

(A statutory Body under the Ministry of Labour and Employment, Government of India)

## www.epfindia.gov.in

# PROVIDENT FUND CODE NUMBER INTIMATION LETTER

No : 10000065573PUN

Date : 01/12/2017

To,

MAHADEV BHANUDAS KEDAR DIRECTOR ENHANTO HEALTH CARE SERVICES PRIVATE LIMITED FLAT NO.-C-202, GATE NO-53, SAMARTH ANGAN,SINHGAD RD,KOLHEWADI PUNE PUNE MAHARASHTRA - 411024

Sub: Allotment of Code Number to establishment M/s ENHANTO HEALTH CARE SERVICES PRIVATE LIMITED under Employees' Provident Fund and Miscellaneous Provisions Act, 1952-regarding.

#### Sir/Madam,

Based on the information submitted online by you, your establishment is registered with Employees' Provident Fund Organisation with the following code number :

## Code Number : PUPUN1668500000

This code number is allotted based on the following declarations by you:

1. Name of Establishment	ENHANTO HEALTH CARE SERVICES PRIVATE LIMITED
2. PAN of Establishment	: AAECE6153B
<ol> <li>Date on which employment strength crossed 19</li> </ol>	: -
4. Section under which covered	: 0000001(4)
5. Primary Activity	: EXPERT SERVICES
6. Ownership Type	: PRIVATE LIMITED COMPANIES
<ol> <li>The address proof of the establishment is</li> </ol>	: - Copy of bank passbook/statement
	- Any license/certificate/number issued by any Govt. authority

- 8. The proof of date of set up 19/04/2017 is Incorporation Certificate issued by the Registrar of the Companies
- 9. As at the time of application, your establishment is having the following licenses and registrations:

S.No.	License Under	License Number	Date	Issued By	Place of Issue
11143 6	3 Others	27AAECE6153B1ZY		GOVT.OF INDIA & GOVT.OF MAHARASHTRA	PUNE

10. As on date of your application, your establishment is not registered with ESIC.

11. As on date of your application, your establishment is not having LIN.

#### **REGIONAL OFFICE**

#### PUNE

# FLAT NO.-C-202, GATE NO-53, SAMARTH ANGAN, SINHGAD RD, KOLHEWADI 411024 kedarraj08@gmail.com

Please note that this intimation letter is generated with the Owners' Details in Form 5A and the intimated letter will be valid only if the Form 5A is enclosed.

#### Important information:

1. By virtue of this registration, you are required to comply with the provision of the EPF & MP Act 1952. The obligations/duties/responsibilities cast upon you as an employer of this establishment and penalties, on account of non-compliance with the same, are explained on our website **www.epfindia.gov.in**. You are required to go through them carefully.

2. Remittance of dues under the provisions of the Act is to be made only through a Challan generated through the Unified portal. (The process for registration on the portal, preparation of the ECR txt file and related information is available on the website and the portal).

3. In case this letter is produced as a proof of the code number of the establishment, before any person including any Inspector from EPFO, the Form 5A generated through the portal at the time of registration should be a part of this letter. The remittance details of the establishment will be available on the EPFO website through the link "Establishment Search" where all payments from December 2016 onwards with the names of employees are available.

4. Please quote the Code Number PUPUN1668500000 for all the future correspondence with EPFO.

This is a system generated letter and needs no signature.

Employees' Provident Fund Organisation

Dated: 01/12/2017