PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No. 78/24/233		Dated: 13/8/24
It is certified that an inspection team headed to	oy . Dø., . Koai.sh	ma, Medical officer
(Name of Officers with designation) from .He	alth Departmen	t, Fate habred
(Name of Department/ Office) inspected the	THE ARYAN S	CHOOL, Fatchabad
(Name & Address of the school) on	(date of Name of sch	inspection) and found that the ool) has safe drinking water and is maintaining the hygienic
State/ U.T. Govt.		
The above is valid for a period of One Year	is from the date	e of Inspection.
	Signature with Sea	Dr. Lajwanti Falansy
	Name	Dr. Lajwanti Flaury
	Designation	Dy. Civit Sux gran
	Name & Address	of the Office / Department : C.S., office FH
То		
THE ARYAN SCHOOL		
N-H-9 Bye Pass, Fatchal	bad (HR)	
(Name & Address of the Institution) Dy. Civil Surgeon		tivis is and in vernacular language
* The filled up certificate should be either translated notarized version in English b	in Hindi or English. I se uploaded along wi	th the original vernacular certificate

as a single pdf.