zoll Biphasic CVTS(WNO 1)	
3.Details of Equipment used for ca				100		
Name Certificate No. Certified By D/Sr. No. Calibration Validity	 Electrical Safety 16121280-ESA6 Tektronix 3366061 26.12.2017 		Defibrillator Analyze 16121281-IMPULSE Tektronix 3387041 26.12.2017	r 5 7000DP-3387	041-1	
Calibration Results	9					_
.ECG Test(with ECG Cable or with	Patient Pads)	A.1.				
Parameter	Set	Obeserved	Set	Obeserved	Tolerance (±%)	Result
	30 NSR	30 NSR	120 NSR	120 NSR	5%	Pass
Heart Rate(Beats/min)	60 NSR	60 NSR	180 NSR	180 NSR	5%	Pass
	90 NSR	90 NSR	240 NSR	240 NSR	5%	Pass
	0.5	0.5	1.5	1.3	5%	Pass
Amplitude(mV)	1	1	-		5%	Pass
	Bigeminy	OK	Vent fib	OK	-	Pass
ECG Arrythmia	Vent tach	ОК	Atrl fib	OK	-	Pass
	Atri tach	ОК	Supravent tach	ОК	-	Pass
Energy Test(in Joule)						
Set	Obes	erved	Set	Observed	Tolerance (±%)	Resu
5.00	5.	02	50.00	50.01	5%	Pass
10.00	10	.05	70.00	70.04	5%	Pass
HARGE TIME TEST(in seconds)						
Set Energy(joule)	Obeserved E	Energy(joule)	Tolerance (±%)	Target Time(sec)	Charge Time(sec)	Resu
200.00	200	0.05	5%	3.00	3.02	Pas
150.00	the second se	0.13	5%	5.00	5.05	Pas
			JIABLE TECH	CAL		
		1	The series	1		

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			Pa	ge No. 2 of
Certificate No.	BM.17.05.03.400	fotu		
4 Test Results	Electrical Sa	lety		
A) Visual Test :			Remarks	\$
Sr. No.	Tests			
31.110.	Power Cords, Cables Checking			
	Mains Socket Checking			
2	Equipment Type (B, BF, CF)		В	
3	Equipment Class (I, II, III)			
4	P. P. J. Time RE Body Float Type CF-Cardi	ac Float Type		
	I-Properly Earthed ,II-Double Insulation,III-With Extr	ra Low Safety Voltage		
B) FUNCTIONAL TES			ed Values	Remarks
Sr.No	Parameters	236.10	(210-240V)	OK
	Voltage between Live and Neutral (Vin)	230.10	A	OK
-	Voltage between Live and Earth(VIe)	236.84	(210-240V)	OK
2		1.02	(0-5V)	OK
3	Voltage between Neutral and and Earth (Vne)	0.6	(0-10µA)	OK
4	Enclosure Current	0.6	(o-ropro)	
		122	(0-500µA)	OK
5	Leakage Current (IL)	0.4	(BF-0-100µA) (CF-0-10µA)	ок
6	Patient Leakage Current (PL)			

Note: 1) This certificate refers only to the particular item submitted for calibration. UUC stands for Unit Under Calibration. 2) The calibration results reported in the certificate are valid at the time of and under the stated conditions of measurement. 3) Calibration point were selected as per customer specifications. 4) This certificate shall not be reproduced, except in full unless written pechicsion for the publication of an approved abstract has been obtained from the Technical Manager of "Reliable Technical Services, Pupe" the publication of an approved abstract

Calibrated By (plable Calibration Engineer

Rahul Sable RF-21, R0

Approved By Bal Quality Manager R.D.Bodhe

May 2018 – May 2019

L	Pimpri Cell	HOUSE" 497/2834-3	0@gmail.com	RIF CERTIFICATION ISO 9001:201 ACCREDITY IAS, US MICH.	D BY
		CALIBRATION	CERTIFICATE		
Deemed Unive Karad ,Dist Sat	itute Of Medical Scienc ersity, tara- 415110	:05	Page No. Certificate No. Date of Received Date of Calibration Next Calibration Due On	:- 1 of 3 :- BM.18.05.01.04 :- 01.05.2018 :- 01.05.2018 :- 30.04.2019	1
Ambient Tem Relative Hum Location of ca Condition of It	nidity :- <7 alibration :- Or tem :- Of		Calibration method No.	:- RTS/BM/WI/03	.01
2. Descriptio Name ID No Sr No.	:- De :- KH	efibrillator H/W-01/DF-01 12C128192	Make Model No. Location	:- Zoll :- Biphasic :- CVTS Ward N	10-01
3.Details of E Name Certificate No Certified By ID/Sr. No.	р. :- 18 :- Те :- 33	efibrillator Analyzer 3444405-IMPULSE 7000 ektronix 387041	DP-3387041-1 18444407- Tektronix 3366061	Safety Analyzer ESA612-3366061-1 8	
Name Certificate No Certified By	:- De b. :- 18 :- Te :- 33 alidity :- 28	efibrillator Analyzer 3444405-IMPULSE 7000 ektronix 387041 3.12.2018	DP-3387041-1 18444407- Tektronix	ESA612-3366061-1	
Name Certificate No Certified By ID/Sr. No. Calibration Va 4.Calibration	:- De b. :- 18 :- Te :- 33 alidity :- 28	efibrillator Analyzer 3444405-IMPULSE 7000 ektronix 387041 3.12.2018	DP-3387041-1 18444407- Tektronix 3366061	ESA612-3366061-1	
Name Certificate No Certified By ID/Sr. No. Calibration Va 4.Calibration 4.1) ECG Hea Sr. No.	:- De . :- 18 :- Te :- 33 alidity :- 28 Results :- art Rate(Beats/min) : Master Reading	efibrillator Analyzer 3444405-IMPULSE 7000 ektronix 387041 3.12.2018 UUC Reading	DP-3387041-1 18444407- Tektronix 3366061 27.12.2011 Deviation	ESA612-3366061-1 8 Tolerance	Resul
Name Certificate No Certified By ID/Sr. No. Calibration Va 4.Calibration 4.1) ECG Hea Sr. No. 1	:- De :- 18 :- Te :- 33 alidity :- 28 Results :- art Rate(Beats/min) : Master Reading (BPM)	efibrillator Analyzer 3444405-IMPULSE 7000 ektronix 387041 3.12.2018 UUC Reading (BPM)	DP-3387041-1 1844407- Tektronix 3366061 27.12.2010 Deviation (BPM)	ESA612-3366061-1 8 Tolerance (±%)	Resul
Name Certificate No Certified By ID/Sr. No. Calibration Va 4.Calibration 4.1) ECG Hea Sr. No. 1 2	:- De :- 18 :- Te :- 33 alidity :- 28 Results :- art Rate(Beats/min) : Master Reading (BPM) 30 81	efibrillator Analyzer 3444405-IMPULSE 7000 ektronix 387041 3.12.2018 UUC Reading (BPM) 30	DP-3387041-1 1844407- Tektronix 3366061 27.12.2011 Deviation (BPM) 0	ESA612-3366061-1 8 Tolerance (±%) 5%	Resul
Name Certificate No Certified By ID/Sr. No. Calibration Va 4.Calibration 4.1) ECG Hea Sr. No. 1 2 3	:- De . :- 18 :- Te :- 33 alidity :- 28 Results :- Art Rate(Beats/min) : Master Reading (BPM) 30 81 119	efibrillator Analyzer 3444405-IMPULSE 7000 ektronix 387041 3.12.2018 UUC Reading (BPM) 30 80	DP-3387041-1 1844407- Tektronix 3366061 27.12.2011 Deviation (BPM) 0 -1	ESA612-3366061-1 8 Tolerance (±%) 5% 5%	Resul Pass Pas Pas
Name Certificate No Certified By ID/Sr. No. Calibration Va 4.Calibration 4.1) ECG Hea Sr. No. 1 2 3 4	:- De :- 18 :- Te :- 33 alidity :- 28 Results :- art Rate(Beats/min) : Master Reading (BPM) 30 81 119 179	efibrillator Analyzer 3444405-IMPULSE 7000 sktronix 387041 3.12.2018 UUC Reading (BPM) 30 80 120	DP-3387041-1 1844407- Tektronix 3366061 27.12.2010 Deviation (BPM) 0 -1 1	ESA612-3366061-1 8 Tolerance (±%) 5% 5% 5%	Resu Pas Pas Pas
Name Certificate No Certified By ID/Sr. No. Calibration Va 4.Calibration 4.1) ECG Hea Sr. No. 1 2 3 4 5	:- De . :- 18 :- Te :- 33 alidity :- 28 Results :- Art Rate(Beats/min) : Master Reading (BPM) 30 81 119 179 269	efibrillator Analyzer 3444405-IMPULSE 7000 ektronix 387041 3.12.2018 UUC Reading (BPM) 30 80 120 180	DP-3387041-1 1844407- Tektronix 3366061 27.12.2010 Deviation (BPM) 0 -1 1 1	ESA612-3366061-1 8 Tolerance (±%) 5% 5% 5% 5%	Resul Pass Pass
Name Certificate No Certified By ID/Sr. No. Calibration Va 4.Calibration 4.1) ECG Hea Sr. No. 1 2 3 4 5 4.2) ECG Amp	:- De . :- 18 :- Te :- 33 alidity :- 28 Results :- Art Rate(Beats/min) : Master Reading (BPM) 30 81 119 179 269 plitude (mV) :	efibrillator Analyzer 3444405-IMPULSE 7000 ektronix 387041 3.12.2018 UUC Reading (BPM) 30 80 120 180	DP-3387041-1 1844407- Tektronix 3366061 27.12.2010 0 (BPM) 0 -1 1 1 1 1 1 1	ESA612-3366061-1 8 Tolerance (±%) 5% 5% 5% 5% 5% 5% 5%	Resul Pass Pass Pas
Name Certificate No Certified By ID/Sr. No. Calibration Va 4.Calibration 4.1) ECG Hea Sr. No. 1 2 3 4 5	:- De . :- 18 :- Te :- 33 alidity :- 28 Results :- Art Rate(Beats/min) : Master Reading (BPM) 30 81 119 179 269	efibrillator Analyzer 3444405-IMPULSE 7000 ektronix 387041 3.12.2018 UUC Reading (BPM) 30 80 120 180 270 UUC Reading UUC Reading (mV)	DP-3387041-1 1844407- Tektronix 3366061 27.12.2010 0 (BPM) 0 -1 1 1 1 1 1 1 2 0 0 -1 1 1 1 1 1 1	ESA612-3366061-1 8 Tolerance (±%) 5% 5% 5% 5% 5% 5% 5%	Resul Pass Pass Pass Pass Pass
Name Certificate No Certified By ID/Sr. No. Calibration Va 4.Calibration 4.1) ECG Hea Sr. No. 1 2 3 4 5 4.2) ECG Amp	:- De 18 76 33 34 	efibrillator Analyzer 3444405-IMPULSE 7000 sktronix 387041 3.12.2018 UUC Reading (BPM) 30 80 120 180 270 UUC Reading UUC Reading 0 0 0 0 0 0 0 0 0 0 0 0 0	DP-3387041-1 1844407- Tektronix 3366061 27.12.2011 0 0 -1 1 1 1 1 1 1 1 2 0 0 -1 1 1 1 1 1 1 2 0 0 0 -1 1 1 1 1 1 1 1 1 0 0 0 -1 1 1 1	ESA612-3366061-1 8 Tolerance (±%) 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5%	Resul Pass Pas Pas Pas
Name Certificate No Certified By ID/Sr. No. Calibration Va 4.Calibration 4.1) ECG Hea Sr. No. 1 2 3 4 5 4.2) ECG Amp Sr. No.	:- De 18 76 33 76 33 34 	efibrillator Analyzer 3444405-IMPULSE 7000 ektronix 387041 3.12.2018 UUC Reading (BPM) 30 80 120 180 270 UUC Reading UUC Reading (mV)	DP-3387041-1 1844407- Tektronix 3366061 27.12.2010 0 (BPM) 0 -1 1 1 1 1 1 1 2 0 0 -1 1 1 1 1 1 1	ESA612-3366061-1 8 Tolerance (±%) 5% 5% 5% 5% 5% 5% 5%	Resu Pas Pas Pas Pas Pas Pas Pas



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rtificate No	BM.18.05.01.041			Page	No. 3 of :
NCTIONAL	TEST:				
Sr.No	Parameters	Туре	Measured Values	Tolerance	Remarks
1	Supply Voltage	Live-Neutral	235.43	210 to 240 V	Pass
2	Supply Voltage	Live-Earth	236.81	210 to 240 V	Pass
3	Supply Voltage	Neutral-Earth	1.51	0 to 5 V	Pass
4	Protective Earth Resistance	-	1.02	< 5 ohm	Pass
5	Earth Leakage Current	Normal Close (NC)	1.7	< 10 µA	Pass
6	Earth Leakage Current	Normal Open (NO)	1.8	< 10 µA	Pass
7	Enclosure Leakage Current	NCC	1.1	< 10 µA	Pass
8	Enclosure Leakage Current	NOC	0.7	< 10 µA	Pass
9	Enclosure Leakage Current	NCO	0.4	< 10 µA	Pass
10	Patient Auxiliary Leakage Current	NCC	1.4	< 10 µA	Pass
11	Patient Auxiliary Leakage Current	RCC	1.5	< 10 µA	Pass

Note:

1) This certificate refers only to the particular item submitted for calibration. UUC stands for Unit Under Calibration.

2) The calibration results reported in the certificate are valid at the time of and under the stated conditions of measurement.

3) Calibration point were selected as per customer specifications.

4) This certificate shall not be reproduced, except in full unless written permission for the publication of an approved abstract has been obtained from the Technical Manager of "Reliable Technical Services, Pune".

5) The Standard used are traceable to National / International Standard. . L SE

Calibrated By

Deable

Calibration Engineer

Rahul Sable

RF-21, R0



Approved By

Quality Manager R.D.Bodhe

O REDMI NOTE 8 PRO

May 2019 – May 2020



3

RELIABLE TECHINICAL SERVICES (Division of Reliable Technocare Pvt. Ltd.) "RELIABLE HOUSE" 497/2834-35, Sant Tukaram Nagar, Pimpri, Pune - 411018. MH, India. Telefax : 020-27421170 Cell : 7774055755, 7774055855,7774058855, 7774022900 Email : reliable1010@gmail.com/reliabletechnocare@gmail.com Web : www.reliabletechnicals.com / www.reliable.world Web. : www.reliabletechnicals.com / www.reliable.world



I.CUSTOME	R :		N CERTIFICATE Page No.	:- 1 of 3	
Krishna Inst	itute Of Medical So	iences	Certificate No.	:- BM.19.04.2	00 022
Deemed Unive			Date of Received	:- 24.04.2019	ference and the
Karad ,Dist.Sa	tara- 415110		Date of Calibration	:- 24.04.2019	
Ambient Tem	ip. :-	25 ± 4°C	Next Calibration Due On		
Relative Hum	idity :-	<70% RH	Calibration method No.		
Location of c	alibration :-	On site			
Condition of	tem :-	OK			
2. Description	on of Item				
Name		Defibrillator	Make	:- Zoll	
		KH/W-01/DF-01	Model No.	:- Biphasic	
Sr No. :- T12C128192		Location	:- CVTS Ward	d No-01	
3.Details of	Equipment used fo	r calibration			
Name		Defibrillator Analyzer	Electrical	Safety Analyzer	
Certificate No	Certificate No. :- 18.12.IH.004		18.12.1H.001		
		RTS	RTS		
		3387041	3366061		
			16.12.2019		
4.Calibration	n Results art Rate(Beats/min	A REAL PROPERTY AND A REAL PROPERTY A REAL PROPERTY AND A REAL PROPERTY A REAL PROPERTY A REAL PROPERTY AND A REAL PROPERTY AND A REAL PROPERTY A REAL PROPERTY AND A REAL PROPERTY A REAL PROPERTY AND A REAL PROPERTY A REAL PROPERT		9	
4.Calibration	n Results	*	16.12.201 Deviation	Tolerance	Resul
4.Calibration 4.1) ECG He	n Results art Rate(Beats/min				Resu
4.Calibration 4.1) ECG He	n Results art Rate(Beats/min Master Reading	:-) : UUC Reading	Deviation	Tolerance	
4.Calibration 4.1) ECG He Sr. No.	n Results art Rate(Beats/min Master Reading (BPM)	:- UUC Reading (BPM)	Deviation (BPM)	Tolerance (±%)	Pass
4.Calibration 4.1) ECG He Sr. No.	n Results art Rate(Beats/min Master Reading (BPM) 30	:- UUC Reading (BPM) 31	Deviation (BPM) 1	Tolerance (±%) 5%	Pass
4.Calibration 4.1) ECG He Sr. No. 1 2	n Results art Rate(Beats/min Master Reading (BPM) 30 81	:- UUC Reading (BPM) 31 80	Deviation (BPM) 1 -1	Tolerance (±%) 5% 5%	Pass Pass Pass
4.Calibration 4.1) ECG He Sr. No. 1 2 3	n Results art Rate(Beats/min Master Reading (BPM) 30 81 121	:- UUC Reading (BPM) 31 80 120	Deviation (BPM) 1 -1 -1 -1	Tolerance (±%) 5% 5% 5%	Pass Pass Pass Pass
4.Calibration 4.1) ECG He Sr. No. 1 2 3 4 5	A Results art Rate(Beats/min Master Reading (BPM) 30 81 121 180	:- UUC Reading (BPM) 31 80 120 180	Deviation (BPM) 1 -1 -1 -1 0	Tolerance (±%) 5% 5% 5% 5%	Pass Pass Pass Pass
4.Calibration 4.1) ECG He Sr. No. 1 2 3 4 5 4.2) ECG Am	n Results art Rate(Beats/min Master Reading (BPM) 30 81 121 121 180 270	:- UUC Reading (BPM) 31 80 120 180	Deviation (BPM) 1 -1 -1 -1 0	Tolerance (±%) 5% 5% 5% 5% 5% 5%	Pass Pass Pass Pass
4.Calibration 4.1) ECG He Sr. No. 1 2 3 4 5	Results art Rate(Beats/min Master Reading (BPM) 30 81 121 180 270 plitude (mV) :	:- UUC Reading (BPM) 31 80 120 180 270	Deviation (BPM) 1 -1 -1 -1 0 0	Tolerance (±%) 5% 5% 5% 5%	Resul Pass Pass Pass Pass Pass Pass
4.Calibration 4.1) ECG He Sr. No. 1 2 3 4 5 4.2) ECG Am	n Results art Rate(Beats/min Master Reading (BPM) 30 81 121 180 270 plitude (mV) : Master Reading (mV) 0.51	:- UUC Reading (BPM) 31 80 120 180 270 UUC Reading	Deviation (BPM) 1 -1 -1 0 0 0 Deviation	Tolerance (±%) 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5%	Pass Pass Pass Pass Pass Resu
4.Calibration 4.1) ECG He Sr. No. 1 2 3 4 5 4.2) ECG Am Sr. No.	n Results art Rate(Beats/min Master Reading (BPM) 30 81 121 180 270 plitude (mV) : Master Reading (mV)	:- UUC Reading (BPM) 31 80 120 180 270 UUC Reading (mV)	Deviation (BPM) 1 -1 -1 0 0 0 0 0 0 0 0	Tolerance (±%) 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5%	Pass Pass Pass Pass Pass Resu Pass
4.Calibration 4.1) ECG He Sr. No. 1 2 3 4 5 4.2) ECG An Sr. No. 1	n Results art Rate(Beats/min Master Reading (BPM) 30 81 121 180 270 plitude (mV) : Master Reading (mV) 0.51	:- UUC Reading (BPM) 31 80 120 180 270 UUC Reading (mV) 0.50	Deviation (BPM) 1 -1 -1 -1 0 0 0	Tolerance (±%) 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5%	Pass Pass Pass Pass Pass Resu



