PROFORMA REGARDING SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE.

NO,			
		Date:	20/11/2020
		$(x_1, \dots, x_k) = (x_1, \dots, x_k)$	-
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It is certified that an inspection	n team headed by	Aft artin u	1123A
with designation) from		(Name	of Officers
Department/Office)	विवास विश्वाम	1 कि॰ दार	(Name of
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the School	1 215 5-6		Address of
anu	found that the	व्यक्ति हार्ट	Nocioss of
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drinking water facilities for the students and the hygienic sanitation condition in the	d members of staff at	(Name of school	
the hygienic sanitation condition in the	echool building	the institution and is	maintaining
the hygienic sanitation condition in the prescribed by the Central/State/U.T Govt.	scrious building & t	he campus as per	the norms
GOVE.			
The above valid for a period of			
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	0:	1.6.1.3-16	
•	Signature with Se		?
	Name	श्रीमति पुष्पा बर	
•	Designation	पार्षद वार्ड क्र	
Го		नगर पालिक निर	ाम रच्चीन
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प्राथा वायवा वायपास			
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(4. y.)			
Name & Address of the Institution)			•