



उत्तर प्रदेश UTTAR PRADESH

GH 789967

I Dr. Sunita Yadav Chairman/Secretary Dr. Sunita Shikshan Sansthan Samiti, S.S. Nagar Nisai, Bewar Road, Farrukhabad w/o of Dr. Shailendra Singh aged 42 year resident of Indra Nagar, Yadav Colony, Mohamdabad, Farrukhabad U.P., do hereby solemnly affirm, state and undertake to comply with the following in connection with my/our application No.3008 to board of technical education, Lucknow, Uttar Pradesh for change in the Name of the Society of our Instituion Shakuntala Devi college of Pharmacy, Kakyoli, Babna, Nawabganj, Farrukhabad U.P.

1. I will abide by all terms and conditions as laid down by Board of Technical Education, Lucknow, Uttar Pradesh.
2. That there is no commercial or business angle for change of Dr. Sunita Shikshan Sansthan Samiti, S.S. Nagar Nisai, Bewar Road, Farrukhabad, Farrukhabad to Smt. Shakuntala Devi Educational & Social Welfare Trust, Bhaupur Bewar Road, Fategharh, Farrukhabad.
3. That in the event of non compliance by the Dr. Sunita Shikshan Sansthan Samiti, S.S. Nagar Nisai, Bewar Road, Farrukhabad with regard to guidelines, norms and conditions prescribed, as also in the event of violation of any of the undertaking mentioned herein, Board of Technical Education, Lucknow, Uttar Pradesh shall be free to take appropriate action including withdrawal shall solely be that of the the society.
4. That there are no legal issues pending with both old and new trust/society.
5. That there are no financial liabilities in the old society.
6. That the land & building are in the name of the new trust/society.
7. That liabilities if any, arise out of change of name of the trust/society shall be solely that of new Smt. Shakuntala Devi Educational & Social Welfare Trust Bhaupur Bewar Road, Fategharh, Farrukhabad.

Badle Singh Chauhan

Advocate-NOTARY

FARRUKHABAD

8. That the facts stated in the affidavit are true to my/our knowledge. No part of the same is false and no material has been concealed there from.

Seal
Singh
Deponent

Verification



I, We, the above named deponent do hereby verify that the facts stated in the above affidavit are true to my/our knowledge. No part of the same is false and no material has been concealed there from.

Place-

Date-

Seal
Singh
Deponent

Solemnly affirmed and signed before me by the deponent on this day of 29/01/24 at my office.

BS 29/01/2024
Badle Singh Chauhan
Advocate-NOTARY
FARRUKHABAD