

### **Client Registration From**

Date:	
Client Type: (ADVANCE)  Client ID (Will be generated by JITM)  (Doctor/Clinic/Lab/Hospital)	
Location (Town/City) DELHI (Mandatory)  Client Address: Anchal Health Center opposite to Shir Public Scher Ween Kingi mandian subhers in Parte  City DEHI State DELHI PIN: \$\int\text{pin} \text{pin} \text{centere of grand of can}	.1
Client SPOC Details:  Name: Elight Diagnostic Centre 98 99 40 5512  Email: Elight diagnostic Centre Olympull. Com	
Name of Sales Manager: Many Kumer Mobile No:	_
Documents Attached:  1. Proprietorship/Partnership/Company Documents – Self Attested 2. PAN Card – Self Attested 3. Aadhar Card-Self Attested 4. Client Registration From (Original with Signatures) 5. Agreement—(Original with Signature)	

Phone: 120-4371478 M: +91 8929995511

Toll Free: 1800-120-38-38-38

**Website:** www.jitmdiagnostics.com www.jitmcovidtesting.com \*

Email: jitmdiagnostics@gmail.com

Add: D-87, Sector-2, Noida, Uttar Pradesh-201301

(Sales Person's Signatures JITM



# PATHOLOGY SERVICE UNDERSTANDING

JITM SKILLS PRIVATE LIMITED (hereinafter referred to as "JITM"), a Company incorporated under the Companies Act 1956, having its registered office at 216 B, DDA LIG Flats, Jhilmil Colony, Shahdara, Delhi-110032 and corporate office at 3rd Floor, D- 87, Vyapar Marg, D Block, Sector 2, Noida, Uttar Pradesh 201301, engaged in pathology diagnostic services, aims to facilitate the delivery of care offered by the Consultants/ Hospital Clients/Nursing Homes. JITM aims to offer/provide its pathology services ("Services") to (Name of Client) Diagnostic Centr Hepelta certer opps, oc 40 ti mander enghand

(Hereinafter referred to as "Direct Client") at its doorsteps and test results by way of web access and hard copy exclusively for the purpose of providing timely services to improve patient care of the Direct Client.

The Services under this understanding are subject to adherence to terms and conditions mentioned hereunder.

For the purpose of this understanding, these Terms are defined as following:

shall mean Clients under this understanding which could be either a Consultant, a "Direct Client"

Doctor, a nursing home, a Hospital, Clinic, a Path Lab or any other Healthcare

Institution.

Pathology Test Reports provided by JITM by way of electronically or otherwise run (Test Result)

on the Sample provided by Direct Client.

shall mean the clinical sample of blood, urine, swab, tissue or any other part of the (Sample)

human body which is required to run the pathology test for the Services.

Turn Around Time required to run the test. "TAT"

Standard Operating Procedure as defined by JITM from time to time. "SOP"

Directory of Services of tests and price list issued and revised by JITM from time to "DOS"

time.

### A. JITM agrees to the following:

1. Pick the Samples as collected by the Direct Client for Pathology test in its network laboratory.

2. Provide username and password for secure access to enquire on test results of the consultants' own patients across the hospital.

3. Provide test results for the test conducted on the Samples provided by the Direct Client as per TAT of JITM by way of hard copy and/or in electronic format.

Provide Sample packaging materials for collection and transportation of Samples as may be required from time to time. The Packaging materials shall, at all time, remain the exclusive property of JITM.

5. Provide /arrange courier/logistic services for pickup of Samples and delivery of Test Results.

6. Provide the updated Price of each test offered by JITM network laboratories. The Price of test shall be subject to change with or without prior notice based on input costs and market considerations.

7. JITM shall provide the results and retain the records as per archival policy and SOP of JITM.

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# B. Direct Client agrees as following:

- Collect and provide Samples in adequate quantity as per SOP and Directory of Services provided by JITM from time to time to run the test in JITM Laboratories.
- Collect the Samples as per standard pathological norms and store the same at the desired temperature till handing over it to the representative of JITM.
- Maintain the record of the packaging materials and provide the same as and when desired by JITM.
- 4. Direct Client will have the access to reports solely for the purposes granted. Direct Client agrees to not intentionally disclose the username and password to anyone other than Direct Client's authorized staff or attempt to learn another client's security code.
- 5. Direct Client accepts responsibility to maintain password security, e-mail addresses, and related
- 6. JITM shall raise invoice on Direct Client on fortnightly basis as per discount structure mentioned in Annexure A forti Annexure A for the test done under the client code. The Direct Client shall pay the invoiced amount within within \_\_ days from the date of the invoice, subject to deduction of applicable Taxes by way of cheque/DD/Necrolette cheque/DD/NEFT/RTGS in favour of "JITM SKILLS PRIVATE LIMITED - Indusind Bank A/c no: 258810250383 (IFSC: INDB0000171)". The Direct Client will not hand over Cash to local Sales Representatives of JITM. In case any Cheques which are returned unpaid, payment will have to be made by Demand Draft only along with penalty of Rs. 3000/- within 3 working days. Delay in payment shall attract an interest of 18% p.a. Amount paid by the Direct Client will be reconciled by JITM sales/Accounts Department on a monthly basis. All payments by cash/ credit client shall be made by cheque/DD/NEFT/RTGS in favoring "JITM SKILLS PRIVATE LIMITED - Indusind Bank Alc no:
- 7. Direct Client shall apply for and obtain all the required permission, permits, approvals, certificate, licenses including but not limited to License for Bio medical waste disposal, registration with CMO, registration under Clinical Establishment Act, Shops & Establishment Act etc. Direct Client shall comply with all laws, rules and notification related to its business implemented from time to time by appropriate authority.
- 8. Direct Client agrees to abide by the policy for access to the test report on internet as provided in the
- 9. Direct Client will require to arrange the services of Phlebotomist at its center for drawing of samples and disposal of bio medical waste at its own cost.

### C. Miscellaneous Terms:

- 1. Confidentiality: Each Party shall keep secret all confidential information, if any transmitted to it or made available to it by other Party and shall not pass such information on wholly or partly, to third party without express written consent of the other Party.
- 2. Relationship: This understanding does not constitute the Direct Client as an employee, agent, legal representative or partner of JITM for any purpose whatsoever nor shall the understanding be construed or interpreted as a joint venture between the Parties of any nature. The relationship between the Parties hereto shall be on a Principal-to-Principal basis.
- 3. Term and Termination: This non-exclusive understanding will be valid for such period unless earlier terminated by either Party serving 30 days prior written notice. Either Party will be at liberty to terminate this understanding by giving 30 days prior written notice to other Party. All payments becoming due and payable to the Parties as on the date of termination will be settled within 15 days from the date of termination of this understanding. Upon termination of this understance Client shall cease to use the materials/intellectual property of JITM and shall handover

materials belonging to JITM immediately.

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- 4. Force Majeure- JITM shall be excused from performance and shall not be liable for delay in delivery of report or non-delivery of report, in whole or in part, caused by the occurrence of any contingency beyond its control including, but not limited to, work stoppages, natural calamity, civil disobedience, riots, fire accidents, shortage of fuel, diplomatic impasse and Act of God, leakage during collection, packaging and transit of Samples, breakage in transit, loss by carrier, contamination in shipment. JITM shall not be responsible for any loss/liabilities including legal liabilities, claims, compensation, and indemnity for any such loss or damage arising in such events.
- 5. Dispute Resolution: Any dispute between the Parties shall be referred to and settled by a sole arbitrator appointed by JITM in accordance with the provisions of the Arbitration and Conciliation Act, 1996. The venue of Arbitration shall be Delhi. Subject to above the court of Delhi shall have exclusive jurisdiction on any matter/dispute arising out of this Understanding.

This understanding, with its detailed and intended cooperation and responsibilities, is accepted by virtue of the following signature. the following signatures and remain in effect unless it expires by efflux of time or earlier terminated by any Party. Party.

For JITMSKILLS PRVIATE LIMITD (Authorized Signatory

Name: Manual Ryman

Designation: As M

Date: Doct | word

Signature & Stamp

Name of Signatory: Viray Shown

Designation: Rab

Date: 7 | oct | 2024

### Annexure-1

(Direct Client) JITM is pleased to offer the discount to M/s on the entire test range as per details given below.

Category	Detail of Tests	Discount % on the Maximum Retail Price mentioned in JITM's Directory of Services.
JITM-1, JITM-2 & JITM-3	Routine & Specialized	As per applicable JITM Price list & Agreed Net Rates
	Swine Flu, Genexpert, BRCA, Paternity Tests, PLAC, Sepsiscreen,	As per applicable Price list.
Special Category	Comprehensive Viral Viral Flu Panel, AFB Rapid Genotypic Test, etc. International Send Outs	10%
ISO & Govt. Fixed Rate Tests	& Govt. Fixed Rate Tests	discretion

Price specified in Directory of Services of JITM is subject to change from time to time as per s

of JITM.