RELIABLE TECHNICAL SERVICES

(Division of Reliable Technocare Pvt. Ltd.) "RELIABLE HOUSE" 497/2834-35, Sant Tukaram Nagar, Pimpri, Pune - 411018. MH, India. Telefax : 020-27421170 Cell : 7774055755, 7774055855, 7774058855, 7774022900 Email : reliable1010@gmail.com/reliabletechnocare@gmail.com Web. : www.reliabletechnicals.com / www.reliable.world



rtificate No. BM.19.04.20.022 Page No. 2 of 3 3) ECG Arrhythmia : Sr. No. Observed on Set on Master Observed on Set on Master UUC Result UUC 1 V Tach 160bpm Ok TV Paced 75 bpm Ok Pass 2 V Tach 200bpm Ok A Fib Coarse Ok Pass 4.4) Energy Test(in Joule): Sr. No. Observed on **Observed on Master** Set on UUC Tolerance Set on UUC Result Master (±%) 1 50.62 50.00 120.13 120.00 5% Pass 2 99.30 100.00 149.28 150.00 5% Pass 4.5) CHARGE TIME TEST(in seconds): Sr. No. **Observed on Master** Target Charge Set on UUC Tolerance (±%) Result Time(sec) Time(sec) 1 150.05 150.00 5% 3.00 3.7 Pass 2 200.91 200.00 5% 5.00 5.6 Pass 4.6) EST : Sr. No. Tests Remarks Power Cords, Cables Checking 1 Ok 2 Mains Socket Checking Ok



Dialysis Machine

May 2016 – May 2017

	CAL	LIBRATION CERTIFICA	
CUSTOMER NAME:	Krishna Hos	A LA	<u>1E</u>
EQUIPMENT :	HEMORY	Ital, Karad	DATE: 9/5/16
	HEMODIALYSIS MAC	HINE(Fresenius)	
MODEL:	40085		Next Due: 6/5/19
SERIAL NUMBER:	8VCAKR93		
HMED	20164808 calibratian	alidity from 15/06/2015 to 14, alidity from 15/06/2015 to 14	
90XL Meter	9x003071 calibration v	alidity from 15/06/2015 to 14, alidity from 15/06/2015 to 14, one the calibration	/06/2016
With the help of HMED & This is to certify this equip	oment is calibrated as p	one the calibration. er manufacturer recommer	/06/2016
		alibration Parameters	
Hydraulic Check		- arameters	
Water Inlet Pressure		1.2 par	1.2 Bar
Dialysis Mode			LI Z DAY
Temperature		37°L	37°C
Conductivity Check		14.5 ms/cm	14.0m5/cm
Dialysate Flow			
800ml/min		837m/min	\$37md/min
500ml/min		528md/min	528m1/min
300ml/min		837m//min 528m//min 333m//min	393 mJ/min
MP Check			4000
rterial Pressure Check			4000
enus Pressure Check			6000
ood Leak		5.0	5.0
nal Check			
Test Performed			Test Passed
t Distriction			Done.
		K	Kunger
		Service	Engineer Signature

 Regd. Office Delhi :

 S - 21, Second Floor, Star City,

 District Centre, Mayur Place,

 Mayur Vibar Prase 1,

 New Delh, 1100/3,

 Tel., 011, 4552 9500, 4564 3300

 Fax: 011 - 4550 9506, 4564 3308

Branch Office Mumbal ; B-307, Everent Grande, Mahakali Cavas Road, Andheri (East), Mumbai - 400 093 Tel.: 022 - 4217 6500 Telefax: 022 - 4217 6501 Branch Office Kolkata : 4th Floor, Akash Tower, 781, Ananchur, EM bypais, Kolkuta - 700107 761, 033 - 3040 9500 Telefax : 033 - 3090 9506 Branch Office Chennai : No. 6.8.7, 3rd Floor, Kasi Arcade, 116.5% Thyagaraya Road, Thyagaraya Rogar, Chennai - 600.017 Tet : 044 - 4396.0900 Flox : 044 - 4396.0915

May 2017 – May 2018

FRESENIUS MEDICAL CARE

THE RENAL COMPANY

CALIBRATION CERTIFICATE

KRISHNA INSTITUTE MEN
KRISHNA INSTITUTE MEDICAL HOSPITAL, KARAD HEMODIALYSIS MACHINE(Fresenius)
40085
8VCAKR93
20204808 calibration validity from 25/07/2016 to 24/07/201 9X003071 calibration validity from 25/07/2016
9X003071 calibration validity from 25/07/2016 to 24/07/201 & 90XI Meter we have done the

DATE: 5/5/2017 415/2018

With the new of this equipment is calibrated as per manufacturer recommendation.

	Calibration Parameter	
Hydraulic Check		3
Water Inlet Pressure	1.2 bar	
Dialysis Mode		1. 1 bord
Temperature	37°C	2/ 98-
Conductivity Check	14.5	36.9%
Dialysate Flow		1410
800ml/min	837	828
500ml/min	537	519
300ml/min	330	339
MP Check		Done
rterial Pressure Check		Done
enus Pressure Check		Done
ood Leak	5.0V	5.0V
nal Check		
Test Performed		Possed
tDisinfection		Done
Tour I		Arrow.
Nortes de atory		ice Engineer Signature

Fresenius Medical Care India Private Limited

Regd. Office : S-21, Second Floor, Star City, District Centre, Mayur Palace, Mayur Vihar Phase 1, New Delhi 110091 Web: www.fresenius:neclicalcare asia

Corporate Office Gurgaon :
 Corporate Office Gurgaon :
 Branch Office Multiple

 14h Floor, SAS Tower-B,
 B-307, Everest Grande,

 The Medicity, Sec-38,
 Mahakali Caves Road,

 Gurgaos, 12201
 NOTE 8 PRO

 Set, 0124 - 6642500
 Tel, 022 - 4217 6500

 Set, 0124 - 6547505
 CAMERA

 Telefax: 022 - 4217 6501

Branch Office Mumbal :

Branch Office Kolkata : 4th Floor, Akash Tower, 781, Anandpur, EM bypass, Kolkata 700107 Tel. 033 3090 9500 Telefax 033 3090 9506

Branch Office Chennai : Branch Onice Chemiai : No. 6.8.7, 3rd Floor, Kasi Arcade, 116, Sir Thyagaraya Road, Thyagaraya Nagar, Chemai - 600 017 Tel : 044 - 4396 0900 Fax : 044 - 4396 0915

May 2018 – May 2019

FRESENIUS **MEDICAL CARE**

THE RENAL COMPANY

CALIBRATION CERTIFICATE

CUSTOMER NAME:	KRISHNA INSTITUTE MEDICAL HOSPITAL, KARAD
EQUIPMENT :	HEMODIALYSIS MACHINE (Fresenius)
MODEL:	4008 5
SERIAL NUMBER:	8VCAKR93
HMED	26953015 calibration validity from 28/08/2017 to 27/08/2018
90XL Meter	9X003071 calibration validity from 28/08/2017 to 27/08/2018

CAL DATE: 28.05.2018 DUE DATE: 27.05.2019

This is to certify this equipment is calibrated as per manufacturer recommendation.

	Calibration Parameters	
Hydraulic Check		
Water Inlet Pressure	1.2 bar	
Dialysis Mode		
Temperature	37°C	
Conductivity Check	14.0 ms/cm	
Dialysate Flow		
800ml/min	816	
500ml/min	528	
300ml/min	319	
MP Check		
rterial Pressure Check		
enus Pressure Check		
lood Leak	5.01	
nal Check		
1 Test Performed		
ot Disinfection		
The way	PHIN	••
uthorized Signatory	Service Engineer Sig	

Fresenius Medical Care India Private Limited

CIN- U24231DL2006FTC147436

Regd. Office : S-21, Second Floor, Star City, District Centre, Mayur Palace, Mayur Vihar Phase-1, New Dalhi-110091 Web: www.freseniusmedicalcare.asia

Corporate Office Gurgaon : 14th Floor, SAS Tower-B, The Medicity, Sec-38,
 Ine Medicity, Sec-38,
 Manaaaa Caves Hoad,

 Gargaos, 122057,
 Andhen (East), Mumbai 400 093.

 Tel F352 V/44.1(8)TE S PRO
 Tel. 022 - 4217 6500

 Fax: 0124 - F642506
 FAMERA

Branch Office Mumbai : B-307, Everest Grande, Mahakali Caves Road,

Branch Office Kolkata : 4th Floor, Akash Tower, 781, Anandpur, EM bypass, Kolkata - 700107 Tet. - 033 - 3090 9500 Telefax : 033 - 3090 9506

Branch Office Chennal : No. 6 & 7, 3rd Floor, Kasi Arcade, 116, Sir Thyagaraya Road, Thyagaraya Nagar, Chennai – 600 017 Tel. 044 - 4396 0900 Fax: 044 - 4396 0915

May 2019 – May 2020

FRESENIUS MEDICAL CARE CALIBRATION CERTIFICATE CUSTOMER NAME: Krishna Institute of Medical Sciences, HEMODIALYSIS MACHINE(Fresenius) 40005 SVCAKR93 EQUIPMENT : DATE 10/5/2019 +0 MODEL SERIAL NUMBER 020212010 HMED 24222913 calibration validity from 28/05/2018 to 27/05/2019 90XL Meter 3345310105000746 calibration validity from 28/05/2018 to 27/05/2019 With the help of HMED & 90XI Meter we have done the calibration. This is to certify this equipment is calibrated as per manufacturer recommendation. **Calibration Parameters** Hydraulic Check Water Inlet Pressure 1.2 Bar 1.2 Bar **Dialysis Mode** Temperature 37'2 36.9 Conductivity Check 14.0 14.2 **Dialysate Flow** 800ml/min 837 837 500ml/min 528 537 300ml/min 330 330 TMP Check Done Arterial Pressure Check Done Venus Pressure Check Done Blood Leak 5.0V 5.00 **Final Check** T1 Test Performed Done Hot Disinfection Done Vilin . Authorized Signatory Service Engineer Signature

Fresenius Medical Care India Private Limited

CIN- U24231DL2006FTC147436

Regd. Office : S-21, Second Floor, Star City, District Centre, Mayur Palace, Mayur Vihar Phase-1, New Delhi-110091 Web: www.freseniusmedicalcare.asia

Corporate Office Gurgaon : 14th Floor, SAS Tower-B, The Medicity, Sec-38, Gurgaon-122001 Tel.; 0124 - 6642500 Fax: 0:24+ 3642500 A QUAD CAMERA Branch Office Mumbal : B-307, Everest Grande, Mahakall Caves Road, Andheri (East), Mumbal - 400 093 Tel.: 022 - 4217 6500 Telefax: 022 - 4217 6501

Branch Office Kolkata : 4th Floor, Akash Tower, 781, Anandpur, EM bypass, Kolkata - 700107 Tel: (333 - 3090 9500 Telefax : 033 - 3090 9506

Branch Office Chennai : 2nd Floor (VTB Center), Old No-4, New No-7, South Boag Road, T. Nagar, Chennai - 600 017 Tel : 044 - 4396 0900 Fax : 044 - 4396 0915

Ecg Machine

Mar 2016 - Mar 2017

Test R	eport on	E.C.G. Mach	
Date of	Calibration	2-Mar-16	inter
Calibra	tion Due Date	1-Mar-17	a for the state of
	tion Report No.	bpl/hms/16C02L05	
Name a	and Address of the organisation	Krishna Institute of Medical Science Deemed University Malkapur, Karad, Satara - 415539,	
and the second		Maharashtra	
Description of Item		Electo-Cardiogram Machine Model - CARDIART 9108 Sr.No DUTD4L2854	
Tests De	one	Calibration	
Equipm	ents Used for testing:		
lame of	f the equipment	' Equipment serial no	Due Date
Aultipara	a Simulator/ Fluke/ prosim 4	3231007	11-Aug-16
erform	ance Check : PARAMETER	SPECIFICATION	VALUE
1	Key operations	OK/NOT OK	OK
2	Esc front assy tilting	OK / NOT OK	OK
3	LED Alignment	OK / NOT OK	OK
4	Line LED indication	OK / NOT OK	OK
_	Battery Trickle Charge check	OK / NOT OK	ОК
5	Battery Charge voltage at BAT+	15.4V - 17.6 V	15.8V
5 6	and the second sec	OK / NOT OK	OK
-	Lead Off indication at all leads		
6	Real Time Clock display & Adjustments	OK / NOT OK	ОК
6 7		OK / NOT OK OK / NOT OK	ок ок
<u>p</u>	Line LED indication Battery Trickle Charge check	OK / NOT OK OK / NOT OK	OK OK
6		OK / NOT OK	OK
6 7		OK / NOT OK	OK
6 7	Real Time Clock display & Adjustments	CONTRACTOR AND	7-32/
6 7 8	Real Time Clock display & Adjustments	CONTRACTOR AND	

RPI Medical Technologies Private limited

11	PARAMETER	SPECIFICATION	
12	Printing & Display Formats Check	SPECIFICATION	VALUE
13	Do Onset (At max gain)	OK / NOT OK	OK
14	Noise at short circuit.	1 Pixel max 2 Pixels max	ОК
15	50Hz Notch Filter operation	2 Pixels max	1pix
16	CMRR	2 Pixels max	1pix
	GAIN / Sensitivity selections (mm)		2pix
	05 mm	+/-1mm	05 mm
	10 mm	+/-1mm	10 mm
17	20 mm	+/-1mm	20 mm
17	Memory Check	OK / NOT OK	OK
18	Printing Linearity Check	OK / NOT OK	OK
19	Paper Transportation Speed (mm/sec)		UN
	at 25mm/sec	+/-1mm	25mm/sec
1.11	at 50mm/sec	+/-2mm	50mm/sec
20	Thermal Head Alignment	OK / NOT. OK	OK
21	Black Mark Sense testing	OK / NOT OK	OK
22	HR rate Accuracy check (bpm)		
	30 BPM	+/-1BPM	30 BPM
	60 BPM	+/-1BPM	60 BPM
	120 BPM	+/-1BPM	120 BPM
23	LCD contrast check	No fading	ОК
24	Low Battery Indication	OK / NOT OK	OK
25	HV Break Down test@ 1.5KV for 1 minute	OK / NOT OK	ОК
26	DF Discharge check - Sampling for 5 sets	OK / NOT OK	ОК
27	Reset Recovery within 0.5s after defibrillation	OK / NOT OK	OK
28	All self tests	OK / NOT OK	OK
	User Equipment ID		
	CALIBRATION STATUS	ОК	
Edis .			
	TESTED & CALIBRATED BY		
	SOULS POL		
	C ()		
	VI (ALEFPARAE		
	For BP Medical Technologies Pvt.Ltd.		
	and the second s		

Oser Equipment iD	
CALIBRATION STATUS	ок

Failer

April 2017 - Mar 2018

Name an	d Address of the organisation	KRISHNA INSTITUTE OF I SCIENCES DEEMED UNIV	MEDICAL VERSITY	
-		KARAD	11 1 1 1 1 1 1 1 1 1 1	
		DIST-SATARA	C TO GO TO THE REAL	
Descripti	on of Item	MAHARASHTRA		
and the second second		Electo-Cardiogram Machine Model - CARDIART 9108		
		Sr.No DUTD4L2854		
Tests Done		Calibration	Alter and the	
	ents Used for testing:			
	the equipment	Calibration report No. 16121290-Prosim 4-	Due Date	
MPM sim	nulator / FLUKE Prosim4 / 2767019	2767019-1	29-Dec-17	
Dedam	ance Check :			
SL.NO	PARAMETER	SPECIFICATION	VALUE	
1	Key operations	OK / NOT OK	OK	
2	Esc front assy tilting	OK / NOT OK	OK	
	LED Alignment	OK / NOT OK	OK	
-0-	Line LED indication	OK / NOT OK	OK OK	
5	Battery Trickle Charge check	OK / NOT OK	15.8V	
6	Battery Charge voltage at BAT+	15.4V - 17.6 V	OK	
7	Lead Off indication at all leads	OK / NOT OK	OK	
8	Real Time Clock display & Adjustments	OK/NOTOK	OK	
9	Set up menu display and Adjustments	No ambiguities	OK	
10	Display	OK / NOT OK	OK	
11	Printing & Display Formats Check	I Pixel max	OK	
12	DC Offset (At max gain)	2 Pixels max	1pix	
13	Noise at short circuit.		1pix	
	50Hz Notch Filter operation	2 Pixels max	2pix	
14	CMRR	2 Pixels max		
15	GAIN / Sensitivity selections (mm)		05 mm	
16	GAIN / Sensitivity selections (may)	+/-1mm	BPL	

10 mm	+/-1mm	10 mm
20 mm	+/-1mm	20 mm
Aemory Check	OK / NOT OK	
Printing Linearity Check	OK / NOT OK	OK
Paper Transportation Speed (mm/sec)	OKTNOTOK	OK
at 25mm/sec	+/-1mm	25mm/sec
at 50mm/sec	+/-2mm	50mm/sec
Thermal Head Alignment	OK / NOT OK	OK
Black Mark Sense testing	OK / NOT OK	OK
HR rate Accuracy check (bpm)		
30 BPM	+/-1BPM	30 BPM
60 BPM	+/-1BPM	60 BPM
120 BPM	+/-1BPM	120 BPM
LCD contrast check	No fading	OK
Low Battery indication	OK / NOT OK	OK
HV Break Down test@ 1.5KV for 1 minute	OK / NOT OK	OK
DF Discharge check - Sampling for 5 sets	OK / NOT OK	OK
Reset Recovery within 0.5s after defibrillation	OK / NOT OK	OK
All self tests	OK / NOT OK	OK

CALIBRATION STATUS

OK

TESTED BY



AJIT PARAB For BPL Medical Technologies Pvt. Ltd

April 2018 - April 2019

Test Report on Date of Calibration Calibration Due Date Calibration Report No	Hapt	eler Living Everyday
Calibration Due Date		
Calibration Report No.		
moration Report No	E.C.G. M	Ichine
A SALINO,	2-Apr	18
	† 1-Apr	19
Name and	bplmtpl/kh/1	
Name and Address of the organisation		
Description of Item	KRISHNA INSTITUTE OF MEDICAL SCIENCES DEEMED UNIVERSITY KARAD DIST-SATARA	
	MAHARASHTRA Electo-Cardiogr	m Machine
ests Done	model - CARDI	ART 9108
	Sr.No DUTI	04L2854
uipments Used for testing:	Calibration	
ame of the equipment		
TAL SIGNS SIMULATOR/ FLUKE/PROSIM4/2767019	Calibration report No.	Due Date
	*	Due Date 09-Jan-19
formance Check :	1844273-4 PROSIM4-	and the state
formance Check :	1844273-4 PROSIM4- 2767019-1	09-Jan-19
formance Check : NO PARAMETER Key operations	1844273-4 PROSIM4-	and the state
formance Check : NO PARAMETER Key operations Esc front assy tilting	1844273-4 PROSIM4- 2767019-1 SPECIFICATION	09-Jan-19 VALUE
formance Check : NO PARAMETER Key operations Esc front assy tilting LED Alignment	1844273-ФРКОSIМ4- 2767019-1 SPECIFICATION ОК / NOT ОК	09-Jan-19 VALUE OK
formance Check : NO PARAMETER Key operations Esc front assy tilting LED Alignment Line LED indication	1844273-4 PROSIM4- 2767019-1 SPECIFICATION OK / NOT OK OK / NOT OK	09-Jan-19 VALUE OK OK
Formance Check : NO PARAMETER Key operations Esc front assy tilting LED Alignment Line LED indication Battery Trickle Charge check	1844273-4 PROSIM4- 2767019-1 SPECIFICATION OK / NOT OK OK / NOT OK OK / NOT OK	09-Jan-19 VALUE OK OK OK
formance Check : NO PARAMETER Key operations Esc front assy tilting LED Alignment Line LED indication Battery Trickle Charge check Battery Charge voltage at BAT+	1844273-4 PROSIM4- 2767019-1 SPECIFICATION OK / NOT OK OK / NOT OK OK / NOT OK OK / NOT OK	09-Jan-19 VALUE OK OK OK OK
formance Check : NO PARAMETER Key operations Esc front assy tilting LED Alignment Line LED indication Battery Trickle Charge check Battery Charge voltage at BAT+ Lead Off indication at all leads	1844273-PROSIM4- 2767019-1 SPECIFICATION OK / NOT OK	09-Jan-19 VALUE OK OK OK OK OK
formance Check : NO PARAMETER Key operations Esc front assy tilting LED Alignment Line LED indication Battery Trickle Charge check Battery Charge voltage at BAT+ Lead Off indication at all leads Real Time Clock display & Adjustments	1844273-4 PROSIM4- 2767019-1 SPECIFICATION OK / NOT OK OK / NOT OK	09-Jan-19 VALUE OK OK OK OK OK OK 15.7V
formance Check : NO PARAMETER Key operations Esc front assy tilting LED Alignment Line LED indication Battery Trickle Charge check Battery Charge voltage at BAT+ Lead Off indication at all leads	1844273-4 PROSIM4- 2767019-1 SPECIFICATION OK / NOT OK	09-Jan-19 VALUE OK OK OK OK OK 15:7V OK

