PERFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No. SPL	Dated: 26-01-20
It is certified that an Inspection team headed by A. N.	W KUMAR KIRAN PAL
It is certified that an Inspection team headed by $\Pi \Sigma$	
(Name of Officers with designation) from!\!\!\.\!\.\!\.\.\!\	N (1VI)
(Name of Department/Office) Inspected the\HEA	TH DEPART MENT
(Name & Address of the school) on	
Signature with seal Name Designation Name & Address of the	Senior Medical Officer Senior Medical Officer (YNR.) C.H.C. BILASPUR (YNR.) S MO he Office / Department : Health.
To Principal Dashmeth Sem fec Sch. Kapal Mochan (YNR) (Name & Address of the institution)	