For Issuance of Regular License

To, The Chief Executive Officer, Sindh Health Care Commission 2nd Floor, Block-C, FTC building Shahrah-e-Faisal, Karachi

Subject: **ISSUANCE OF REGULAR LICENSE**

It is r	espectfully submitted that:		
1.	I am owner/manager of		
2.	teaching/non-teachingbedded hospital(Address)		
3.	My HCE has been awarded the provisional license by SHCC vide License Certificate No dated		dated
4.	My HCE has qualified for award of Regular License as per Inspection report issued after the last inspection by your team on I have also deposited the prescribed fee for issuance of the Regular License.		
5.			
	equested that the Regular License may pleatut any further delay.	ase be issued in favour of	HCE
Thar	nks		
D.A Copies of 1- CNIC 2- Provisional License 3- Last Inspection Report 4- Fee receipt		yours sincerely	
		Name:	
		Owner/Manager	
		Address:	
		Dated:	
FOR (OFFICE USE ONLY		
1- Amount due (in words)			
	Signature of Director Finance		
	Forwarded to the Chief Executive C	Officer for approval	
	Signature of Director Licensing & Ac	ccreditation	

Approved

Chief Executive Officer Sindh Health Care Commission