May 2019 - May 2020

		E	PT
Test D		Happie	P
Test Rep	ort on	Happier Livii	ng Everyday
Calib	Calibration	E.C.G. Machine	
atio	DD D.	15-May-19	MALLING STREET
Hachine	Calibration Report No.	14-May-20	and the state of the
Nam	esport No.	BMTPL/19-20/CALR/K2616	Sand Colored States
wame an	d Address of the organisation	CALR/K2616	05
Description of Item		KRISHNA CHARITABLE TRUST HOSPITAL Khanapur Road, Agashivnagar,dist. Satara, Malakapur,Maharashtra-415539,INDIA. Electro-Cardiogram Machine Model - 9108	
traine of th	10 equipment	A DESCRIPTION OF THE OWNER OF THE	Mineral Street Street
TTAL SIGNS	STIMULATOR	Calibration report No.	Due Date
Performa	nce Check :	1915868-7-PROSIM 4-2767019-1	11-Feb-20
R.NO	PARAMETER		Stran - De Starten
1	Key operations	SPECIFICATION	VALUE
2	LED Alignment	OK / NOT OK	ОК
3	Line-Battery LED	OK / NOT OK	ОК
	indication	OK / NOT OK	ОК
4	Battery Trickle Charge check	OK / NOT OK	ОК
5	Lead Off indication at all leads	OK / NOT OK	ок
6	Real Time Clock display & Adjustments	OK / NOT OK	ок
7	Set up menu display and Adjustments	OK / NOT OK	ок
8	Display	No ambiguities	OK
9	Printing & Display Formats Check	OK / NOT OK	ОК
10	50Hz Notch Filter operation	2 mm max	1mm
11	Gain (sensitivity) at 10mm	n Gain at lead II @ speed 25r	nm/sec & 60 bpm
	5mm	+/-1mm	5 mm
	10mm	+/-1mm	10 mm
	20mm	+/-1mm	20 mm



Happier Living Everyday

R.NO	PARAMETER	and the second se	
		SPECIFICATION	VALUE
12	Paper Transportation Speed (mm/sec) @ Gain 10mm/sec		THEOL
	at 25mm/sec		
and the series and	at 50mm/sec	+/-1mm	25mm/sec
	Heart Rate indications @	+/-2mm	50mm/sec
13	10mm/mv & 25mm/sec 30 BPM	+/-1 BPM	20 0014
	60 BPM	+/-1 BPM	30 BPM 60 BPM
12 2011	120 BPM	+/-1 BPM	120 BPM
14	Memory Check	OK / NOT OK	OK
15	Printing Linearity Check	OK / NOT OK	ок
16	Thermal Head Alignment	OK / NOT OK	ок
17	Paper Sensor testing	OK / NOT OK	ок
	LCD contrast check	No fading	OK
18	ECD contrast encent	the second	
18 19	Low Battery indication	OK / NOT OK	OK

TESTED BY in a

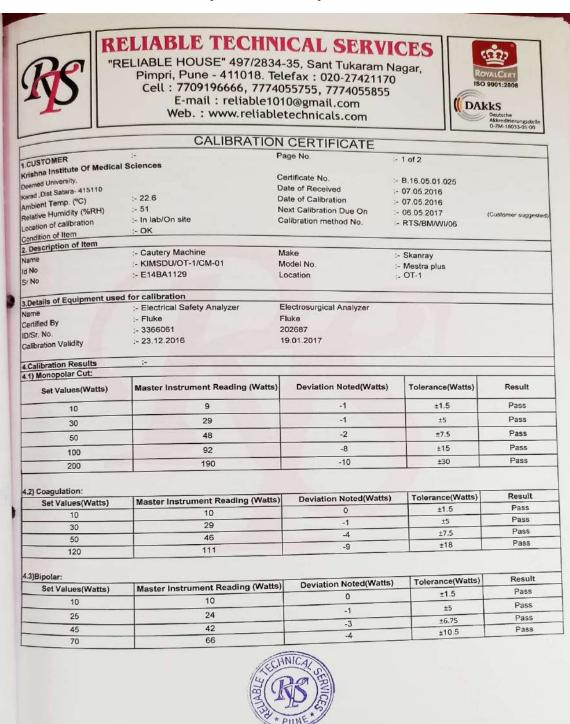
AMIT KHAIRNAR

CALIBRATION STATUS

All Parameters found well within specifications

Cautery Machine

May 2016 - May 2017



EDMI NOTE 8 PRO

	E-mail : reliable1010@gmai Web. : www.reliabletechnica	als.com	DAkkS
Certificate No	b. B.16.05.01.025		Akkreditierungs D-7M-16033-01
4.4)A) Visual	Test: Tests		Page No. 2 o
Sr. No.	Power Cords, Cables Checking		Remarks
2	Mains Socket Checking		Ok
3	Equipment Type (B, BF, CF)		Ok
4	Equipment Class (I, II, III)		B
	B-Body Type,BF-Body Float Type,CF-C I-Properly Earthed ,II-Double Insulation,III-With	ardiac Float Type	1
B) FUNCTION		Extra Low Safety Voltage	
Sr.No	Parameters	Measured Values	
1	Voltage between Live and Neutral (Vin)	235.43 (210-2	- Nemarks
2	Voltage between Live and Earth(Vie)	237.10 (210-2	
3	Voltage between Neutral and and Earth (Vne)	1.95 (0-5	
4	Enclosure Current	0.8 (0-10	
5	Leakage Current (IL)	127 (0-500	
6	Patient Leakage Current (PL)	0.6 (BF-0-1 (CF-0-1	
 Calibration point This certificate has been obtained 	nt were selected as per customer specifications. shall not be reproduced, except in full unless written permission for the publicatio d from the Technical Manager of "Reliable Technical Services, Pune".	in of an approved abstract	By
3) Calibration point 4) This certificate has been obtaine Calibrated By Galibration Eng	shall not be reproduced, except in full unless written permission for the publication d from the Technical Manager of "Reliable Technical Services, Pune".	Approved £ Quality Me	inager
4) This certificate has been obtaine Calibrated By	shall not be reproduced, except in full unless written permission for the publication d from the Technical Manager of "Reliable Technical Services, Pune".	Approved	inager

1.CUSTOMER Krishna Instit		CALIF	BRATION C	ERTIFIC	ATE		
Krishna Instit		:-	F	Page No.	:- 1	of 2	
a second s	ute Of Medical Scienc	es		Certificate No. Date of Receiv		3M.17.05.03.315 06.05.2017	
Deemed Univer				Date of Calibra		06.05.2017	
Ambient Temp	. (°C)	:- 25 ± 4°C		Next Calibratio		5.05.2018	
Relative Humi	any (voi any	:- <70% RH :- In lab/On site	C	Calibration me	thod No. :- I	RTS/BM/WI/06,01	
Location of ca Condition of It		- OK		_			
2. Description	of Item		1	Make		Skanray	
Name Id No		- Cautery Mach - KH/OT/CM-09		Model No.		Master Plus 100	
Sr No.		- E14BA1129	1	Location	:- (т	
2 Dataile of E	guipment used for cal	ibration			-		
Name		:- Electrical Safe	ety Analyzer	Electrosurgica			
Certificate No.		:- 16121280-ES	A612-3366061-1		ESII-202687-1		
Certified By		- Tektronix		Tektronix 202687			
ID/Sr. No. Calibration Va	idity	:- 3366061 :- 26.12.2017		27.12.2017			
Calbration va	indity						
4.Calibration							
4.1) Power Te	st For Monopolar Cut				land 1		-
	Pure	1.77	ow Obeserved	Set	Obeserved	Tolerance (±%)	Resul
Set	Obeserved	Set 10	11	10	11	10%	Pass
10	51	50	50	50	50	10%	Pass
50	151	150	151	150	151	10%	Pass
450	151			100			
150	Salara Cases - an and)				
	st For Monopolar Co	And the second second		Spray			
4.2) Power Te	st For Monopolar Con resiccate	Fulg	jurate	2.6	NUMBER OF	Tolerance (±%)	Resu
4.2) Power Te		Fulg Set		Set	Obeserved		
4.2) Power Te	esiccate	Fulg	jurate	2.6	Obeserved 10	10%	Resu Pase
4.2) Power Te	Obeserved	Fulg Set 10 50	Uurate Obeserved 10 50	Set 10 50	Obeserved 10 50	10%	Pass
4.2) Power Te	Obeserved 11	Fulg Set 10	Uurate Obeserved 10	Set 10	Obeserved 10	10%	Pass
4.2) Power Te 50 100	Obeserved 11 51	Fulg Set 10 50	Uurate Obeserved 10 50	Set 10 50	Obeserved 10 50	10%	Pas
4.2) Power Te 50 10 4.3) Power Te	Obeserved 11 51 101	Fulg Set 10 50 100	Uurate Obeserved 10 50	Set 10 50 100	Obeserved 10 50	10% 10% 10%	Pas Pas Pas
4.2) Power Te 50 10 50 100 4.3) Power Te	Obeserved 11 51 101 st For Bipolar (Watts)	Fulg Set 10 50 100	Urate Obeserved 10 50 101	Set 10 50 100	Obeserved 10 50 100	10%	Pas
4.2) Power Te 50 100 4.3) Power Te	Desiccate Obeserved 11 51 101 st For Bipolar (Watts) Precise	Fulg Set 10 50 100 Star	Urate Obeserved 10 50 101	Set 10 50 100	Obeserved 10 50 100 lacro	10% 10% 10%	Pas Pas Pas
4.2) Power Te 50 10 50 100 4.3) Power Te Set	Obeserved Obeserved 11 51 101 St For Bipolar (Watts) Precise Obeserved	Fulg Set 10 50 100 Star Set	Urate Obeserved 10 50 101 ndard Obeserved	Set 10 50 100 M Set	Obeserved	10% 10% 10% Tolerance (±%)	Pas Pas Pas Res
4.2) Power Te 50 10 50 100 4.3) Power Te Set 10	Obeserved 11 51 101 St For Bipolar (Watts) Precise Obeserved 11	Fulg Set 10 50 100 Star Set 10	Urate Obeserved 10 50 101 Ndard Obeserved 11	Set 10 50 100 M Set 10	Obeserved 10 50 100	10% 10% 10% Tolerance (±%) 10%	Pas Pas Pas Res Pa:

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P	"RELIABLE HOUSE" 497/2034-53, Odint Pimpri, Pune - 411018. Telefax : 020- Cell : 7709196666, 7774055755, 777 E-mail : reliable1010@gmail.c Web. : www.reliabletechnicals.	om	. DAk	Deutsche Akkreditierungsstell D-ZM-15033-01-00
tificate No.	BM.17.05.03.315		F	Page No. 2 of
	Electrical S	afety		
est Results Visual Test :		T	Remark	s
Sr. No.	Tests Power Cords, Cables Checking		Ok Ok	
2	Mains Socket Checking		В	
3	Equipment Type (B, BF, CF) Equipment Class (I, II, III)		1	
4		iac Float Type ra Low Safety Volt	age	
	B-Body Type,BF-Body Float Type,CF-Card I-Properly Earthed ,II-Double Insulation,III-With Ext		ured Values	Remarks
FUNCTIONAL T		235.50	(210-240V)	OK
5r.No 1	Voltage between Live and Neutral (VIn)	238.15	(210-240V)	OK
2	Voltage between Live and Earth(VIe) Voltage between Neutral and and Earth (Vne)	2.87	(0-5V)	OK
3	Enclosure Current	0.8	(0-10µA)	OK
4	Leakage Current (IL)	116	(0-500µA) (BF-0-100µA)	
5		0.8	(CF-0-10µA)	OK
) The calibration resu) Calibration point we	Patient Leakage Current (PL) s only to the particular item submitted for calibration. UUC stands for Unit L Its reported in the certificate are valid at the time of and under the stated co re selected as per customer specifications. In the reproduced, except in full unless written permission for the publication in the Technical Manager of "Reliable" reprinces, Pune".		Approved By	1
Iote:) This certificate refer) The calibration resu) Calibration point we) This certificate shall as been obtained from Calibrated By Calibrated By Calibration Engine Rahul Sable	s only to the particular item submitted for calibration. UUC stands for Unit L Its reported in the certificate are valid at the time of and under the stated co re selected as per customer specifications. In the reproduced, except in full unless written permission for the publication in the Technical Manager of "Reliable connects services, Pune".		stract	it -
Iote:) This certificate refer) The calibration resu) Calibration point we) This certificate shall as been obtained from Calibrated By Calibrated By Calibration Engine	s only to the particular item submitted for calibration. UUC stands for Unit L Its reported in the certificate are valid at the time of and under the stated co re selected as per customer specifications. In the reproduced, except in full unless written permission for the publication in the Technical Manager of "Reliable connects services, Pune".		Approved By Quality Manager	-;
Iote:) This certificate refer) The calibration resu) Calibration point we) This certificate shall as been obtained from Calibrated By Calibrated By Calibration Engine Rahul Sable	s only to the particular item submitted for calibration. UUC stands for Unit L Its reported in the certificate are valid at the time of and under the stated co re selected as per customer specifications. In the reproduced, except in full unless written permission for the publication in the Technical Manager of "Reliable connects services, Pune".		Approved By Quality Manager	+1
ote:) This certificate refer) The calibration resu) Calibration point we) This certificate shall as been obtained from Calibrated By Calibrated By Calibration Engine Calibration Engine	s only to the particular item submitted for calibration. UUC stands for Unit L Its reported in the certificate are valid at the time of and under the stated co re selected as per customer specifications. In the reproduced, except in full unless written permission for the publication in the Technical Manager of "Reliable connects services, Pune".		Approved By Quality Manager	
ote:) This certificate refer) The calibration resu) Calibration point we) This certificate shall as been obtained from Calibrated By Calibrated By Calibration Engine Calibration Engine	s only to the particular item submitted for calibration. UUC stands for Unit L Its reported in the certificate are valid at the time of and under the stated co re selected as per customer specifications. In the reproduced, except in full unless written permission for the publication in the Technical Manager of "Reliable connects services, Pune".		Approved By Quality Manager	+1
ote:) This certificate refer) The calibration resu) Calibration point we) This certificate shall as been obtained from Calibrated By Calibrated By Calibration Engine Calibration Engine	s only to the particular item submitted for calibration. UUC stands for Unit L Its reported in the certificate are valid at the time of and under the stated co re selected as per customer specifications. In the reproduced, except in full unless written permission for the publication in the Technical Manager of "Reliable connects services, Pune".		Approved By Quality Manager	+1-

