

APPENDIX-XIII

PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

NO. *CHC/Byndoor/76/23-24*

Date: 28/07/2023

It is certified that an inspection team headed by *Community Health Center, Byndoor*  
(Name of Officers with designation ) from *Dr. Rajesh C A.M.O*  
(Name of Department/Office) inspected the *Health & Family Welfare Dept*  
(Name & Address of the school) on *26/7/23* (date of inspection) and found that the  
*St. Thomas Higher Primary School* (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 *6 Months*

Signature With Seal : 

Name : *Dr. Rajesh*

Designation : *A.M.O*

Name & Address of the office/Dept  
**Administrative Medical Officer**  
**Byndoor Taluk - 576 214**

To,

St. Thomas Higher Primary School

Nithyadhara Nagara, Byndoor, Udupi Dist,

Karnataka-576214