APPENDIX -XIII

PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No. 82

Dated: 5 AUG 2024

It is certified that an inspection team headed by ... SWALTYA ... MALCAVE.

(Name of Officers with designation) from ... RAVER ... MVICTPAL ... COUNCTL.

(Name of Department/ Office) inspected the ... MACRO ... VISION ACADEMY...

(Name & Address of the school) on ... OPPOPIZOU (date of inspection) and found that the ... MACRO ... VISION ... ACADEMY. (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 ... ONE ... YEAR.



Signature with Seal:

Name

SWALDYA MALGAVE

Designation

.. मुख्याचिकाल

Name & Address of the Office / Department :

To

MACRO VISION ACADEMY VIVARA SHIVAR SVADA ROAD

(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.