Z	101 "RE	LIABLE HOUSE Pimpri, Pune - Cell : 777405 E-mail	TECHNIC " 497/2834-35, 411018. Telefa 55755, 7774055 : reliable1010@ /ww.reliabletec	Sant Tukaram ax : 020-2742 8855,77740588 @gmail.com	n Nagar, 1170	IAS,	The second s
		CALIB	RATION C	ERTIFICA	TE		
1.CUSTON		:-		Page No.	1-	1 of 2	
and the second s	stitute Of Medical	Sciences		Certificate No.	:-	BM.18.04.29.01	19
Deemed Un				Date of Receive		29.04.2018	
Ambient Te	Satara- 415110	:- 25 ± 4°C		Date of Calibra		29.04.2018	
Relative Hu		20 ± 4 C		Next Calibration		28.04.2019	
Location of		:- On site		Calibration met	1100 140	RTS/BM/WI/06	5,01
Condition o		:- OK					
2. Descript	tion of Item						
Name		:- Cautery Ma	chine	Make	;-	Skanray	
ID No		:- KH/OT/CM-	09	Model No.	(1227)	Plus 100	
Sr No.		:- E14BA1129)	Location	:-	ОТ	
3.Details of	f Equipment used	for calibration					
Name		:- Electrosurge	ery Analyzer		Electrical Safety	Analyzer	
Certificate N	lo.	:- 18444403-0	A ESII-202687-1		18444407-ESA6	12-3366061-1	
Certificate N Certified By		:- 18444403-0 :- Tektronix	QA ESII-202687-1		18444407-ESA6 Tektronix	12-3366061-1	
			QA ESII-202687-1			12-3366061-1	
Certified By		:- Tektronix	QA ESII-202687-1		Tektronix	12-3366061-1	
Certified By ID/Sr. No. Calibration \	√alidity	:- Tektronix :- 202687 :- 28.12.2018	QA ESII-202687-1		Tektronix 3366061	12-3366061-1	
Certified By ID/Sr. No. Calibration \ 4.Calibratio	/alidity on Results	:- Tektronix :- 202687 :- 28.12.2018 :-	QA ESII-202687-1		Tektronix 3366061	12-3366061-1	
Certified By ID/Sr. No. Calibration \ 4.Calibratio	/alidity n Results Test For Monopo	:- Tektronix :- 202687 :- 28.12.2018 :- lar Cut(Watts)	2A ESII-202687-1		Tektronix 3366061		
Certified By ID/Sr. No. Calibration \ 4.Calibratio 4.1) Power	/alidity on Results	:- Tektronix :- 202687 :- 28.12.2018 :- lar Cut(Watts)			Tektronix 3366061 27.12.2018	Tolerance (±%)	Result
Certified By ID/Sr. No. Calibration \ 4.Calibratio	Validity on Results Test For Monopo Pure	:- Tektronix :- 202687 :- 28.12.2018 :- lar Cut(Watts)	_ow		Tektronix 3366061 27.12.2018	Tolerance	Result
Certified By ID/Sr. No. Calibration \ 4.Calibratio 4.1) Power Set 10	Validity n Results Test For Monopo Pure Obeserved 10.0	:- Tektronix :- 202687 :- 28.12.2018 :- lar Cut(Watts) L Set	_OW Obeserved	B Set	Tektronix 3366061 27.12.2018	Tolerance (±%)	Result Pass Pass
Certified By ID/Sr. No. Calibration \ 4.Calibratio 4.1) Power 5 Set 10 50	Validity In Results Test For Monopo Pure Obeserved 10.0 48.9	:- Tektronix :- 202687 :- 28.12.2018 :- lar Cut(Watts) L Set 10 50	-ow Obeserved 8.3 48.7	B Set 10	Tektronix 3366061 27.12.2018 Ilend Obeserved 9.1	Tolerance (±%) 10%	Pass
Certified By ID/Sr. No. Calibration \ 4.Calibration \ 4.Calibratio 4.1) Power 5 Set 10 50 150	Validity n Results Test For Monopo Pure Obeserved 10.0 48.9 151.9	:- Tektronix :- 202687 :- 28.12.2018 :- lar Cut(Watts) L Set 10 50 150	Obeserved 8.3 48.7 149.2	B Set 10 50	Tektronix 3366061 27.12.2018 Blend Obeserved 9.1 51.9	Tolerance (±%) 10% 10%	Pass Pass
Certified By ID/Sr. No. Calibration \ 4.Calibration \ 4.Calibration \ 4.1) Power 1 Set 10 50 150 4.2) Power 1	Validity in Results Test For Monopo Pure Obeserved 10.0 48.9 151.9 Test For Monopo	:- Tektronix :- 202687 :- 28.12.2018 :- lar Cut(Watts) Set 10 50 150	Obeserved 8.3 48.7 149.2 n(Watts)	B Set 10 50 150	Tektronix 3366061 27.12.2018 Ilend Obeserved 9.1 51.9 , 151.2	Tolerance (±%) 10% 10%	Pass Pass Pass
Certified By ID/Sr. No. Calibration \ 4.Calibratio 4.1) Power Set 10 50 150 4.2) Power T De	Validity Test For Monopo Pure Obeserved 10.0 48.9 151.9 Test For Monopo esiccate	:- Tektronix :- 202687 :- 28.12.2018 :- lar Cut(Watts) L Set 10 50 150 Jar Coagulation Ful	Obeserved 8.3 48.7 149.2	B Set 10 50 150	Tektronix 3366061 27.12.2018 Blend Obeserved 9.1 51.9	Tolerance (±%) 10% 10%	Pass Pass Pass
Certified By ID/Sr. No. Calibration \ 4.Calibration \ 4.Calibration \ 4.Calibration \ 4.Calibration \ 4.Calibration \ 50 50 150 150 150 4.2) Power T De Set	Validity Test For Monopo Pure Obeserved 10.0 48.9 151.9 Test For Monopo esiccate Obeserved	:- Tektronix :- 202687 :- 28.12.2018 :- lar Cut(Watts) Set 10 50 150	-ow Obeserved 8.3 48.7 149.2 n(Watts) gurate Obeserved	B Set 10 50 150	Tektronix 3366061 27.12.2018 Blend Obeserved 9.1 51.9 . 151.2	Tolerance (±%) 10% 10% 10% Tolerance	Pass Pass Pass Resul
Certified By ID/Sr. No. Calibration \ 4.Calibration \ 4.Calibratio 4.1) Power Set 10 50 150 4.2) Power T De Set 10	Validity Test For Monopo Pure Obeserved 10.0 48.9 151.9 Test For Monopo esiccate Obeserved 12.0	:- Tektronix :- 202687 :- 28.12.2018 :- lar Cut(Watts) L Set 10 50 150 Dar Coagulation Ful Set	-OW Obeserved 8.3 48.7 149.2 n(Watts) gurate	B Set 10 50 150 Set	Tektronix 3366061 27.12.2018 Ilend Obeserved 9.1 51.9 . 151.2 Spray Obeserved	Tolerance (±%) 10% 10% 10% 10% 10% 10%	Pass Pass
Certified By ID/Sr. No. Calibration \ 4.Calibratio 4.1) Power Set 10 50 150 4.2) Power De Set 10 50	Validity Test For Monopo Pure Obeserved 10.0 48.9 151.9 Test For Monopo esiccate Obeserved 12.0 51.7	:- Tektronix :- 202687 :- 28.12.2018 :- lar Cut(Watts)	-ow Obeserved 8.3 48.7 149.2 n(Watts) gurate Obeserved 8.2	B Set 10 50 150 Set 10	Tektronix 3366061 27.12.2018 Blend Obeserved 9.1 51.9 . 151.2 Spray Obeserved 11.6	Tolerance (±%) 10% 10% 10% 10% 10%	Pass Pass Pass Resul Pass
Certified By ID/Sr. No. Calibration \ 4.Calibration \ 4.Calibration \ 4.Calibration \ 4.Calibration \ 4.Calibration \ 50 10 50 50 10 50 100	Validity In Results Test For Monopo Pure Obeserved 10.0 48.9 151.9 Test For Monopo esiccate Obeserved 12.0 51.7 98.3	:- Tektronix :- 202687 :- 28.12.2018 :- lar Cut(Watts) Iar Cut(Watts) Iar Cut(Watts) Iar Coagulation Ibro	Obeserved 8.3 48.7 149.2 n(Watts) gurate Obeserved 8.2 51.7	B Set 10 50 150 Set 10 50	Tektronix 3366061 27.12.2018 Iend Obeserved 9.1 51.9 51.9 51.2 Spray Obeserved 11.6 49.1	Tolerance (±%) 10% 10% 10% 10% 10%	Pass Pass Pass Resul Pass Pass
Certified By ID/Sr. No. Calibration \ 4.Calibration \ 4.Calibration \ 4.Calibration \ 5.Calibration \ 50 100 100 100 1.3) Power 1	Validity Test For Monopo Pure Obeserved 10.0 48.9 151.9 Test For Monopo esiccate Obeserved 12.0 51.7 98.3 Test For Bipolar (:- Tektronix :- 202687 :- 28.12.2018 :- lar Cut(Watts) Iar Cut(Watts) Iar Coagulation 150 Iar Coagulation Full Set 10 50 100 Watts)	-ow Obeserved 8.3 48.7 149.2 m(Watts) gurate Obeserved 8.2 51.7 100.9	B Set 10 50 150 Set 10 50 100	Tektronix 3366061 27.12.2018 Iend Obeserved 9.1 51.9 51.9 51.2 Spray Obeserved 11.6 49.1	Tolerance (±%) 10% 10% 10% 10% 10%	Pass Pass Pass Resul Pass Pass Pass
Certified By ID/Sr. No. Calibration \ 4.Calibration \ 4.Calibration \ 4.Calibration \ 4.Calibration \ 50 10 10 50 10 10 10 10 10 10 10 10 10 10 10 10 10	Validity In Results Test For Monopo Pure Obeserved 10.0 48.9 151.9 Test For Monopo esiccate Obeserved 12.0 51.7 98.3 Test For Bipolar (Precise	:- Tektronix :- 202687 :- 28.12.2018 :- lar Cut(Watts) Iar Cut(Watts) Iar Coagulation 150 Iar Coagulation Full Set 10 50 100 Watts)	Obeserved 8.3 48.7 149.2 n(Watts) gurate Obeserved 8.2 51.7	B Set 10 50 150 50 100 50 100	Tektronix 3366061 27.12.2018 Iend Obeserved 9.1 51.9 . 151.2 Spray Obeserved 11.6 49.1 101.7	Tolerance (±%) 10% 10% 10% 10% 10% 10%	Pass Pass Pass Resul Pass Pass Pass
Certified By ID/Sr. No. Calibration \ 4.Calibration \ 4.Calibration \ 4.Calibration \ 5.Calibration \ 50 100 150 4.2) Power 1 50 100 1.3) Power 1 P Set	Validity Test For Monopo Pure Obeserved 10.0 48.9 151.9 Test For Monopo esiccate Obeserved 12.0 51.7 98.3 Test For Bipolar (Precise Obeserved	:- Tektronix :- 202687 :- 28.12.2018 :- lar Cut(Watts) lar Cut(Watts) 10 50 150 150 150 150 150 150	-ow Obeserved 8.3 48.7 149.2 n(Watts) gurate Obeserved 8.2 51.7 100.9	B Set 10 50 150 50 100 50 100	Tektronix 3366061 27.12.2018 Ilend Obeserved 9.1 51.9 151.2 Spray Obeserved 11.6 49.1 101.7	Tolerance (±%) 10% 10% 10% 10% 10% 10% 10% 10% Tolerance (±%) 10% 10% 10% 10% Tolerance Tolerance Tolerance	Pass Pass Pass Result Pass Pass Pass Resu
Certified By ID/Sr. No. Calibration \ 4.Calibration \ 4.Calibration \ 4.Calibration \ 4.Calibration \ 50 10 10 50 10 10 10 10 10 10 10 10 10 10 10 10 10	Validity In Results Test For Monopo Pure Obeserved 10.0 48.9 151.9 Test For Monopo esiccate Obeserved 12.0 51.7 98.3 Test For Bipolar (Precise	:- Tektronix :- 202687 :- 28.12.2018 :- lar Cut(Watts) Iar Cut(Watts) Iar Coagulation 150 Iar Coagulation Full Set 10 50 100 Watts) Sta Set	-ow Obeserved 8.3 48.7 149.2 n(Watts) gurate Obeserved 8.2 51.7 100.9	B Set 10 50 150 50 150 50 100 50 100	Tektronix 3366061 27.12.2018 Iend Obeserved 9.1 51.9 151.2 Spray Obeserved 11.6 49.1 101.7 Macro Obeserved	Tolerance (±%) 10% 10% 10% 10% 10% 10% Tolerance (±%) 10% 10% 10% 10% 10% 10% 10% 10% 10% 10% 10%	Pass Pass Pass Resul Pass Pass Pass



RELIABLE TECHNICAL SERVICES

"RELIABLE HOUSE" 497/2834-35, Sant Tukaram Nagar, Pimpri, Pune - 411018. Telefax : 020-27421170 Cell: 7774055755, 7774055855, 7774058855 E-mail : reliable1010@gmail.com Web. : www.reliabletechnicals.com



Certificate No.	BM.18.04.29.019		Page	No. 2 of 2	
4.4) EST :					
Sr. No.	Tests		Remarks		
1	Power Cords, Cables	Checking		Ok	
2	Mains Socket Che	ecking		Ok	
FUNCTIONAL	TEST:				
Sr.No	Parameters	Туре	Measured Values	Tolerance	Remarks
1	Supply Voltage	Live-Neutral	235.53	210 to 240 V	Pass
	Supply Voltage	Live-Earth	237.10	210 to 240 V	Pass
2		Neutral-Earth	1.80	0 to 5 V	Pass
3	Supply Voltage		1.74	< 5 ohm	Pass
4	Protective Earth Resistance	Normal Close (NC)	2.2	< 10 µA	Pass
5	Earth Leakage Current	Normal Open (NO)	1.7	< 10 µA	Pass
6	Earth Leakage Current		1.3	< 10 µA	Pass
7	Enclosure Leakage Current	NCC	0.8	< 10 µA	Pass
8	Enclosure Leakage Current	NOC		< 10 µA	Pass
9	Enclosure Leakage Current	NCO	0.5		Pass
	Patient Auxiliary Leakage Current	NCC	1.7	< 10 µA	
10	Patient Auxiliary Leakage Current	RCC	1.9	< 10 µA	Pass

2

1) This certificate refers only to the particular item submitted for calibration. UUC stands for Unit Under Calibration.

2) The calibration results reported in the certificate are valid at the time of and under the stated conditions of measurement.

Calibration point were selected as per customer specifications.

4) This certificate shall not be reproduced, except in full unless written permission for the publication of an approved abstract

has been obtained from the Technical Manager of "Reliable Technical Services, Pune".

5) The Standard used are traceable to National / International Standard.

Calibrated By

Calibration Engineer Anand Dalvi

RF-21, R0



Approved By

Quality Manager

R.D.Bodhe

O REDMI NOTE 8 PRO CO AI QUAD CAMERA

R	S Pir Ce Email	Division of I RELIABLE HOU npri, Pune - 41 ell: 777405575 : reliable10100	TECHNIC Reliable Tecl SE" 497/2834-35 1018. MH, India 5, 7774055855,7 @gmail.com/reli bletechnicals.co	hnocare Pvt 5, Sant Tukaram . Telefax : 020- 7774058855, 77	. Ltd.) n Nagar, 27421170 74022900 e@gmail.com	RIP CERTIFICAT	
1		CALIE	BRATION C	ERTIFICA	TE		-
1.CUSTON	1	:-		Page No.	:-	1 of 2	
Prisna In	stitute Of Medica	Sciences		Certificate No.	:-	BM.19.04.20.2	247
Deemed Un Karad Dist	iversity, Satara- 415110			Date of Receiv	ed :-	28.04.2019	
Ambient Te		:- 25 ± 4°C		Date of Calibra		28.04.2019	
Relative Hu		:- 23 ± 4°C		Next Calibratio Calibration met		27.04.2020 RTS/BM/WI/00	6.01
Location of		:- On site		Calibration me		RIS/BIVI/VVI/U	0,01
Condition o		:- OK					
	ion of Item						
Name		:- Cautery Ma		Make		Skanray	
ID No Sr No.		- KH/OT/CM		Model No.		Plus 100 OT	
SI NO.		:- E14BA1129	•	Location	:-	01	
3.Details o	f Equipment used	for calibration					
		Electro even	and Analysis		Electrical Safety	Analyzer	
Name		:- Electrosurg	ery Analyzer		Lieutical Salety	Analyzei	
Name Certificate N	10.	:- 18.12.IH.00			18.12.IH.001	Analyzei	
Certificate N Certified By		:- 18.12.IH.00 :- RTS			18.12.IH.001 RTS	Analyzer	
Certificate N Certified By ID/Sr. No.		:- 18.12.IH.00 :- RTS :- 202687	13		18.12.IH.001 RTS 3366061	Analyzer	
Certificate N Certified By		:- 18.12.IH.00 :- RTS	13		18.12.IH.001 RTS	Allayzei	
Certificate N Certified By ID/Sr. No. Calibration	/alidity n Results	:- 18.12.IH.00 :- RTS :- 202687 :- 18.12.2019 :-	13		18.12.IH.001 RTS 3366061	Aliaiyzei	
Certificate N Certified By ID/Sr. No. Calibration	/alidity n Results Test For Monopo	:- 18.12.IH.00 :- RTS :- 202687 :- 18.12.2019 :- lar Cut(Watts)	13		18.12.IH.001 RTS 3366061 16.12.2019		
Certificate N Certified By ID/Sr. No. Calibration 1 4.Calibratio 4.1) Power	/alidity n Results Test For Monopo Pure	:- 18.12.IH.00 :- RTS :- 202687 :- 18.12.2019 :- lar Cut(Watts)	Low		18.12.IH.001 RTS 3366061 16.12.2019	Tolerance	Resul
Certificate N Certified By ID/Sr. No. Calibration N 4.Calibration 4.1) Power Set	Validity n Results Test For Monopo Pure Obeserved	:- 18.12.IH.00 :- RTS :- 202687 :- 18.12.2019 :- lar Cut(Watts)	Low Obeserved	Set	18.12.IH.001 RTS 3366061 16.12.2019 lend Obeserved	_ Tolerance (±%)	
Certificate N Certified By ID/Sr. No. Calibration N 4.Calibration 4.1) Power Set 10	Validity n Results Test For Monopo Pure Obeserved 11	:- 18.12.IH.00 :- RTS :- 202687 :- 18.12.2019 :- lar Cut(Watts) Set 10	Low Obeserved 10	Set 10	18.12.IH.001 RTS 3366061 16.12.2019 lend Obeserved 12	Tolerance (±%) 10%	Pass
Certificate N Certified By ID/Sr. No. Calibration N 4.Calibration 4.1) Power Set 10 50	Validity In Results Test For Monopo Pure Obeserved 11 50	:- 18.12.IH.00 :- RTS :- 202687 :- 18.12.2019 :- lar Cut(Watts) Set 10 50	Deserved 10 51	Set 10 50	18.12.IH.001 RTS 3366061 16.12.2019 Iend Obeserved 12 51	Tolerance (±%) 10% 10%	Pass
Certificate N Certified By ID/Sr. No. Calibration N 4.Calibration 4.1) Power Set 10 50 150	Validity n Results Test For Monopo Pure Obeserved 11 50 150	:- 18.12.IH.00 :- RTS :- 202687 :- 18.12.2019 :- lar Cut(Watts) I Set 10 50 150	23 Low Obeserved 10 51 152	Set 10	18.12.IH.001 RTS 3366061 16.12.2019 lend Obeserved 12	Tolerance (±%) 10%	Pass
Certificate N Certified By ID/Sr. No. Calibration N 4.Calibration 4.1) Power Set 10 50 150 4.2) Power T	Validity Test For Monopo Pure Obeserved 11 50 150 Test For Monopo	:- 18.12.IH.00 :- RTS :- 202687 :- 18.12.2019 :- lar Cut(Watts) Set 10 50 150 lar Coagulation	2 Low Obeserved 10 51 152 n(Watts)	Set 10 50 150	18.12.IH.001 RTS 3366061 16.12.2019 Iend Obeserved 12 51 152	Tolerance (±%) 10% 10% 10%	Pass
Certificate N Certified By ID/Sr. No. Calibration N 4.Calibration N 4.Calibration N 4.Calibration N 4.Calibration N 4.Calibration N 50 10 50 150 4.2) Power T De	Validity In Results Test For Monopo Pure Obeserved 11 50 Test For Monopo Siccate	:- 18.12.IH.00 :- RTS :- 202687 :- 18.12.2019 :- lar Cut(Watts) Set 10 50 150 lar Coagulation Ful	Deserved 10 51 152 n(Watts) gurate	Set 10 50 150	18.12.IH.001 RTS 3366061 16.12.2019 lend Obeserved 12 51 152 pray	Tolerance (±%) 10% 10% 10%	Pass Pass Pass
Certificate N Certified By ID/Sr. No. Calibration N 4.Calibration N 4.Calibration N 4.Calibration N 4.Calibration N 4.Calibration N 50 10 50 150 4.2) Power T De Set	Validity Test For Monopo Pure Obeserved 11 50 150 Test For Monopo esiccate Obeserved	:- 18.12.IH.00 :- RTS :- 202687 :- 18.12.2019 :- lar Cut(Watts) 10 50 150 lar Coagulation Full Set	A Constant of the served of th	Set 10 50 150 S Set	18.12.IH.001 RTS 3366061 16.12.2019 lend Obeserved 12 51 152 pray Obeserved	Tolerance (±%) 10% 10% 10% Tolerance (±%)	Pass Pass Pass Resu
Certificate N Certified By ID/Sr. No. Calibration N 4.Calibration N 4.Calibration N 4.Calibration N 4.Calibration N 4.1) Power Set 10 50 150 4.2) Power D 50 50 150 4.2) Power D 50 150 4.2) Power D	Validity Test For Monopo Pure Obeserved 11 50 150 Test For Monopo resiccate Obeserved 10	:- 18.12.IH.00 :- RTS :- 202687 :- 18.12.2019 :- lar Cut(Watts) Set 10 50 150 lar Coagulation Full Set 10	A State Stat	Set 10 50 150 Set 10	18.12.IH.001 RTS 3366061 16.12.2019 lend 0beserved 12 51 152 pray 0beserved 12	Tolerance (±%) 10% 10% 10% 10% 10%	Result Pass Pass Pass Resu Pass
Certificate N Certified By ID/Sr. No. Calibration N 4.Calibration N 4.Calibration N 4.Calibration N 4.Calibration N 4.1) Power Set 10 50 50 50	Validity In Results Test For Monopo Pure Obeserved 11 50 Test For Monopo esiccate Obeserved 10 51	:- 18.12.IH.00 :- RTS :- 202687 :- 18.12.2019 :- lar Cut(Watts) 10 50 150 lar Coagulation Full Set 10 50	23 Low Obeserved 10 51 152 n(Watts) gurate Obeserved 12 51	Set 10 50 150 Set 10 50 50	18.12.IH.001 RTS 3366061 16.12.2019 lend Obeserved 12 51 152 pray Obeserved 12 51 152	Tolerance (±%) 10% 10% 10% 10% 10%	Pass Pass Pass Resu Pass Pas
Certificate N Certified By ID/Sr. No. Calibration N 4.Calibration N 4.Calibration N 4.Calibration N 4.1) Power Set 10 50 50 100 50 100	Validity Test For Monopo Pure Obeserved 11 50 150 Test For Monopo esiccate Obeserved 10 51 106	:- 18.12.IH.00 :- RTS :- 202687 :- 18.12.2019 :- lar Cut(Watts) 10 50 150 lar Coagulation Full Set 10 50 100	A State Stat	Set 10 50 150 Set 10	18.12.IH.001 RTS 3366061 16.12.2019 lend 0beserved 12 51 152 pray 0beserved 12	Tolerance (±%) 10% 10% 10% 10% 10%	Pass Pass Pass Resu Pas Pas
Certificate N Certified By ID/Sr. No. Calibration N 4.Calibration N 4.Calibration N 4.Calibration N 4.1) Power Set 10 50 150 4.2) Power T 50 100 50 100	Validity Test For Monopo Pure Obeserved 11 50 150 Test For Monopo siccate Obeserved 10 51 106 est For Bipolar (N	:- 18.12.IH.00 :- RTS :- 202687 :- 18.12.2019 :- lar Cut(Watts) Set 10 50 150 lar Coagulation Full Set 10 50 100 Vatts)	Observed 10 51 152 n(Watts) gurate Obeserved 12 51 10	Set 10 50 150 Set 10 50 100	18.12.IH.001 RTS 3366061 16.12.2019 lend 0beserved 12 51 152 pray 0beserved 12 51 152	Tolerance (±%) 10% 10% 10% 10% 10% 10%	Pass Pass Pass Pass Pas Pas
Certificate N Certified By ID/Sr. No. Calibration N 4.Calibration N 4.Calibration N 4.Calibration N 4.1) Power Set 10 50 150 4.2) Power T 50 100 50 100	Validity Test For Monopo Pure Obeserved 11 50 150 Test For Monopo esiccate Obeserved 10 51 106	:- 18.12.IH.00 :- RTS :- 202687 :- 18.12.2019 :- lar Cut(Watts) Set 10 50 150 lar Coagulation Full Set 10 50 100 Vatts)	23 Low Obeserved 10 51 152 n(Watts) gurate Obeserved 12 51	Set 10 50 150 Set 10 50 100	18.12.IH.001 RTS 3366061 16.12.2019 lend 0beserved 12 51 152 pray 0beserved 12 51 152 152	Tolerance (±%) 10% 10% 10% 10% 10% 10% 10% 10% Tolerance (±%) 10% 10% 10% 10% Tolerance Tolerance Tolerance Tolerance Tolerance Tolerance Tolerance Tolerance Tolerance Tolerance	Pass Pass Pass Pass Pas Pas
Certificate N Certified By ID/Sr. No. Calibration N 4.Calibration N 4.Calibration N 4.Calibration N 4.1) Power Set 10 50 150 4.2) Power T De Set 10 50 100 50 100 2.3) Power T P	Validity Test For Monopo Pure Obeserved 11 50 Test For Monopo esiccate Obeserved 10 51 106 test For Bipolar (V recise	:- 18.12.IH.00 :- RTS :- 202687 :- 18.12.2019 :- lar Cut(Watts) Isonn Ison I	A Deserved 10 51 152 n(Watts) gurate Obeserved 12 51 102 ndard	Set 10 50 150 Set 10 50 100 N Set 10 0 100	18.12.IH.001 RTS 3366061 16.12.2019 lend 0beserved 12 51 152 pray 0beserved 12 51 102 lacro	Tolerance (±%) 10% 10% 10% 10% 10% 10% 10% 10% Tolerance (±%) 10% 10% 10% 10% Tolerance Tolerance Tolerance Tolerance Tolerance Tolerance Tolerance Tolerance Tolerance Tolerance	Pass Pass Pass Pass Pas Pas Pas
Certificate N Certified By ID/Sr. No. Calibration N 4.Calibration N 4.Calibration N 4.Calibration N 4.1) Power 50 100 4.2) Power T 50 100 50 100 	Validity Test For Monopo Pure Obeserved 11 50 150 Test For Monopo esiccate Obeserved 10 51 106 est For Bipolar (V recise Obeserved	:- 18.12.IH.00 :- RTS :- 202687 :- 18.12.2019 :- lar Cut(Watts) Set 10 50 150 lar Coagulation Full Set 10 50 100 Vatts) Sta Set	3 Comparison of the served of	Set 10 50 150 Set 10 50 100	18.12.IH.001 RTS 3366061 16.12.2019 lend 0beserved 12 51 152 pray 0beserved 12 51 152 152	Tolerance (±%) 10% 10% 10% 10% 10% 10% 10% 10% 10% 10%	Pass Pass Pass Resu Pas Pas Pas



