

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

No. _____

Date : 6-05-2025

It is certified that an inspection team headed by Dr. Narendrachand
HEALTH OFFICER, NAGAR NIGAM, MORADABAD from **NAGAR NIGAM, MORADABAD** inspected the **PMS PUBLIC SCHOOL, 37-CIVIL LINES, MORADABAD** on 6-05-2025 and found that the **PMS PUBLIC SCHOOL, 37-CIVIL LINES, MORADABAD** 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 **5 years**.

Signature with Seal

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Name

:

Designation

:

नगरी वरिष्ठ नगर स्वास्थ्य अधिकारी

: Dr. Narendrachand: medical officer

To

The Principal

PMS Public School,

37-Civil Lines,

Moradabad


PRINCIPAL
P.M.S. PUBLIC SCHOOL
MORADABAD


Manager/Secretary
Pl. Madan Swaroop Shetri
Public Charitable Trust