

SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No. MEM 18/15

Date : 30/5/18

It is certified that an inspection team headed by _____

_____ (Name of Officers

with designation) from _____ (Name of

Department/Office) inspected the DAV Public School, Near

Nial Bypass Patran. (Name & Address of

the School) on 30/5/18 and found that the DAV Public

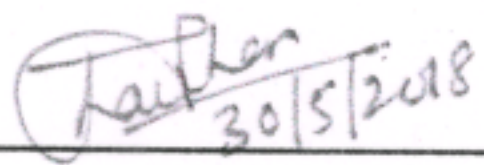
School, Patran (Name of school) has safe

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 the norms

prescribed by the Central/State/U.T Govt.

The above valid for a period of _____


Signature with Seal : 

Name : S.M.O. I/C P.H.C.

Designation : Shrirana (Patiala)
DA

To DAV. Public School
PATRAN.

(Name & Address of the Institution)


Principal

D.A V Public School
PATRAN (Patiala)