RELIABLE TECHNICAL SERVICES

(Division of Reliable Technocare Pvt. Ltd.) "RELIABLE HOUSE" 497/2834-35, Sant Tukaram Nagar, Pimpri, Pune - 411018. MH, India. Telefax : 020-27421170 Cell : 7774055755, 7774055855,7774058855, 7774022900 Email : reliable1010@gmail.com/reliabletechnocare@gmail.com Web. : www.reliabletechnicals.com / www.reliable.world



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rtificate No.	BM.19.04.20.247	Page No. 2 of 2			
4) EST :					
Sr. No.	Tests	Remarks			
1	Power Cords, Cables Checking	Ok			
2	Mains Socket Checking	Ok			

Sr.No	Parameters	Туре	Measured Values	Tolerance	Remarks
1	Supply Voltage	Live-Neutral	235.32	210 to 240 V	Pass
2	Supply Voltage	Live-Earth	236.91	210 to 240 V	Pass
3	Supply Voltage	Neutral-Earth	1.84	0 to 5 V	Pass
4	Protective Earth Resistance	-	1.83	< 5 ohm	Pass
5	Earth Leakage Current	Normal Close (NC)	168.4	< 500 µA	Pass
6	Earth Leakage Current	Normal Open (NO)	192.2	< 500 µA	Pass
7	Enclosure Leakage Current	Normal Close Close (NCC)	1.0	< 10 µA	Pass
8	Enclosure Leakage Current	Normal Open Close (NOC)	0.8	< 10 µA	Pass
9	Enclosure Leakage Current	Normal Close Open (NCO)	0.6	< 10 µA	Pass

Note:

1) This certificate refers only to the particular item submitted for calibration. UUC stands for Unit Under Calibration.

2) The calibration results reported in the certificate are valid at the time of and under the stated conditions of measurement.

3) Calibration point were selected as per customer specifications.

1) This certificate shall not be reproduced, except in full unless written permission for the publication of an approved abstract

as been obtained from the Technical Manager of "Reliable Technical Services, Pune".

i) The Standard used are traceable to National / International Standard.

calibrated By

Cable

.sst. Technical Manager ahul Sable F-21, R0

Approved By

f <u>S</u><u>M</u>. Quality Manager R.D.Bodhe

CO REDMI NOTE 8 PRO als. CON CO ALQUAD CAMERA

Anaesthesia Machine

Feb 2016 - Feb 2017

TRUDCAL

TRUCAL Authorised Service Provider For Ovronics Level 1 - #11, Bectronic Co-op, Estate, Pune-Satara Road, Pune - 411 009. INDIA Contact: 020 2420 8200

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Calibration Report

pital	Krishna Hospital,Karad	Certificate No.	AM-07		
duct	Anesthesia Machine	Manufacturer	GE (Datex Ohmeda)	Model	Aespire View
No.	APHR00827	CalDate	4/2/2016	Humidity % <70	Temperature ° C 25±4
et No.	NA	Due Date	3/2/2017	Department	Cardiac OT

1) VISUAL TEST

ELECTRICAL SAFTY

Sr. No.	Tests	Remarks
1	Power Cords, Cables Checking	ОК
2	Mains Socket Checking	ок
3	Equipment Type (B,BF,CF)	В
4	Equipment Class(I,II,III)	I

2) FUNCTIONAL TEST

Sr. No.	Parameters Measured Values		/alues	Remarks
1	Voltage between Live and Neutral (VIn)	229.20	(210 - 240 V)	ОК
2	Voltage between Live and Earth (Vle)	229.10	(210 - 240 V)	OK
3	Voltage between Neutral and Earth (Vnc)	1.20	(0-5V)	ОК
4	Enclosure Current	0.4	(0-10 µA)	ок
5	Leakage Current (IL)	48.1	(0-500 µA)	OK
6	Patient Leakage Current (PL)	0.3	(BF-0-100 µA) (CF-0-10 µA)	ОК

Tested By - TRUCAL		Certified By - TRUCAL		
Name: Prakash Gaikwad	in hank water	Authorised Signatory	126×	
and a state of the second	Consider the second	(Adh	Ht Su	
Date: 4/2/2016	- needer	Date: 8/2/2016	PU	

O REDMI NOTE 8 PRO



Certificate of Traceable Calibration

Hospital	Krishna Hospital,Karad	Spanis and	Gardina Charles	Certificate No.	AM-07
Product	Anesthesia Machine	Manufacturer	GE (Datex Ohmeda)	Model	Aespire View
Sr. No.	APHR00827	Cal Date	04/02/2016	Humidity % <70	Temperature ° C 25 ± 4
Asset No.	NA	Due Date	03/02/2017	Department	Cardiac OT

RUCAL recommended Call interval: 12 Months * The due date may be established (by the customer) by adding the "Recommended Cal Interval" to the "Date Placed is Service"

Instrument Condition:

Received: In working condition Returned: Post Calibration

TRUCAL certifies above instruments meets published measurement specifications and has been calibrated using standard traceable to the PRC National Institute of Metrology (NIM) and /or other National Metrology Institute (NIST, NPL, PTB) that are linked to international systems of units (SI). The policies & procedures used at this facility are based on IEC62353. The certificate shall not be reproduced except in full, without the writte approval of the calibration faculty.

Instrument Procedure

- TSI Incorporated USA, Certifier FA Plus Ventilator Test System for Gas Flow Analysis. Gossen Metrawatt, GmBH-Performance Verification Procedure as per Manufacturer Manual 1
- 2

Instrument / Equipment Used

Sr. No.	Manufacturer	Model	Model Description	ID No.	Due Date
1	TSI USA	4081	High Flow Module	40811530008	05/08/2016
2	Gossen Metrawatt	Seculife ST	Electrical safety Analyzer	K94627270001	30/06/2016

Test Result	an appendix	Pass
Date Issued	8/2/2016	Authorised Signatory
●O REDMI ◯◯ AI QUA	NOTE 8 PRO D CAMERA	

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	LIBRATIC	ON CERTI				
1.CUSTOMER Krishna Institute Of Medical Sciences Deemed University, Karad ,Dist.Satara-415110 Ambient Temp. Relative Humidity Location of calibration Condition of Item	- 25 ± 4°C - <70% RH - In lab/On s :- OK			o. :- I eived :- (
2. Description of Item Name ID No Sr No.	- Anesthesia - KH/W-01/0 - APHR008	OT-1/AM-01 M	lake lodel No. ocation	5-	GE Datex Omed OT-1 (Ward No	o-01)
Certified By ID/Sr. No. Calibration Validity 4.Calibration Results 4.1) Ventilation Mode	:- Tektronix :- 3366061 :- 26.12.201			Tektronix 3392002 28.12.2017		
IDDW//Inemired Desitive Pressure Ventilatio		CMV/Cont I	Mandatory	Ventilation)	BIPAP (Bi-L	evel Pos
IPPV(Inspired Positive Pressure Ventilation) PSV (Pressure Support Ventilation)	(n) YES		VC/PC	Ventilation) y Ventilation)	CPAP(Cont.P	ressure
		HFV (High	VC/PC	y Ventilation)	Airway F CPAP(Cont.P	Pressure Positive A Isure)
PSV (Pressure Support Ventilation)		HFV (High	VC/PC	y Ventilation)	Airway F CPAP(Cont.P Pres (Assist Contro	Pressure Positive A Isure)
PSV (Pressure Support Ventilation) SIMV(Synch.Intermittent Manda		HFV (High	VC/PC	y Ventilation)	Airway F CPAP(Cont.P Pres	Pressure Positive A ssure) Illed)
PSV (Pressure Support Ventilation) SIMV(Synch.Intermittent Manda 4.2) Testing On Patient Mode	tory Ventilation	HFV (High	VC/PC Frequency	y Ventilation)	Airway F CPAP(Cont.P Pres (Assist Contro	Pressure ositive A ssure) illed) Resu
PSV (Pressure Support Ventilation) SIMV(Synch.Intermittent Manda 4.2) Testing On Patient Mode Parameter	tory Ventilation Set	HFV (High	VC/PC Frequency Set	v Ventilation) AC	Airway F CPAP(Cont.P Pres (Assist Contro Tolerance (±%)	Pressure Positive A ssure) Ulled) Resu Pas Pas
PSV (Pressure Support Ventilation) SIMV(Synch.Intermittent Manda 4.2) Testing On Patient Mode Parameter Inspiratory Tidal Volume (Vti)(ml)	Set 100	HFV (High n) Obeserved 101.0	VC/PC Frequency Set 350	Ventilation) AC Obeserved 351.0	Airway F CPAP(Cont.P Pres (Assist Contro Tolerance (±%) 5%	Pressure Positive A Isure)
PSV (Pressure Support Ventilation) SIMV(Synch.Intermittent Manda 4.2) Testing On Patient Mode Parameter Inspiratory Tidal Volume (Vti)(ml) Expiratory Tidal Volume (Vte)(ml) Frequency(f)(bpm)	tory Ventilation Set 100 100	HFV (High n) Obeserved 101.0 100.0	VC/PC Frequency Set 350 350	Ventilation) AC Obeserved 351.0 349.0	Airway F CPAP(Cont.P Pres (Assist Contro Tolerance (±%) 5% 5%	Pressure lositive A isure) illed) Resu Pas Pas
PSV (Pressure Support Ventilation) SIMV(Synch.Intermittent Manda 4.2) Testing On Patient Mode Parameter Inspiratory Tidal Volume (Vti)(ml) Expiratory Tidal Volume (Vti)(ml) Frequency(f)(bpm) Peak Inspiratory Pressure(PIP)(cmH2O) Positive End-Expiratory	set 100 12	HFV (High n) Obeserved 101.0 100.0 12	VC/PC Frequency Set 350 350 14	Ventilation) AC Obeserved 351.0 349.0 14.0	Airway F CPAP(Cont.P Pres (Assist Contro Tolerance (±%) 5% 5% 5%	Pressure Positive A sure) olled) Resu Pas Pas
PSV (Pressure Support Ventilation) SIMV(Synch.Intermittent Manda 4.2) Testing On Patient Mode Parameter Inspiratory Tidal Volume (Vti)(ml) Expiratory Tidal Volume (Vti)(ml) Frequency(f)(bpm) Peak Inspiratory Pressure(PIP)(cmH2O) Positive End-Expiratory Pressure(PEEP)(cmH2O)	Set 100 100 12 11	HFV (High) Obeserved 101.0 100.0 12 11.0	VC/PC Frequency Set 350 350 14 23	Ventilation) AC Obeserved 351.0 349.0 14.0 23.0	Airway F CPAP(Cont.P Pres (Assist Contro Tolerance (±%) 5% 5% 5% 5% 5%	Pressure lositive A ssure) illed) Resu Pas Pas Pas
PSV (Pressure Support Ventilation) SIMV(Synch.Intermittent Manda 4.2) Testing On Patient Mode Parameter Inspiratory Tidal Volume (Vti)(ml) Expiratory Tidal Volume (Vti)(ml) Expiratory Tidal Volume(Vte)(ml) Frequency(f)(bpm) Peak Inspiratory Pressure(PIP)(cmH2O) Positive End-Expiratory Pressure(PEEP)(cmH2O) I:E Ratio	tory Ventilation Set 100 100 12 11 5 1:2	HFV (High n) Obeserved 101.0 100.0 12 11.0 5.0 1:1.8	VC/PC Frequency Set 350 350 14 23 4 1:2	Ventilation) AC Obeserved 351.0 349.0 14.0 23.0 4.0 1:2.3	Airway F CPAP(Cont.P Pres (Assist Contro Tolerance (±%) 5% 5% 5% 5% 5% 5% 5%	Pressure ositive A ssure) illed) Pas Pas Pas Pas Pas Pas Pas
PSV (Pressure Support Ventilation) SIMV(Synch.Intermittent Manda 4.2) Testing On Patient Mode Parameter Inspiratory Tidal Volume (Vti)(ml) Expiratory Tidal Volume (Vti)(ml) Expiratory Tidal Volume(Vte)(ml) Frequency(f)(bpm) Peak Inspiratory Pressure(PIP)(cmH2O) Positive End-Expiratory Pressure(PEEP)(cmH2O) I:E Ratio Inspiratory Time (Ti) (Sec)	tory Ventilation Set 100 100 12 11 5 1:2 2.1	HFV (High n) Obeserved 101.0 100.0 12 11.0 5.0 1:1.8 2.10	VC/PC Frequency Set 350 350 14 23 4 1:2 3	Ventilation) AC Obeserved 351.0 349.0 14.0 23.0 4.0 1:2.3 2.97	Airway F CPAP(Cont.P Press (Assist Control Tolerance (±%) 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5%	Pressure ositive A sure) illed) Resu Pas Pas Pas Pas
PSV (Pressure Support Ventilation) SIMV(Synch.Intermittent Manda 4.2) Testing On Patient Mode Parameter Inspiratory Tidal Volume (Vti)(ml) Expiratory Tidal Volume(Vte)(ml) Frequency(f)(bpm) Peak Inspiratory Pressure(PIP)(cmH2O) Positive End-Expiratory Pressure(PEEP)(cmH2O) I:E Ratio Inspiratory Time (Ti) (Sec) Expiratory Time (Te) (Sec)	tory Ventilation Set 100 100 12 11 5 1:2	HFV (High n) Obeserved 101.0 100.0 12 11.0 5.0 1:1.8	VC/PC Frequency Set 350 350 14 23 4 1:2	Ventilation) AC Obeserved 351.0 349.0 14.0 23.0 4.0 1:2.3	Airway F CPAP(Cont.P Pres (Assist Contro Tolerance (±%) 5% 5% 5% 5% 5% 5% 5%	Pressure ositive A ssure) Illed) Pas Pas Pas Pas Pas Pas Pas Pas Pas Pas
PSV (Pressure Support Ventilation) SIMV(Synch.Intermittent Manda 4.2) Testing On Patient Mode Parameter Inspiratory Tidal Volume (Vti)(ml) Expiratory Tidal Volume (Vti)(ml) Expiratory Tidal Volume(Vte)(ml) Frequency(f)(bpm) Peak Inspiratory Pressure(PIP)(cmH2O) Positive End-Expiratory Pressure(PEEP)(cmH2O) I:E Ratio Inspiratory Time (Ti) (Sec)	tory Ventilation Set 100 100 12 11 5 1:2 2.1 0.5 7	HFV (High h) Obeserved 101.0 100.0 12 11.0 5.0 1:1.8 2.10 0.5 7	VC/PC Frequency Set 350 350 14 23 4 1:2 3 0.5 14	v Ventilation) AC Obeserved 351.0 349.0 14.0 23.0 4.0 1:2.3 2.97 0.5 14	Airway F CPAP(Cont.P Press (Assist Control Tolerance (±%) 5%	Pressure lositive A ssure) Illed) Pas Pas Pas Pas Pas Pas Pas Pas Pas Pas
PSV (Pressure Support Ventilation) SIMV(Synch.Intermittent Manda 4.2) Testing On Patient Mode Parameter Inspiratory Tidal Volume (Vti)(ml) Expiratory Tidal Volume(Vte)(ml) Frequency(f)(bpm) Peak Inspiratory Pressure(PIP)(cmH2O) Positive End-Expiratory Pressure(PEEP)(cmH2O) I:E Ratio Inspiratory Time (Ti) (Sec) Expiratory Time (Te) (Sec) Peak Flow Rate(L/min)	tory Ventilation Set 100 100 12 11 5 1:2 2.1 0.5 7 21	HFV (High h) Obeserved 101.0 100.0 12 11.0 5.0 1:1.8 2.10 0.5 7 21.00	VC/PC Frequency Set 350 350 14 23 4 1:2 3 0.5 14 -	v Ventilation) AC Obeserved 351.0 349.0 14.0 23.0 4.0 1:2.3 2.97 0.5 14	Airway F CPAP(Cont.P Pres (Assist Contro Tolerance (±%) 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5%	Pressure ositive A ssure) illed) Pas Pas Pas Pas Pas Pas Pas Pas Pas Pas
PSV (Pressure Support Ventilation) SIMV(Synch.Intermittent Manda 4.2) Testing On Patient Mode Parameter Inspiratory Tidal Volume (Vti)(ml) Expiratory Tidal Volume(Vte)(ml) Frequency(f)(bpm) Peak Inspiratory Pressure(PIP)(cmH2O) Positive End-Expiratory Pressure(PEEP)(cmH2O) I:E Ratio Inspiratory Time (Ti) (Sec) Expiratory Time (Te) (Sec)	tory Ventilation Set 100 100 12 11 5 1:2 2.1 0.5 7	HFV (High h) Obeserved 101.0 100.0 12 11.0 5.0 1:1.8 2.10 0.5 7	VC/PC Frequency Set 350 350 14 23 4 1:2 3 0.5 14	v Ventilation) AC Obeserved 351.0 349.0 14.0 23.0 4.0 1:2.3 2.97 0.5 14	Airway F CPAP(Cont.P Press (Assist Control Tolerance (±%) 5%	Pressure ositive / ssure) illed) Pa Pa Pa Pa Pa Pa Pa Pa

