

District Water Testing Laboratory

Public Health Engineering Department,
Near WTP. PHE.Central Store Campus, Ring road no. 01, Rawanbhanta, Raipur (C.G.)
e-mail:- dwlraipur@gmail.com

Invoice (Water Sample Analysis Charge)

Invoice no. 16

Date - 09.02.2024

To

सहायक अभियंता-1
छत्तीसगढ़ गृह निर्माण मण्डल,
राज. परि. संभाग, नवा रायपुर, अटल नगर,

(Letter no. 63/सहा. अभि. / रा. प. सं./ 24 नवा रायपुर, अटल नगर, दिनांक 31.01.2024)

Description

Sr. no.	parameters	Fee in Rs. Per sample	Required parameter tick (√)	Total fee in Rs. according to no. of sample = 02
1	Taste	1.00	√	2.00
2	Colour	1.00	√	2.00
3	Odour	1.00	√	2.00
4	Turbidity in NTU	5.00	√	10.00
5	PH	1.00	√	2.00
6	Total Alkalinity as CaCO ₃ in mg/l.	20.00	√	40.00
7	TDS in mg/l.	1.00	√	2.00
8	Chloride in Mg/l.	50.00	√	100.00
9	Nitrate in mg/l.	50.00	√	100.00
10	Total Hardness as CaCO ₃ in mg/l.	20.00	√	40.00
11	Iron in mg/l.	50.00	√	100.00
12	Sulphate mg/l.	50.00	√	100.00
13	Fluoride in mg/l.	50.00	√	100.00
14	Residual Chlorine in mg/l.	1.00	√	2.00
15	Total Coliform	100.00	√	200.00
16	E.Coli	100.00	√	200.00
			Grand Total	1002.00

[Invoice Amount In words ₹. One Thousand Two Rupees only]



Chemist

District Water Testing Laboratory
PHED Raipur (C.G.)



Assistant Engineer
PHED Sub Div.
Raipur (C.G.)

■ " कार्यपालन अभियंता, लोक स्वास्थ्य यांत्रिकी खण्ड रायपुर " के नाम से चेक / डी.डी. का भूगतान करें।

PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE



Dated: 20/4/24

It is certified that an inspection team headed by DR. S.K. BHANDARI

(Name of Officers with designation) from CIVIL SURGEON DISTRICT HOSPITAL RAIPUR

(Name of Department/ Office) inspected the KRISHNA PUBLIC SCHOOL International

(Name & Address of the school) on 20/04/2024 (date of inspection) and found that the KRISHNA PUBLIC SCHOOL International (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

Civil Surgeon,
Signature with Seal: Cum Chief Hospital Supdt.
Distt. Hospital, RAIPUR

Name DR. S.K. BHANDARI

Designation CIVIL SURGEON...

Name & Address of the Office / Department :

To

THE PRINCIPAL.....

KRISHNA PUBLIC SCHOOL International
NAYA RAIPUR (C.U.)
(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.