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# आयकर विभाग INCOME TAX DEPARTMENT



# भारत सरकार GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड Permanent Account Number Card

BQTPS9549G





पिता का नाम | Father's Name DEVTA DEEN SHARMA

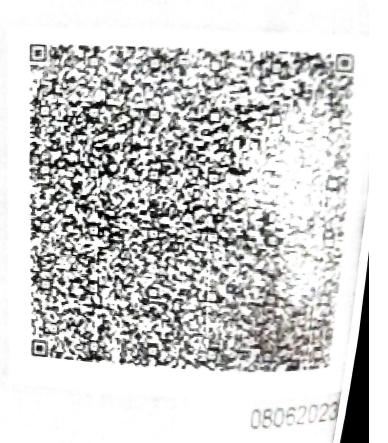
जन्म की तारीख़ Date of Birth 05/02/1976



हस्ताक्षर / Signature











## गरतीय विशिष्ट पहचान प्राधिकरण que Identification Authority of India

নামাক্তন ক্ষম/ Enrolment No.: 0000/00235/09886

विजय प्रताप रानी Vijay Pratap Sharma DEVTA DEEN SHARMA K-26 GALI NO.11 BRAHMFURI Gartii Mendu North East Delhi Delhi - 110053 9899405512





हा आधार क्रमांक / Your Aadhaar No. :

4083 5249 4838 VID: 9150 9961 9352 2645

मेरी पहचान मेरा आधार.

भारत सरवनर Government of India





विजय प्रताप शर्मा Vijay Pretap Sherma जन तिथि/DOB: 05/02/1976 gesy MALE

4083 5249 4838 VID: 9150 9961 9352 2645



#### HETTI / INFORMATION

- आधार पहचान का प्रमाण है, नामरिकला का नहीं।
- आधार विशिष्ट और सुरक्षित है।
- स्रवित गयुआर कोड/सीफलाइन प्रवस्त्रप्रस्थार्थ्य संनल्दन प्रस्कृत की उपयोग केनके पहचान सत्यापित करें।
- आधार के सभी रूप जैसे आधार पत्र, पीवीसी कार्ड, ई-आधार और आधार क समा रूप जस आधार पत्र, पावासा काठ, इन्आधार और आधार समान रूप से मान्य हैं। १२ अंकों की आधार संख्या के स्थान आजासी (वर्युमत) आधार पहचान (VID) सा भी उपयोग किय
- १० साल में कम से कम एक बार आधार अघडेट जरूर करें।
- आधार आपको विभिन्न सरकारी और गैर-सरकारी योजनाओं /सं का लाभ उठाने में मदद करता है।
- आधार में अपना मोबाइल नंबर और ई-मेल आईडी अपडेट रखें।
- आधार सेवाओं का लाभ उठाने के लिए स्मार्टफोन पर mAadhaa
- आधार/बायोमेट्रिक्स को लॉक/अनलॉक करने की विशेषता का उप ज्ञापाधवायामाद्रवस का लावाजामलाक करन का विश्वता का उप सुरक्षा सुनिश्चित करने के लिए करें। आधार (पत्र्) नंबर) चाहने वाली संस्थायों को उचित सहमति ले
- भिए बाध्य किया गया है।
- Aadhaar is a proof of identity, not of citizenship.
- Aadhaar is unique and secure.
- Verify identity using secure QR code/offl XML/online Authentication.
- All forms of Aadhaar like Aadhaar letter, PVC Ca eAadhaar and mAadhaar are equally valid. Vir Aadhaar Identity (VID) can also be used in place o digit Aadhaar number.
- Update Aadhaar at least once in 10 years.
- Aadhaar helps you avail various Government : Non-Government benefits/services.
- Keep your mobile number and email id update:
- Download mAadhaar app on smart phones to a Aadhaar Services.
- Use the feature of lock/unlock Aadhaar/biometric ensure security.
- Entities seeking Aadhaar are obligated to seek consent



भारतीय विशिष्ट पहचान पाधिकरण Unique Identification Authority of India

पता: देवता दीन रानों, के-26, गली न.११, इतलपुरी, गडी मेंदू, नार्ध इंस्ट दिल्ली दिन्ती - 110053

Address: DEVTA DEEN SHARMA, K-26, GALI NO.11, DEVTA DEEN SHARMA, K-26, GALI NO.11, BRAHMPURI, Garhi Mendu, North East Delhi, Delhi - 110053



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