Ø	RELIABLE TECHNICAL SER "RELIABLE HOUSE" 497/2834-35, Sant Tukara Pimpri, Pune - 411018. Telefax : 020-2742 Cell : 7709196666, 7774055755, 7774055 E-mail : reliable1010@gmail.com Web. : www.reliabletechnicals.com	am Nagar, 1170 8855	ROVALCE ISO 9001:2 DAKKS DEUIS Aktres D-24	
ificate No.	BM.17.05.03.082	Safety	Pag	e No. 2 of 2
st Results Isual Test :			Remark	ke
r. No.	Tests Power Cords, Cables Checking		Ok	~ ~
1	Mains Socket Checking		Ok B	
2	Equipment Type (B, BF, CF) Equipment Class (I, II, III)		B 1	
4	TER L Fleet Tupo CE Cardiac	Float Type		
	I-Properly Earthed ,II-Double Insulation,III-With Extra L	ow obioty rolling.		
FUNCTIONAL	TEST: Parameters		d Values	Remarks
Sr.No	Voltage between Live and Neutral (VIn)	236.08	(210-240V)	OK
1	Voltage between Live and Earth(VIe)	236.92	(210-240V)	OK
2	Voltage between Neutral and and Earth (Vne)	0.96	(0-5V)	OK
3		0.5	(0-10µA)	OK
4	Enclosure Current	113	(0-500µA)	OK
5	Leakage Current (IL) Patient Leakage Current (PL)	0.8	(BF-0- , 100µA) (CF-0- 10µA)	ок
The sting	refers only to the particular item submitted for calibration. UUC stands for Unit Un results reported in the certificate are valid at the time of and under the stated cond		tract	
2) The calibration	nt were selected as per customer specifications. shall not be reproduced, except in full unless written permission for the publication d from the Technical Manager of "Reliable Report Provider Services, Pune".	t of an approved app	Approved B Quality/Ma R.D.Bodhe	Bach
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1.CUSTOMER	LIBRAT	ION CER	TIFICA	TE		
Krishna Institute Of Medical Sciences Deemed University, Karad "Dist.Satara- 415110 Ambient Temp. Relative Humidity Location of calibration Condition of Item	:- 25 ± 4°C :- <70% RH :- In lab/On :- OK	4		No. :- ceived :-		
2. Description of Item Name ID No Sr No.	- Anesthes - KH/W-01 - APHR00	/OT-1/AM-01	Make Model No. Location		GE Datex Omeda CVTS OT-1 (V	Vard No-0
Calibration Validity 4.Calibration Results 4.1) Ventilation Mode IPPV(Inspired Positive Pressure Ventilation	:- 27.12.20 :-			25.12.2018 y Ventilation)	BIPAP (Bi-L	
PSV (Pressure Support Ventilation)		HFV (High	VC/PC Frequenc	y Ventilation)	CPAP(Cont.F	Pressure) Positive A Isure)
SIMV(Synch.Intermittent Mandato	ry Ventilatio	n)		AC	(Assist Contro	
4.2) Testing On Patient Mode						
Parameter	Set	Obeserved	Set	Obeserved	Tolerance (±%)	Resul
Inspiratory Tidal Volume (Vti)(ml)	100	99.3	350	349.3	5%	Pass
Expiratory Tidal Volume(Vte)(ml)	100	101.6	350	349.7	5%	Pass
Frequency(f)(bpm)	12	12.1	14	14.9	5%	Pass
	11	11.2	23	23.5	5%	Pass
Peak Inspiratory Pressure(PIP)(cmH2O)	1.1			4.0	5%	Pass
Positive End-Expiratory	5	5.0	4			
		5.0	4	1:2.2	5%	Pass
Positive End-Expiratory Pressure(PEEP)(cmH2O) I:E Ratio	5 1:2	1:1.8	1:2	1:2.2		Pass
Positive End-Expiratory Pressure(PEEP)(cmH2O) I:E Ratio Inspiratory Time (Ti) (Sec)	5 1:2 2.1	1:1.8	1:2	1:2.2	5%	Pass
Positive End-Expiratory Pressure(PEEP)(cmH2O) I:E Ratio	5 1:2	1:1.8	1:2	1:2.2		Pass Pass
Positive End-Expiratory Pressure(PEEP)(cmH2O) I:E Ratio Inspiratory Time (Ti) (Sec) Expiratory Time (Te) (Sec) Peak Flow Rate(L/min)	5 1:2 2.1 0.5	1:1.8 2.16 0.5	1:2 3 0.5	1:2.2 2.99 0.5	5% 5%	Pass Pass Pass
Positive End-Expiratory Pressure(PEEP)(cmH2O) I:E Ratio Inspiratory Time (Ti) (Sec) Expiratory Time (Te) (Sec)	5 1:2 2.1 0.5 7 21 100	1:1.8 2.16 0.5 7 21.00 100.00	1:2 3 0.5	1:2.2 2.99 0.5 14	5% 5% 5%	Pass Pass Pass Pass
Positive End-Expiratory Pressure(PEEP)(cmH2O) I:E Ratio Inspiratory Time (Ti) (Sec) Expiratory Time (Te) (Sec) Peak Flow Rate(L/min)	5 1:2 2.1 0.5 7 21	1:1.8 2.16 0.5 7 21.00	1:2 3 0.5	1:2.2 2.99 0.5 14	5% 5% 5% 5%	Pass Pass Pass Pass Pass Pass Pass Pass

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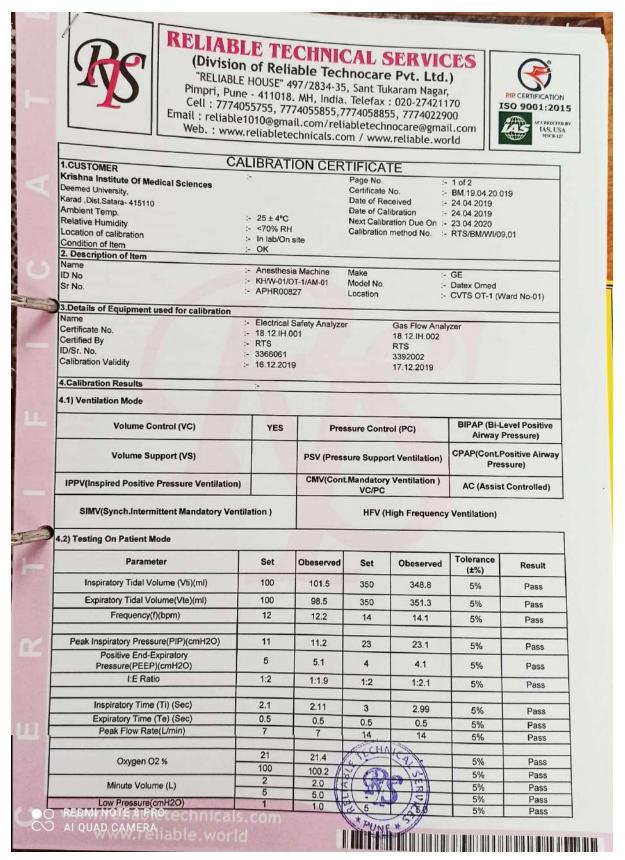
"RELIABLE HOUSE" 497/2834-35, Sant Tukaram Nagar, Pimpri, Pune - 411018. Telefax : 020-27421170 Cell : 7774055755, 7774055855,7774058855 E-mail : reliable1010@gmail.com Web : www.reliabletechnicals.com



ertificate No.	BM.18.05.01	.038			age No. 2 of	
4) EST :	Tasis			Remarks		
Sr. No.	Tests Power Cords, Cables Chec	king		Ok		
1	Power Cords, Cables Checking Mains Socket Checking	1	Ok			
2		3				
JNCTIONAL TE	ESI:	Туре	Measured	Tolerance	Remarks	
Sr.No	Parameters Supply Voltage	Live-Neutral	235.40	210 to 240 V	Pass	
1	Supply Voltage	Live-Earth	237.15	210 to 240 V	Pass	
2	Supply Voltage	Neutral-Earth	1.88	0 to 5 V	Pass	
3	Supply Voltage		1.14	< 5 ohm	Pass	
4	Protective Earth Resistance	Normal Close (NC)	2.1	< 10 µA	Pass	
5	Earth Leakage Current	Normal Open (NO)	2.0	< 10 µA	Pass	
6	Earth Leakage Current	Normal Open (NO)	0.5	< 10 µA	Pass	
7	Enclosure Leakage Current	NOC	0.9	< 10 µA	Pass	
8	Enclosure Leakage Current	NCO	1.2	< 10 µA	Pass	
9	Enclosure Leakage Current	NCO	2.2	< 10 µA	Pass	
10	Patient Auxiliary Leakage Current	RCC	2.1	< 10 µA	Pass	
11	Patient Auxiliary Leakage Current	RUU		1		
 The calibration r Calibration point This certificate s 	efers only to the particular item submitted for calibrati results reported in the certificate are valid at the time of twere selected as per customer specifications. shall not be reproduced, except in full unless written p from the Technical Manager of "Reliable Technical S ed are traceable to National / International Standard.	permission for the publication of a		ent. stract Approved B	sy andy.	
 The calibration r Calibration point This certificate s tas been obtained The Standard use Calibrated By 	results reported in the certificate are valid at the time t were selected as per customer specifications. shall not be reproduced, except in full unless written p from the Technical Manager of "Reliable Technical S ed are traceable to National / International Standard.	permission for the publication of a		Approved B	nager	
calibration for the calibration of the calibration point of calibration point of the calibration point of the calibratic calibrate calibrate calibrate calibrate calibrate calibration English and the calibratis and the calib	results reported in the certificate are valid at the time t were selected as per customer specifications. shall not be reproduced, except in full unless written p from the Technical Manager of "Reliable Technical S ed are traceable to National / International Standard.	permission for the publication of a			nager	
 The calibration r Calibration point This certificate s tas been obtained The Standard use Calibrated By 	results reported in the certificate are valid at the time t were selected as per customer specifications. shall not be reproduced, except in full unless written p from the Technical Manager of "Reliable Technical S ed are traceable to National / International Standard.	permission for the publication of a		Approved B	nager	
) The calibration r) Calibration point) This certificate s as been obtained () The Standard use Calibrated By Calibrated By Calibration Enginand Dalvi.	results reported in the certificate are valid at the time t were selected as per customer specifications. shall not be reproduced, except in full unless written p from the Technical Manager of "Reliable Technical S ed are traceable to National / International Standard.	permission for the publication of a		Approved B	nager	
The calibration r Calibration point This certificates as been obtained The Standard use alibrated By alibrated By alibration Enginand Dalvi.	results reported in the certificate are valid at the time t were selected as per customer specifications. shall not be reproduced, except in full unless written p from the Technical Manager of "Reliable Technical S ed are traceable to National / International Standard.	permission for the publication of a		Approved B	nager	
The calibration of Calibration point This certificates as been obtained The Standard use alibrated By alibration Enginand Dalvi.	results reported in the certificate are valid at the time t were selected as per customer specifications. shall not be reproduced, except in full unless written p from the Technical Manager of "Reliable Technical S ed are traceable to National / International Standard.	permission for the publication of a		Approved B	ady:	
The calibration of Calibration point This certificates as the standard use alibrated By alibration Enginand Dalvi.	results reported in the certificate are valid at the time t were selected as per customer specifications. shall not be reproduced, except in full unless written p from the Technical Manager of "Reliable Technical S ed are traceable to National / International Standard.	permission for the publication of a		Approved B	auf. nager	
The calibration of Calibration point This certificates as the standard use alibrated By alibration Enginand Dalvi.	results reported in the certificate are valid at the time t were selected as per customer specifications. shall not be reproduced, except in full unless written p from the Technical Manager of "Reliable Technical S ed are traceable to National / International Standard.	permission for the publication of a		Approved B	auf. nager	
The calibration of Calibration point This certificates is been obtained The Standard use alibrated By Action Engle and Dalvi.	results reported in the certificate are valid at the time t were selected as per customer specifications. shall not be reproduced, except in full unless written p from the Technical Manager of "Reliable Technical S ed are traceable to National / International Standard.	permission for the publication of a		Approved B	auf. nager	
The calibration of Calibration point This certificates as the standard use alibrated By alibration Enginand Dalvi.	results reported in the certificate are valid at the time t were selected as per customer specifications. shall not be reproduced, except in full unless written p from the Technical Manager of "Reliable Technical S ed are traceable to National / International Standard.	permission for the publication of a		Approved B	ady:	

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tificate No.	BM.19.04.3	20.019			Page No. 2 of
) EST :	Tasta		-	Remarks	
Sr. No.	Tests Power Cords, Cables Ch	ecking		Ok	
1	Mains Socket Checki			Ok	
Z INCTIONAL					
Sr.No	Parameters	Туре	Measured	Tolerance	Remarks
1	Supply Voltage	Live-Neutral	235.40	210 to 240 V	Pass
2	Supply Voltage	Live-Earth	236.94	210 to 240 V	Pass
3	Supply Voltage	Neutral-Earth	1.83	0 to 5 V	Pass
4	Protective Earth Resistance		1.24	< 5 ohm < 500 µA	Pass
5	Earth Leakage Current	Normal Close (NC)	170.2 205.6	< 500 µA < 500 µA	Pass
6	Earth Leakage Current	Normal Open (NO)	0.4	< 10 µA	Pass
7	Enclosure Leakage Current	Normal Close Close Normal Open Close	1.3	< 10 µA	Pass
	Enclosure Leakage Current	Normal Open Close	1.0		
) This certificate) The calibration) Calibration poi) This certificate has been obtained) The Standard u	Enclosure Leakage Current refers only to the particular item submitted for calibra results reported in the certificate are valid at the time in were selected as per customer specifications. Is shall not be reproduced, except in full unless written of from the Technical Manager of "Reliable," conficted issed are traceable to National / International Standard	e of and under the stated condition	s or measureme	Approved By	
9 Note:) This certificate 2) The calibration 3) Calibration poi 4) This certificate has been obtained 5) The Standard u Calibrated By	Enclosure Leakage Current refers only to the particular item submitted for calibra nesults reported in the certificate are valid at the time nt were selected as per customer specifications. I shall not be reproduced, except in full unless written bd from the Technical Manager of "Reliable, robnickal used are traceable to National / International Standard	ation. UUC stands for Unit Under C e of and under the stated condition:	Calibration. s of measureme	nt. tract Approved By	

AI QUAD CAMERA

Manman Drill Machine

May 2016 - May 2017

CALIBRA	ATION CERTIFI Page No.	CATE	Akkreditierungsstelle D-214-16033-01-00
ے۔ Medical Sciences	Page No.	CATE	
incurcar sciences		:- 1 of 1	
	-		
15110	Certificate No.	- B.16.05.01.028	
:- 23.1	Date of Received	- 07.05.2016	
and the second	Next Calibration Due	- 07.05.2016	-
and off one	Calibration method N	0. :- RTS/BM/WI/01	(Customer suggested)
		:- Manman	
:			
nent used for calibration		3= N074	
:- Electrical Safety Analyzer	and the second second		
:- Fluke			
:- 23.12.2016			
te.	Electrical Safety		
Mains Socket Che	ecking		lk
Equipment Type (B,	BF, CF)		3
A REAL PROPERTY AND A REAL	2010201041112701		I
I-Properly Earthed ,II-Dou	ble Insulation, III-With Ext	ra Low Safety Voltage	
EST:			
No 7500 (Weight Schwarzscher Sc			Remarks
Voltage between Live and Neutra	al (Vin)	235.07 (210-240V)	ок
Voltage between Live and Earth	(Vle)	237.50 (210-240V)	OK
		2.71 (0-5V)	ОК
			ок
Enclosure Current			
Leakage Current (IL)		118 (0-500µA)	ОК
Patient Leakage Current (PL	and the second se	0.6 (BF-0-100µA)	ОК
	%RH) :- 54 on :- In lab/On site :- OK em :- Nero Manman Drill :- KIMSDU/OT-4/DM-01 : nent used for calibration :- Electrical Safety Analyzer :- Fluke :- 3366061 :- 23.12.2016 :- Tests Power Cords, Cables Mains Socket Chee Equipment Type (B, Equipment Class (I B-Body Type,BF-F I-Properly Earthed ,II-Dou EST: Parameters Voltage between Live and Neutre Voltage between Live and Earth ottage between Neutral and and Earth Dottage between Neutral and and Earth	23.1 Date of Calibration /eRH) :- 54 Next Calibration Due on :- In lab/On site Calibration method N :- OK Calibration method N em :- Nero Manman Drill Make :- Nero Manman Drill Make :- Nero Manman Drill Make :- Sr.No nent used for calibration :- Electrical Safety Analyzer :- Fluke :- 3366061 :- 23.12.2016 :- Electrical Safety Mains Socket Checking Mains Socket Checking Equipment Type (B, BF, CF) Equipment Class (I, II, III) B-Body Type, BF-Body Float Type, CF-Card I-Properly Earthed ,II-Double Insulation, III-With Ext EST: Parameters Voltage between Live and Neutral (VIn) Voltage between Live and Earth(Vle) ohtage between Neutral and and Earth (Vne) Enclosure Current	ARH): - 23.1 Date of Calibration - 07.05.2016 Next Calibration Due On - 06.05.2017 Calibration Due On - 06.05.2017 Calibration method No. - RTS/BM/W//01 - RTS/BM/W//01 em - OK - OT-4 - OT-4 - Sr.No - KIMSDU/OT-4/DM-01 Location - OT-4 - Sr.No - K574 - K574 nent used for calibration - OT-4 - OT-4 - OT-4 Sr.No - K574 - K574 nent used for calibration - Sr.No - K574 i Sr.No - K574 i Sr.No - K574 i

