

SANITARY CONDITION CERTIFICATE**PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE**

No. 1872

Dated: 16/01/2024

It is certified that an inspection team headed by **(CHAIRMAN) RUPESH PAWAR**(Name of Officers with designation) from **NAGAR PARISHAD PUNASA**(Name of Department/ Office) inspected the **ST. AUGUSTINE'S (E.M) HIGH SCHOOL PUNASA**

(Name & Address of the school) on **16/01/2024** (date of inspection) and found that the **ST. AUGUSTINE'S (E.M) HIGH SCHOOL PUNASA** DISTRICT KHANDWA has safe drinking water facilities for the students and members of staff of the institution and is maintaining the 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 **(03 YEARS)**

Signature with Seal:

Name : **RUPESH PAWAR**
Designation : **CHAIRMAN**

Name & Address of the Office / Department **NAGAR PARISHAD PUNASA**

To

ST. AUGUSTINE'S (E.M) HIGH SCHOOL PUNASA

DISTRICT KHANDWA

(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.

SAFE DRINKING WATER**PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE**

No. 1871

Dated: 16/01/2024

It is certified that an inspection team headed by **(CHAIRMAN) RUPESH PAWAR**(Name of Officers with designation) from **NAGAR PARISHAD PUNASA**(Name of Department/ Office) inspected the **ST. AUGUSTINE'S (E.M) HIGH SCHOOL PUNASA**

(Name & Address of the school) on **16/01/2024** (date of inspection) and found that the **ST. AUGUSTINE'S (E.M) HIGH SCHOOL PUNASA** DISTRICT KHANDWA has safe drinking water facilities for the students and members of staff of the institution and is maintaining the 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 **(03 YEARS)**Signature with Seal: 

Name : **रुपेश पवार**
Designation : **CHAIRMAN**

Name & Address of the Office / Department **NAGAR PARISHAD PUNASA**

To

ST. AUGUSTINE'S (E.M) HIGH SCHOOL PUNASA**DISTRICT KHANDWA**

(Name & Address of the Institution)



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