

PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No. _____

Dated: _____

It is certified that an inspection team headed by SARAT CH. SAIKIA (AEE (PHE))
 (Name of Officers with designation) from BISWANATH SUB DIVISION
 (Name of Department/ Office) inspected the ADARSHA VIDYALAYA, SAKOMATHA
 (Name & Address of the school) on 12/6/2023 (date of inspection) and found that the
ADARSHA VIDYALAYA, SAKOMATHA Name of school) 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 _____

Signature with Seal: _____

Name

PROBIN KR. HANDIQUE

Designation

EE (PHE), BISWANATH DIV.Name & Address of the Office / Department: PHE,BISWANATH

Executive Engineer (PHE)
 Biswanath Chariali Division
 Biswanath Chariali

To

THE PRINCIPALADARSHA VIDYALAYA, SAKOMATHA

(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.