Y	RELIABLE TECHN "RELIABLE HOUSE" 497/2834 Pimpri, Pune - 411018. Te Cell : 7709196666, 7774 E-mail : reliable10 Web. : www.reliable	4-35, Sant Tuka elefax : 020-27 055755, 77740 010@gmail.com	aram Nagar, 421170 55855	ROYALCER ISO 9001:20 (DAKKS Deutsche Akirediti D-ZM-160
	CALIBRATION	CERTIFICATI	E	
Deemed Unive Karad ,Dist.Satar Ambient Temp. Relative Humid Location of cali Condition of Ite	rsity, Date a-415110 Date :- 25 ± 4℃ Next (ity :- <70% RH Calibr pration :- In lab/On site m :- OK	icate No. of Received of Calibration Calibration Due On	- 1 of 1 - BM.17.05.03.160 - 04.05.2017 - 04.05.2017 - 03.05.2018 - RTS/BM/WI/01	
2. Description Name ID No Sr No.	of Item - Manman Driving Unit Make - KH/OT-07/MDU-01 Mode - K574 Locat	al No.	:- Manman : :- OT-07	
Certified By ID/Sr. No. Calibration Vali 4.Test Results A) Visual Test	:- Elect	trical Safety		
Sr. No.	Tests		Remar	ks
1,	Power Cords, Cables Checking		Ok	
2	Mains Socket Checking Equipment Type (B, BF, CF)		B	
3	Equipment Class (I, II, III)		1	
	Equipment Class (I, II, III) B-Body Type, BF-Body Float		at Type	
3 4	Equipment Class (I, II, III) B-Body Type,BF-Body Float I-Property Earthed ,II-Double Insulation		at Type	
3 4 B) FUNCTION	Equipment Class (I, II, III) B-Body Type,BF-Body Float I-Property Earthed ,II-Double Insulation	on,III-With Extra Low	at Type	Remarks
3 4	Equipment Class (I, II, III) B-Body Type,BF-Body Float I-Properly Earthed ,II-Double Insulation	on,III-With Extra Low	at Type Safety Voltage	Remarks
3 4 B) FUNCTION/ Sr.No	Equipment Class (I, II, III) B-Body Type,BF-Body Float I-Properly Earthed ,II-Double Insulation AL TEST: Parameters	on,III-With Extra Low Me	at Type Safety Voltage easured Values	100000000000000000000000000000000000000
3 4 B) FUNCTION/ Sr.No 1	Equipment Class (I, II, III) B-Body Type,BF-Body Float I-Properly Earthed ,II-Double Insulation AL TEST: Parameters Voltage between Live and Neutral (VIn)	on,III-With Extra Low Me 236.10	at Type Safety Voltage easured Values (210-240V)	ок
3 4 B) FUNCTION/ Sr.No 1 2	Equipment Class (I, II, III) B-Body Type,BF-Body Float I-Properly Earthed ,II-Double Insulation AL TEST: Parameters Voltage between Live and Neutral (VIn) Voltage between Live and Earth(VIe)	Me 236.10 237.25	at Type Safety Voltage easured Values (210-240V) (210-240V)	ок ок
3 4 B) FUNCTION/ Sr.No 1 2 3	Equipment Class (I, II, III) B-Body Type,BF-Body Float I-Properly Earthed ,II-Double Insulation AL TEST: Parameters Voltage between Live and Neutral (VIn) Voltage between Live and Earth(VIe) Voltage between Neutral and and Earth (Vne)	on,III-With Extra Low Me 236.10 237.25 1.35	at Type Safety Voltage (210-240V) (210-240V) (0-5V) (0-500μA)	ОК ОК ОК
3 4 B) FUNCTION/ Sr.No 1 2 3 4 4 4 4 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5	Equipment Class (I, II, III) B-Body Type,BF-Body Float I-Properly Earthed ,II-Double Insulation AL TEST: Parameters Voltage between Live and Neutral (VIn) Voltage between Live and Earth(VIe) Voltage between Neutral and and Earth (Vne) Enclosure Current	on,III-With Extra Low 236.10 237.25 1.35 0.7	at Type Safety Voltage (210-240V) (210-240V) (0-5V) (0-10μA)	ОК ОК ОК
3 4 B) FUNCTION/ Sr.No 1 2 3 4 5 6 Note: - 1) This certificate (2) The calibration (Equipment Class (I, II, III) B-Body Type,BF-Body Float I-Properly Earthed ,II-Double Insulation LTEST: Parameters Voltage between Live and Neutral (VIn) Voltage between Live and Earth (VIe) Voltage between Neutral and and Earth (VIe) Enclosure Current Leakage Current (IL) Patient Leakage Current (PL) effers only to the particular item submitted for calibration. UUC esuits reported in the certificate are valid at the time of and un were selected as per customer specifications. In the Technical Manager of "Reliable" of the particular the time of the technical Manager of "Reliable" of techn	on,III-With Extra Low Me 236.10 237.25 1.35 0.7 118 0.4 stands for Unit Under Ca der the stated conditions	alibration. of measurement.	ОК ОК ОК ОК

April 2018 - April 2019

1	Cell : 77740 E-mail	497/2834-35, Sar - 411018. Telefax : 55755, 7774055855 : reliable1010@gm. vww.reliabletechnic	nt Tukaram Nagar, 020-27421170 ,7774058855 ail.com	RIR CERT	IFICATION 01:2015 ACCREDITED BY IAS, USA MSCB-127
1.01107	CALIE	BRATION CER	TIFICATE		
Deemed U Karad ,Dis Ambient ⁻ Relative H Location of Condition	Institute Of Medical Sciences University, at Satara-415110 Temp. :- 25 ± 4°C Humidity :- <70% RH of calibration :- On site	Pag Cer Dat Dat Nex	tificate No. e of Received e of Calibration tt Calibration Due On bration method No.	:- 1 of 1 :- BM.18.04.29. :- 28.04.2018 :- 28.04.2018 :- 27.04.2019 :- RTS/BM/WI/(
Name	:- Manman Driv	ing Unit Mak			
ID No	:- KH/OT-07/ME		lel No.	:- Manman :	
Sr No.	:- K574		ation	- OT-07	
3 Details	of Equipment used for calibration				
	on Results :-	EST :			
Sr. No.	Tests			Remarks	
1	Power Cords, Cables			Ok	
FUNCTION	Mains Socket Ch AL TEST:	ecking		Ok	
Sr.No	Parameters	Туре	Measured Values	Tolerance	Remark
1	Supply Voltage	Live-Neutral	235.84	210 to 240 V	Pass
2	Supply Voltage	Live-Earth	236.81	210 to 240 V	Pass
3	Supply Voltage	Neutral-Earth	1.19	0 to 5 V	Pass
5	Protective Earth Resistance Earth Leakage Current		0.76	< 5 ohm	Pass
6	Earth Leakage Current	Normal Close (NC) Normal Open (NO)	2.1	< 10 µA	Pass
7	Enclosure Leakage Current	NCC	1.3	< 10 μA < 10 μA	Pass Pass
8	Enclosure Leakage Current	NOC	0.5	< 10 µA	Pass
9	Enclosure Leakage Current	NCO	0.9	< 10 µA	Pass
10	Patient Auxiliary Leakage Current	NCC	0.8	< 10 µA	Pass
11 Note:	Patient Auxiliary Leakage Current	RCC	0.7	< 10 µA	Pass
 2) The calibration 3) Calibration point 4) This certificat 4) This certificat 4) as been obtain 	te refers only to the particular item submittee on results reported in the certificate are valid point were selected as per customer specifica e shall not be reproduced, except in full unle ed from the Technical Manager of "Reliable I used are traceable to National / Internation	I at the time of and under th ations. ess written permission for th Technical Services, Pune'	ne stated conditions of me he publication of an appro	asurement. ved abstract Approved By J. Bauly	
	igineer (2)	100		Quality Manager R.D.Bodhe	
.N.Borse.					

April 2019 - April 2020

Sr. No. Tests Remarks 1 Power Cords, Cables Checking Ok 2 Mains Socket Checking Ok FUNCTIONAL TEST: Ok Sr.No Parameters Type Measured Values Tolerance Remarks 1 Supply Voltage Live-Neutral 235.29 210 to 240 V Pass 2 Supply Voltage Live-Earth 237.81 210 to 240 V Pass 3 Supply Voltage Neutral-Earth 236.66 0 to 5 V Pass 4 Protective Earth Resistance - 1.13 < 5 ohm Pass 5 Earth Leakage Current Normal Close (NC) 167.2 < 500 µA Pass 6 Earth Leakage Current Normal Close Close 1.0 < 10 µA Pass 9 Enclosure Leakage Current Normal Open Close 0.5 < 10 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 10 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 10 µA Pass 9 Enclos	R	(Division of "RELIABLE HO Pimpri, Pune - 4 Cell : 77740557 Email : reliable1010	TECHNICA Reliable Technor USE" 497/2834-35, 5a 411018. MH, India. Te 55, 7774055855,7774 D@gmail.com/reliable iabletechnicals.com/	ocare Pvt. Ltd.) ant Tukaram Nagar, lefax : 020-2742117 058855, 777402290 etechnocare@gmail	70 ISO S 0 .com	ERTIFICATION DOO1:201 ACCREDITED ACCREDITED ASCISLIZI
Krishna Institute Of Medical Sciences Page NO. := Diff Demend University. := BM.19.04.20.300 Amad. Dist Statza - 415110 Date of Received := 27.04.2019 Ambient Temp := 25 ± 4°C Next Calibration Due On := 26.04.2020 Relative Humidity := 70% 6 RH Calibration Due On := 26.04.2020 Location of calibration := OK Next Calibration Due On := 26.04.2020 Z. Description of Item := OK Next Calibration method No. := RTS/BM/WI/01 Z. Description of Item := OK Name := Manman Driving Unit Make := Manman Name := Manman Driving Unit Make := Manman := Manman ID No := KKY0T-07/MDU-01 Location := OT-07 3.Details of Equipment used for calibration Name := Manman Name := EST: :: :: Sr. No. Tests Remarks : 1 Power Cords, Cables Checking Ok :: 2 Supply Voltage Live-Neutral 235.29 : : Sr. No. Tests Remarks <	1 CUSTO	CALI	BRATION CER	TIFICATE		
Name : Manman Driving Unit Make : Manman ID No : KS74 Model No. :- :- Sr No. : KH/OT-07/MDU-01 Location :- OT-07 3.Details of Equipment used for calibration Name :- OT-07 Sr No. : Electrical Safety Analyzer OT-07 Certificate No. : 1812 IH 001 OT-07 Calibration Results : EST : Sr. No. Tosts Remarks 1 Power Cords, Cables Checking Ok 2 Mains Socket Checking Ok 2 Supply Voltage Live-Neutral 235.29 210 to 240 V Pass 3 Supply Voltage Neural-Earth 2.66 0 to 5 V Pass 4 Protective Earth Resistance - 1.13 < 5 ohm Pass 5 Earth Leakage Current Normal Close (NC) 167.2	Krishna Ir Deemed Un Karad , Dist Ambient Te Relative Hu Location of Condition o	stitute Of Medical Sciences liversity. Satara- 415110 emp. :- 25 ± 4°C umidity :- <70% RH calibration :- On site filem :- OK	Cert Date Date Next	ificate No. e of Received e of Calibration t Calibration Due On	:- BM.19.04.20 :- 27.04.2019 :- 27.04.2019 :- 26.04.2020	
ID No ⇒ K574 Model No. ⇒ standard Sr No. ⇒ KH/OT-07/MDU-01 Location ⇒ OT-07 3.Details of Equipment used for calibration Name ⇒ Electrical Safety Analyzer Certificate No. ⇒ 18.12.1H.001 Certificate Safety Analyzer Certificate No. ⇒ 18.12.1H.001 Certificate Safety Analyzer Calibration Validity ⇒ 16.12.2019 EST : Sr. No. Tests Remarks 1 Power Cords, Cables Checking Ok 2 Mains Socket Checking Ok FUNCTIONAL TEST: Sr.No Parameters Type Sr.No Parameters Type Measured Values Tolerance 2 Supply Voltage Live-Neutral 235.29 210 to 240 V Pass 3 Supply Voltage Neutral-Earth 2.66 0 to 5 V Pass 4 Protective Earth Resistance - 1.13 < 5 ohm			iving Linit Make			
Sr No. :- KH/OT-07/MDU-01 Location :- OT-07 3.Details of Equipment used for calibration Name :- Electrical Safety Analyzer Certificate No. :- 18.12.IH.001 Certificate No. :- 18.12.IH.001 Certificate No. :- 3366061 Calibration Results :- EST : Sr. No. Tests Remarks 1 Power Cords, Cables Checking Ok 2 Mains Socket Checking Ok 2 Supply Voltage Live-Neutral 236.29 210 to 240 V Pass 3 Supply Voltage Live-Earth 237.81 210 to 240 V Pass 4 Protective Earth Resistance - 1.113 <5 ohm Pass 5 Earth Leakage Current Normal Close (NC) 174.7 <500 µA Pass 6 Earth Leakage Current Normal Close Close 1.0 <10 µA Pass 8 Enclosure Leakage Current Normal Close Close 1.0 <10 µA Pass 9 Enclosure Leakage Current Normal Close Close 0.5 <10 µA Pass 9 Enclosure Leakage Current Normal Close Close 0.5 <10 µA Pass 9 Enclosure Leakage Current Normal Close Close 0.5 <10 µA Pass 9 Enclosure Leakage Current Normal Close Close 0.5 <10 µA Pass 9 Enclosure Leakage Current Normal Close Close 0.5 <10 µA Pass 9 Enclosure Leakage Current Normal Close Close 0.5 <10 µA Pass 9 Enclosure Leakage Current Normal Close Close 0.5 <10 µA Pass 9 Enclosure Leakage Current Normal Close Close 0.5 <10 µA Pass 9 Enclosure Leakage Current Normal Close Close 0.5 <10 µA Pass 9 Enclosure Leakage Current Normal Close Close 0.5 <10 µA Pass 10 Heat the theorematic the stated conditions of measurement. Calibration point were selected as per customer specification. UUC stands for Unit Under Calibration. 11 Ecolosure Leakage Current Normal Close Close 0.5 <10 µA Pass 9 Enclosure Leakage Current Normal Close Close 0.5 <10 µA Pass 9 Enclosure Leakage Current Normal Close Close 0.5 <10 µA Pass 11 Ecolosure Leakage Current Normal Close Close 0.5 <10 µA Pass 9 Enclosure Leakage Current Normal Close Close 0.5 <10 µA Pass 9 Enclosure Leakage Current Normal Close Close 0.5 <10 µA Pass 12 Cloredote Close 0.5 <10 µA Pass 9 Enclosure Leakage Current Normal						
Name := Electrical Safety Analyzer Certificate No. := 18.12.IH.001 Certificate No. := 18.12.IH.001 Certificate No. := 3366061 Calibration Validity := 16.12.2019 4.Calibration Results := EST : Sr. No. Tests Remarks 1 Power Cords, Cables Checking Ok 2 Mains Socket Checking Ok 2 Mains Socket Checking Ok 5r.No Parameters Type Measured Values Tolerance Remark 1 Supply Voltage Live-Neutral 235.29 210 to 240 V Pass 2 Supply Voltage Live-Reath 237.81 210 to 240 V Pass 3 Supply Voltage Neutral-Earth 2.66 0 to 5 V Pass 4 Protective Earth Resistance - 1.13 < 5 ohm Pass 5 Earth Leakage Current Normal Close (NC) 167.2 < 500 µA Pass 6 Earth Leakage Current Normal Close (NC) 167.2 < 500 µA Pass 8 Enclosure Leakage Current Normal Close Close 1.0 < 10 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 10 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 10 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 10 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 10 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 10 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 10 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 10 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 10 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 10 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 10 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 10 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 10 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 0 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 0 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 0 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 0 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 0 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 0 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 0 µA Pass 9 Enclosure Device Close As per customer specifications. 9 Enclose Close As per customer specifications	Sr No.	:- KH/OT-07/M	A CONTRACTOR OF		A REAL PROPERTY AND A REAL PROPERTY AND	
1 Power Cords, Cables Checking Ok 2 Mains Socket Checking Ok 2 Mains Socket Checking Ok Sr.No Parameters Type Measured Values Tolerance Remarks 1 Supply Voltage Live-Neutral 235.29 210 to 240 V Pass 2 Supply Voltage Live-Earth 237.81 210 to 240 V Pass 3 Supply Voltage Neutral-Earth 237.81 210 to 240 V Pass 4 Protective Earth Resistance - 1.13 < 5 ohm Pass 5 Earth Leakage Current Normal Close (NC) 167.2 < 500 µA Pass 6 Earth Leakage Current Normal Open (NO) 174.7 < 500 µA Pass 7 Enclosure Leakage Current Normal Open Close 0.5 < 10 µA Pass 8 Enclosure Leakage Current Normal Close Open 1.1 < 10 µA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 10 µA Pass 7 Enclosure Leakage Current Normal Close Open 1.1 < 10 µA Pass 8 Enclosure Leakage Current Normal Close Open 1.1	Calibration \ 4.Calibratio	/alidity :- 16.12.2019 n Results :-	EST :			
2 Mains Socket Checking Ok UNCTIONAL TEST: Ok Sr.No Parameters Type Measured Values Tolerance Remark 1 Supply Voltage Live-Neutral 235.29 210 to 240 V Pass 2 Supply Voltage Live-Earth 237.81 210 to 240 V Pass 3 Supply Voltage Neutral-Earth 2.66 0 to 5 V Pass 4 Protective Earth Resistance - 1.13 < 5 ohm	and the second second				Remarks	
UNCTIONAL TEST: Type Measured Values Tolerance Remark 1 Supply Voltage Live-Neutral 235.29 210 to 240 V Pass 2 Supply Voltage Live-Earth 237.81 210 to 240 V Pass 3 Supply Voltage Neutral-Earth 2.66 0 to 5 V Pass 4 Protective Earth Resistance - 1.13 < 5 ohm						
1 Supply Voltage Live-Neutral 235.29 210 to 240 V Pass 2 Supply Voltage Live-Earth 237.81 210 to 240 V Pass 3 Supply Voltage Live-Earth 237.81 210 to 240 V Pass 4 Protective Earth Resistance - 1.13 < 5 ohm	UNCTIONA	L TEST:	lecking		Ok	
1 Supply Voltage Live-Neutral 235.29 210 to 240 V Pass 2 Supply Voltage Live-Earth 237.81 210 to 240 V Pass 3 Supply Voltage Neutral-Earth 2.66 0 to 5 V Pass 4 Protective Earth Resistance - 1.13 < 5 ohm			Туре	Measured Values	Tolerance	Remark
3 Supply Voltage Neutral-Earth 237.81 210 to 240 V Pass 3 Supply Voltage Neutral-Earth 2.66 0 to 5 V Pass 4 Protective Earth Resistance - 1.13 < 5 ohm				235.29	210 to 240 V	
4 Protective Earth Resistance - 1.13 < 5 ohm			2011/01/01/01/01/01/01		210 to 240 V	Pass
5 Earth Leakage Current Normal Close (NC) 167.2 < 5 ohm			Neutral-Earth			Pass
6 Earth Leakage Current Normal Open (NO) 174.7 < 500 μA Pass 7 Enclosure Leakage Current Normal Close Close 1.0 < 10 μA	5		Normal Close (NC)	TITUMOR		
7 Enclosure Leakage Current Normal Close Close 1.0 < 10 μA Pass 8 Enclosure Leakage Current Normal Open Close 0.5 < 10 μA	11775		Normal Open (NO)			21120.27
c Linclosure Leakage Current Normal Open Close 0.5 < 10 μA Pass 9 Enclosure Leakage Current Normal Close Open 1.1 < 10 μA				1		and the second s
te: 1.1 < 10 μA				0.5		101 101 101
This certificate refers only to the particular item submitted for calibration. UUC stands for Unit Under Calibration. The calibration results reported in the certificate are valid at the time of and under the stated conditions of measurement. Calibration point were selected as per customer specifications. This certificate shall not be reproduced, except in full unless written permission for the publication of an approved abstract been obtained from the Technical Manager of "Reliable Technical Services, Pune". The Standard used are traceable to National / International Standard ibrated By Early Technical Manager USAble Cuality Manager	te:				< 10 µA	
	ins ceruficate	nt were selected as per customer specific shall not be reproduced, except in full up	at the time of and under the ations.	ne stated conditions of m	easurement.	

