PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

| | Dated: 22.05.2.25 |
|---|--|
| No. PB/25/147 | |
| (Name of Officers with designation) from (Name of Department/ Office) inspected the (Name & Address of the school) on | SDCH., Ratia. RM SMRI GSSS Ratta Khess., Ratia (Name of school) has safe drinking water staff of the institution and is maintaining the hygienic the campus as per norms prescribed by the Central/ Deputy Civil Surgeon Signature with Seal: Name Designation Designation Deputy Civil Surgeon For Civil Surgeon Signature Sauri Designation Designation Deputy Civil Surgeon Souri Designation Designation Deputy Civil Surgeon Fater ABAD Souri Designation Designation Deputy Civil Surgeon Fater ABAD Souri Designation Designation Deputy Civil Surgeon Fater ABAD Designation Designat |
| То | |
| DM SURI GISSS RAHA KALL | |
| Ratia | |
| (Name & Address of the Institution) | |

^{*} The filled up certificate should be either in Hindi or English. If it is issued in vernacular language, translated notarized version in English be uploaded along with the original vernacular certificate as a single pdf.