



ANAND AYURVED COLLEGE



- ☐ **Recognition** - Central Council of Indian Medicine, New Delhi
- ☐ **Permission** - Dept. of Ayush Govt. of India, New Delhi
- ☐ **Affiliation** - Maharashtra University of Health Sciences, Nashik

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Dist. Aurangabad, Maharashtra, India - 423 701.**

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Outword No - *ACT/AAC/650/2022*

Date - *01/06/2022*

To,
The controller of Examination
Maharashtra University of Health Sciences
Nashik – 422004

Sub : To Submit the details of CCTV installed in examination hall in
Prescribe format

Ref – MUHS /XT/ 3098/2020, Dated : 18/06/2020

Respected Sir/ Madam,

With reference to above mentions subject, we hereby submitting the following
details

- 1) Name of Examination Center :-ANAND AYURVED COLLEGE, VAIJAPUR, DIST :-
AURANGABAD
- 2) Center In charge With Contact No :- Dr. Hemant Kantilal Suryawanshi
- 3) Technical Person Name – Mr. Suresh Arkhade 8007638101
- 4) Static /wan ip address or cloud id – 192.168.0.2 OR Serial Number –F23600258
- 5) Make & Model of DVR – HIKVISION MODEL : DS 7B16HUHI- K2
- 6) Number of camera Install : 16 & Verification Code –A1234567
- 7) Area of Strong Room - 400

Login user – Admin
Password – admin @1234



[Signature]
Principal
Anand Ayurved College
Vaijapur Dist. Aurangabad