



# FORM 5A – EXTRACT

(As per EPFO Direction Dated 07 October 2025)

(Issued under Para 78(3) of Employees' Provident Fund Scheme, 1952)

## Establishment Details

1. Name of the Establishment: TRISHA HEALTHCARE PRIVATE LIMITED
2. EPF Code Number: GJAHD0057869000
3. Date of Coverage under EPF Act: 30/01/2020
4. Nature of Business/Industry: HEALTHCARE

## Employer / Manager / Occupier Details

5. Name of Employer / Owner: Dr. Alpesh .M.Patel
6. Name of Manager / Occupier: Dr. Alpesh .M.Patel
7. Designation: Director
8. Contact Number / Email: hradmin@trishahospital.com

## Address Details

### 9. Registered Address of Establishment:

♀ GF -5,6,7/6<sup>th</sup>,7<sup>th</sup> FLOOR, DREAM SQUARE COMPLEX, OPP RAMDEVPIR TEMPLE, NIRNAYNAGAR UNDERBRIDGE, NR, NAVAVADAJ BUS STOP, NIRNAYNAGAR, AHMEDABAD-380013

### 10. Primary Branch Address (if any):

♀ SAME AS ABOVE \_\_\_\_\_

## Ownership Type

- Proprietorship  
 Partnership  
 Private Limited Company  
 Public Limited Company  
 Government / PSU  
 Others \_\_\_\_\_

## Declaration

This establishment is registered under the **Employees' Provident Funds & Miscellaneous Provisions Act, 1952**, and complies with all applicable EPFO directions.

- Date of Display: 27/11/2025  
 Authorized Signatory: ARADHANA PITHVA  
 Contact: 94291 97775  
 Website: https://www.trishahospital.com/



### Note:

As per EPFO Order No. Compliance/U/P78/2022/Advocacy/55643/13174 dated 07.10.2025, every establishment must prominently display this extract of Form 5A at the entrance of the premises or on the official website/mobile app.