

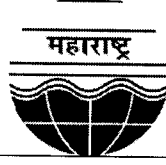
**MAHARASHTRA POLLUTION CONTROL BOARD**  
**Sub-REGIONAL OFFICE, PIMPRI CHINCHWAD**

Phone: 020-25811694

Fax: 020-25811029

Visit us at [www.mpcb.gov.in](http://www.mpcb.gov.in)

E-mail: [sropimprichinchwad@mpcb.gov.in](mailto:sropimprichinchwad@mpcb.gov.in)



Jog Center Bldg.  
2<sup>nd</sup> Floor, Wakdewadi,  
Old Mumbai Pune Highway,  
Pune 411003

No. MPCB/SROPC/Return/ 22/2000 043

Date:

**"Your Service is our Duty"**

To,  
M/s. Patil Hospital & Medical Centre.,  
Premraj Corner, Anandnagar, Old Sangvi,  
Pune-411027.

Sub: -Return of application for BMW authorization..

Ref: - Online web-portal Authorization No.MPCB-BMW\_AUTH-0000044487

Sir,

With reference to above this office is in receipt of your application for grant of BMW Authorization. Upon scrutiny of application, it is observed that you have not submitted application for Combined Consent & Authorization (CCA) hence it is not possible to process your application.

In view of above, Your application for grant of Authorization is returned herewith for re submission for application of Combined Consent and Authorization (CCA).

Yours Faithfully,

**Sub- Regional Officer,  
Pimpri Chinchwad**

Copy submitted to:-  
Regional Officer, MPC Board, Pune