OT Light

May 2016 – May 2017

		Akkreditlerungsstelle D-2M-16033-01-00
CALIBRATION	CERTIFICATE	
-27	Page No.	- 1 of 1
	Certificate No	D to or other
	Date of Received	- B.16.05.01.030 - 07.05.2016
- 52	Date of Calibration	- 07 05 2016
:- In lab/On site	Calibration method No	- 06.05.2017 (Customer suggested)
:- OK		- RTS/BM/WI/08
:- OT Light	Make	:- Technomed
- KIMSDU/OT-4/OTL-2	Model No.	:
· ·	Location	:- OT Store
on		
:- LUX METER		
:- HI-TECH		
:- RTS-LX-01		
- 04.05.2017		
40000	40000	48400
re valid at the time of and under pecifications. full unless written permission fo Reliable Technical Services, Pur	r the publication of an approved a	
12/2/01		
* PUNE		
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	CALIBRATION (CALIBRATION (CALIBR	Certificate No. Date of Received Date of Calibration Next Calibration Due On Calibration method No. - OK - OT Light - KIMSDU/OT-4/OTL-2 - Make Model No. Location - LUX METER - HI-TECH - RTS-LX-01 - 04.05.2017

		CALIBRATION	CERTIFICATE	
	1.CUSTOMER Krishna Institute Of Medical Scier	-	Page No.	:- 1 of 1
	Deemed University,	ices	Certificate No. Date of Received	- BM.17.05.03.149 - 04.05.2017
	Karad .Dist Satara- 415110		Date of Calibration	- 04.05.2017
	Ambient Temp.	:- 25 ± 4°C	Next Calibration Due On	
	Relative Humidity Location of calibration	:- <70% RH :- In lab/On site	Calibration method No.	:- RTS/BM/WI/08
	Condition of Item	:- OK		
	2. Description of Item			
	Name	:- OT Light	Make	:- Technomed
	ID No. Sr No.	:- KH/OT-04/OL-02	Model No.	i
	Si No.	- 150666	Location	:- OT-04
Ē	3.Details of Equipment used for call	bration	and the states	
1	Name	:- LUX METER		
12	Certificate No.	:- SM/XIX - 2677		
10.5	ertified By	:- S.M. Engineers		
	D/Sr. No.	:- RTS-LX-01		
10	alibration Validity	:- 21.08.2018		
	Distance From Light Source(cm		100	
	Intensity (LUX)	48526	49436	18464
Note:		and the second second		48464
Cali This s be	s certificate refers only to the particular ite calibration results reported in the certific bration point were selected as per custon certificate shall not be reproduced, except an obtained from the Technical Manager ated By	of "Reliable Technical Service"	under the stated conditions of m	easurement.
-	tion Engineer			2 Karly
ibra	able.			Quality Manager
ibra iul S 21,	able R0	Prove *	or	R.D.Bodhe

-D	Pimpri, Pune - 411018. Cell : 7774055755, 77 E-mail : reliable Web. : www.reliat	74055855,7774058855 1010@gmail.com	RIP CERTIFICATION ISO 9001:201
	CALIBRATION	N CERTIFICATE	
1.CUSTOMER	3-	Page No.	:- 1 of 1
Krishna Institute Of Medic	al Sciences	Certificate No.	:- BM.18.04.29.048
Deemed University,		Date of Received	:- 29.04.2018
Karad ,Dist.Satara- 415110 Ambient Temp.		Date of Calibration	:- 29.04.2018
Relative Humidity	:- 25 ± 4°C :- <70% RH	Next Calibration Due On	:- 28.04.2019
Location of calibration	:- On site	Calibration method No.	:- RTS/BM/WI/08
Condition of Item	:- OK		
2. Description of Item			
Name	:- OT Light	Make	:- Technomed
ID No	:- KH/OT-04/OTL-02	Model No.	· · ·
Sr No.	:- 150666	Location	_ OT-04
3.Details of Equipment use	ed for calibration		
Name	:- LUX METER		
Certificate No.	:- SM/XIX - 2677		
Certified By	:- S.M. Engineers		
ID/Sr. No.	:- RTS-LX-01		
Calibration Validity	:- 21.08.2018		
4.Calibration Results	3 4	-	
Distance From Linkt		100	
Distance From Light Source(cm)		49343	49345
	48429	49545	
Source(cm)	48429	40040	
Source(cm) Intensity (LUX) Note:		ation. UUC stands for Unit Under Calib	pration.
Source(cm) Intensity (LUX) Note: I) This certificate refers only to the	e particular item submitted for calibr		
Source(cm) Intensity (LUX) Note: 1) This certificate refers only to the 2) The calibration results reported 3) Calibration point were selected	e particular item submitted for calibr in the certificate are valid at the tim as per customer specifications.	ation. UUC stands for Unit Under Calib e of and under the stated conditions of	measurement.
Source(cm) Intensity (LUX) Note: 1) This certificate refers only to the 2) The calibration results reported 3) Calibration point were selected 4) This certificate shall not be repr	e particular item submitted for calibrin in the certificate are valid at the time as per customer specifications. oduced, except in full unless written	ation. UUC stands for Unit Under Calit e of and under the stated conditions of permission for the publication of an ap	measurement.
Source(cm) Intensity (LUX) Note: 1) This certificate refers only to the 2) The calibration results reported 3) Calibration point were selected 4) This certificate shall not be repr has been obtained from the Techn	e particular item submitted for calibr in the certificate are valid at the tim as per customer specifications. oduced, except in full unless written ical Manager of "Reliable Technical	ation. UUC stands for Unit Under Calib e of and under the stated conditions of permission for the publication of an ap Services, Pune".	measurement.
Source(cm) Intensity (LUX) Note: 1) This certificate refers only to the 2) The calibration results reported 3) Calibration point were selected 4) This certificate shall not be repr has been obtained from the Techn	a particular item submitted for calibr in the certificate are valid at the tim as per customer specifications. oduced, except in full unless written ical Manager of "Reliable Technical to to National Unternational Standar	ation. UUC stands for Unit Under Calib e of and under the stated conditions of permission for the publication of an ap Services, Pune".	measurement.
Source(cm) Intensity (LUX) Note: 1) This certificate refers only to the 2) The calibration results reported 3) Calibration point were selected 4) This certificate shall not be repri- has been obtained from the Techn 5) The Standard used are traceabl	a particular item submitted for calibr in the certificate are valid at the tim as per customer specifications. oduced, except in full unless written ical Manager of "Reliable Technical to to National Unternational Standar	ation. UUC stands for Unit Under Calib e of and under the stated conditions of permission for the publication of an ap Services, Pune".	measurement. proved abstract
Source(cm) Intensity (LUX) Note: 1) This certificate refers only to the 2) The calibration results reported 3) Calibration point were selected 4) This certificate shall not be repri- has been obtained from the Techn 5) The Standard used are traceabl Calibrated By	a particular item submitted for calibr in the certificate are valid at the tim as per customer specifications. oduced, except in full unless written ical Manager of "Reliable Technical to to National Unternational Standar	ation. UUC stands for Unit Under Calib e of and under the stated conditions of permission for the publication of an ap Services, Pune".	measurement.
Source(cm) Intensity (LUX) Note: 1) This certificate refers only to the 2) The calibration results reported 3) Calibration point were selected 4) This certificate shall not be repri- has been obtained from the Techn 5) The Standard used are traceabl Calibrated By	a particular item submitted for calibr in the certificate are valid at the tim as per customer specifications. oduced, except in full unless written ical Manager of "Reliable Technical to to National Unternational Standar	ation. UUC stands for Unit Under Calib e of and under the stated conditions of permission for the publication of an ap Services, Pune".	measurement. proved abstract Approved By
Source(cm) Intensity (LUX) Note: 1) This certificate refers only to the 2) The calibration results reported 3) Calibration point were selected 4) This certificate shall not be repri- has been obtained from the Techn 5) The Standard used are traceabl Calibrated By Calibrated By	a particular item submitted for calibr in the certificate are valid at the tim as per customer specifications. oduced, except in full unless written ical Manager of "Reliable Technical to to National Unternational Standar	ation. UUC stands for Unit Under Calib e of and under the stated conditions of permission for the publication of an ap Services, Pune".	Measurement. proved abstract Approved By Quality Manager
Source(cm) Intensity (LUX) Note: 1) This certificate refers only to the 2) The calibration results reported 3) Calibration point were selected 4) This certificate shall not be repri- has been obtained from the Techn 5) The Standard used are traceabl Calibrated By	a particular item submitted for calibr in the certificate are valid at the tim as per customer specifications. oduced, except in full unless written ical Manager of "Reliable Technical to to National Unternational Standar	ation. UUC stands for Unit Under Calib e of and under the stated conditions of permission for the publication of an ap Services, Pune".	measurement. proved abstract Approved By

La reseaución de la companya de la c	CALIBRATION	NCERTIFICATE	
1.CUSTOMER	34 (Sec. 19)	Page No.	:- 1 of 1 BM 19.04.20.277
Krishna Institute Of Medical Deemed University,	Sciences	Certificate No.	:- 28.04.2019
Karad ,Dist.Satara- 415110		Date of Received Date of Calibration	:- 28.04.2019
Ambient Temp.	:- 25 ± 4°C	Next Calibration Due On	:- 27.04.2020
Relative Humidity	:- <70% RH	Calibration method No.	:- RTS/BM/WI/08
Location of calibration	:- On site	Galibration method mo.	
Condition of Item	:- OK		
2. Description of Item			
Name	:- OT Light	Make	:- Technomed
ID No	:- KH/OT-04/OTL-02	Model No.	:
Sr No.	:- 150666	Location	;- OT-04
3.Details of Equipment used	for calibration		
Name	:- LUX METER		
Certificate No.	:- IH.17.05.01.001		
Certified By	:- RTS		
ID/Sr. No.	:- RTS-LX-02		
Calibration Validity	:- 01.05.2019		
4.Calibration Results	÷-		
4.Calibration Results Distance From Light Source(cm)	;+	100	
Source(cm) Intensity (LUX)	:- 48531	100 49446	48520
Distance From Light Source(cm) Intensity (LUX) Note:) This certificate refers only to the part) The calibration results reported in the) Calibration point were selected as p	48531 rticular item submitted for calibra ne certificate are valid at the time er customer specifications. ced, except in full unless written Manager of "Reliable Technical	49446 ation. UUC stands for Unit Under Calib e of and under the stated conditions of permission for the publication of an ap Services, Pune".	pration. measurement.

Phaco Machine

May 2016 - May 2017

22.4 49 In lab/On site OK Faco Machine	ATION CER Page No. Certificate No. Date of Receiv Date of Calibra Next Calibratio Calibration me	:- 1 of 1 :- B.16.05.01.038 red :- 07.05.2016	(Customer suggested)
22.4 49 In lab/On site OK Faco Machine	Page No. Certificate No. Date of Receiv Date of Calibra Next Calibratic	:- 1 of 1 :- B.16.05.01.038 red :- 07.05.2016 ttion :- 07.05.2016 n Due On :- 06.05.2017	(Customer suacested)
22.4 49 In lab/On site OK Faco Machine	Date of Receiv Date of Calibra Next Calibratio	:- B.16.05.01.038 red :- 07.05.2016 tition :- 07.05.2016 n Due On :- 06.05.2017	(Customer suacested)
49 In lab/On site OK Faco Machine	Date of Receiv Date of Calibra Next Calibratio	red :- 07.05.2016 ation :- 07.05.2016 n Due On :- 06.05.2017	(Customer suggested)
49 In lab/On site OK Faco Machine	Date of Calibration	n Due On :- 06.05.2017	(Customer suggested)
In lab/On site OK Faco Machine	Next Calibratio	n Due On :- 06.05.2017	(Customer suggested)
OK Faco Machine	Calibration me	thed No DTO/DUMNING	(Customer suddestean
Faco Machine		HOO NO RIS/BIVI/VVI/01	
KIMSDU/OT-3/PM-2	Make Location	:- Biomedix - OT-3	
-	Sr.No	- 0308172	
ed for calibration			
Fluke 3366061			
÷	Electrical Saf	ety	
Test			Bamarka
	Checking		Remarks Ok
a the manufacture of the second states are			Ok
			В
		and the second	1
		-Cardiac Float Type	
I-Fropeny Landed , I-Doc		an Ende Lon Guildy Transfe	
Parameters		Measured Values	Remarks
e between Live and Neutr	al (Vin)	235.46 (210-240V)	ОК
	and the second sec	237.27 (210-240V)	ОК
WERE PREVAILANT AND A COMPANY			ОК
	aiui (viie)		ОК
Enclosure Current			
Leakage Current (IL)			ОК
Patient Leakage Current (PL) 0		(BE-0-100UA)	ОК
	Electrical Safety Analyzer Fluke 3366061 23.12.2016 :- Tests Power Cords, Cables Mains Socket Chu Equipment Type (B, Equipment Class (B-Body Type,BF-I I-Properly Earthed ,II-Dou Parameters ge between Live and Neutra age between Live and Neutra age between Live and Neutra Enclosure Current Leakage Current (IL)	Electrical Safety Analyzer Fluke 3366061 23.12.2016 Tests Power Cords, Cables Checking Mains Socket Checking Equipment Type (B, BF, CF) Equipment Class (I, II, III) B-Body Type,BF-Body Float Type,CF I-Properly Earthed ,II-Double Insulation,III-W Parameters ge between Live and Neutral (VIn) age between Live and Earth(VIe) between Neutral and and Earth (Vne) Enclosure Current Leakage Current (IL)	Electrical Safety Analyzer Fluke 3366061 23.12.2016 Tests Electrical Safety Power Cords, Cables Checking Mains Socket Checking Equipment Type (B, BF, CF) Equipment Class (I, II, III) B-Body Type,BF-Body Float Type,CF-Cardiac Float Type I-Properly Earthed ,II-Double Insulation,III-With Extra Low Safety Voltage Parameters Measured Values ge between Live and Neutral (VIn) 235.46 (210-240V) age between Live and Earth(Vie) 237.27 (210-240V) age between Live and Earth(Vie) 1.99 (0-5V) Enclosure Current 0.7 (0-10µA) Leakage Current (IL) (BF-0-100µA)

Y	Pimpri, Pune - 4110 Cell : 7709196666, E-mail : relia Web. : www.re	18. Telefax : 020- 7774055755, 777 ble1010@gmail.c liabletechnicals.	4055855 om	ISO 9001:2008
	CALIBRATI	ON CERTIFICA	TE	
1.CUSTOMER Krishna Instit Deemed Univ Karad ,Dist Sa Ambient Temp Relative Humi Location of ca	ute Of Medical Sciences ersity, tara- 415110 	Page No. Certificate No. Date of Received Date of Calibration Next Calibration Due Or Calibration method No.		
Condition of It 2. Description Name ID No Sr No.		Make Model No. Location	:- Biomedix : :- OT-03	
Name Certificate No Certified By ID/Sr. No. Calibration Va	:- Tektronix :- 3366061		21	
4.Test Result A) Visual Tes		Electrical Safety		
Sr. No.	Tests	4	Rem	
1	Power Cords, Cables Che	110	C	344)
2	Mains Socket Checki		1	1k 3
3	Equipment Type (B, BF			1
4	Equipment Class (I, II, B-Body Type BE-Body	Float Type,CF-Cardiac		
	I-Properly Earthed ,II-Double	nsulation,III-With Extra L	ow Safety Voltage	
B) FUNCTION		1 - Carlos - Carlos		
Sr.No	Parameters		Measured Values	Remarks
1	Voltage between Live and Neutral (V			ОК
2	Voltage between Live and Earth(Vie	238.	18 (210-240V)	OK
3	Voltage between Neutral and and Earth	(Vne) 2.6	1 (0-5V)	ОК
4	Enclosure Current	0.9) (0-10µA)	ОК
5	Leakage Current (IL)	11		OK
6	Patient Leakage Current (PL)	0.4	(BF-0-100µА (CF-0-10µА)	ОК
2) The calibration	refers only to the particular item submitted for calibration results reported in the certificate are valid at the time of nt were selected as per customer specifications. shall not be reproduced, except in full unless unitary of from the Technical Manager of "Reliable" services to the service of the technical formation of technical formation of the technical formation of technical			.L.

April 2018 – April 2019

S "RELIABLE HOUSE" Pimpri, Pune Cell : 777405 E-mail :	497/2834-35, San 411018. Telefax : 5755, 7774055855 reliable1010@gm	020-27421170 ,7774058855 ail.com	RIRCE	ACCREDITED ACCREDITED IAS, USA MSCB 127
CALIBR	ATION CERT	IFICATE		
R :- itute Of Medical Sciences ersity, tara-415110 pp. :- 25 ± 4°C idity :- <70% RH alibration :- On site item :- OK	Page Certifi Date Date Next (No. icate No. of Received of Calibration Calibration Due On	:- 1 of 1 :- BM.18.04.29.1 :- 29.04.2018 :- 29.04.2018 :- 28.04.2019 :- RTS/BM/WI/0	
	01 Mode	l No.	:- Biomedix : :- OT-03	
:- Electrical Safet				
:- Tektronix :- 3366061 alidity :- 27.12.2018				
Results :-	EST :			
Tests			Remarks	
			7.1.1	
	cking		UK	
	Туре	Measured Values	Tolerance	Remark
Supply Voltage	Live-Neutral	235.80	210 to 240 V	Pass
Supply Voltage	Live-Earth	238.17	210 to 240 V	Pass
Supply Voltage	Neutral-Earth	2.60	0 to 5 V	Pass
Protective Earth Resistance	-	0.88	< 5 ohm	Pass
Earth Leakage Current		1.7		Pass
Earth Leakage Current				Pass
Enclosure Leakage Current			1. 10.1 (10.10) (10.10)	Pass Pass
				Pass
	Contraction of the second	Contraction of the second s		Pass
				Pass
on results reported in the certificate are valid pint were selected as per customer specifica te shall not be reproduced, except in full unl ned from the Technical Manager of "Reliable	d at the time of and under ations. less written permission for e Technical Services, Pun	the publication of an app	neasurement.	r,
ngineer			occounty interimination	
	Simple	Simplify and the second sec	Second	Sign TRELIABLE HOUSE" 497/2834-35, Sant Tukaram Nagar, Pimpri, Pume - 411018. Telefax: 020-27421170 Cell: 7774055755, 7774055855, 7774058855 E-mail: reliable10100@gmail.com Web.: www.reliabletechnicals.com CALIBRATION CERTIFICATE R Page No. : 1 of 1 Carlificate No. : 9 Mage No. : 1 of 1 Certificate No. : 9 Mage No. : 1 of 1 R Page No. : 1 of 1 Certificate No. : 9 Mage No. : 20 A2018 Date of Received - 29 0.04 2018 Date of Received - 29 0.04 2018 Date of Calibration Diou On - 28 0.04 2018 Date of Calibration Diou On - 28 0.04 2018 In of item : 9 Phace Machine Make : Biomedix · 0 K mod televalues O -0.3 Calibration method No. : 8 Tis Mage No. · 0 K mod televalues O -0.03 Image No. : 1 of 1 : 25 ± 4°C No Mage No. · 0 No : 10 Mage No. : 10 Mage No. : 10 Mage No. : 10 Mage No.

April 2019 - April 2020

	ute Of Medical Sciences	RATION CERTI Page N Certifici Date of	o. ate No	- 1 of 1 - BM, 19.04.20.27 - 28.04.2019	4
Deemed Univers Kerad Dist Sata Ambient Temp Relative Humik Location of cal	ara-415110 25±4°C dity - <70% RH libration - On site	Date of Next C	Calibration	- 28.04.2019 - 27.04.2020 - RTS/BM/WI/01	
Condition of Ite 2. Description Name D No Sr No.	Color of the second	Model	No.	- Biomedix - OT-03	
Details of E Name Certificate No. Certified By D/Sr. No. Calibration Va	:- RTS :- 3366061	ely Analyzer			
4.Calibration		EST :		Remarks	
Sr. No. 1	Power Cords, Cables Mains Socket Ch			Ok Ok	
2 FUNCTIONAL	TEST:		Measured Values	Tolerance	Remarks
Sr.No	Parametérs Supply Voltage	Type Live-Neutral	235.67	210 to 240 V	Pass
1 2	Supply Voltage	Live-Earth	237.26	210 to 240 V 0 to 5 V	Pass Pass
3	Supply Voltage	Neutral-Earth	1.71	< 5 ohm	Pass
4	Protective Earth Resistance	Normal Close (NC)	170.3	< 500 µA	Pass
6	Earth Leakage Current Earth Leakage Current	Normal Open (NO)	179.8	< 500 µA	Pass
6	Enclosure Leakage Current	Normal Close Close	1,1	< 10 µA	Pass
8	Enclosure Leakage Current	Normal Open Close		< 10 µA	Pass
9	Enclosure Leakage Current	Normal Close Open	1.1	Aبر 10 × A	Pass
 2) The calibration 3) Galibration point 4) This certificate 	e refers only to the particular item submin in results reported in the certificate are v init were existenced as per customer spec e shall not be reproduced, except in full efforts the "echnical Manager of "Relic tused are traceable to National / interna al Manager	and at the time of and under incations unless written permission for able Technical Services, Pur	at the publication of an a		
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