

SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No. *Chc Kosikalan/ 2023-24/49.*

Dated : *30/6/2023*

It is certified that an inspection team headed by.....*Dr Gireendra Pal Singh*.....(name of officers with designation)from.....*Chc Kosikalan*.....(name of department/office) inspected the.....*Smt Anguri Devi Public School*..... on.....*28/6/2023*..... checked the water test report submitted by the school and found that the school has potable drinking water for students and staff of the institution and is having provision for running water in the toilets and maintaining hygienic sanitation condition in the school building & the campus as per norms prescribed by the central/state/U.T. Govt. the above is valid for a period of.....*one year*.....

Signature with seal.....

Name.....

Designation.....

Assistant Engineer of the Govt. public health

department (PHED)/ Authorized officer of the local body

Name & Address of the office/Department.....



To

SMT ANGURI DEVI PUBLIC SCHOOL

VILLAGE HULWANA CHHATA MATHURA UP 281403