

SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No _____

Dated 28-08-2025

It is certified that an inspection team headed by Dr R. B. Yadav , superintendent (Name of Officer with designation) from C.H.C. CHOLAPUR, VNS.(Name of Department/Officer) inspected the **Sunbeam School Cholapur at Lakhanpur, Post- Cholapur, Varanasi Uttar Pradesh -221101** on 28-08-2025 and found that the **Sunbeam School, Cholapur** 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: _____

Designation: _____

To,
Sunbeam School, Cholapur
Lakhanpur, Post-Cholapur
Varanasi
Uttar Pradesh-221101

Medical Officer
CHC Cholapur Varanasi

SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No. _____

Dated: 20-03-2023

It is certified that an inspection team headed by Dr. R. B. Yadav, Superintendent (Name of Officers with designation) from C.H.C. CHOLA-PUR, UNS (Name of Department/Office) inspected the **Sunbeam School Cholapur at Lakhanpur, Post- Cholapur, Varanasi Uttar Pradesh -221101** on 20-03-2023 and found that the **Sunbeam School, Cholapur** 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: _____

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Designation: _____

To,
Sunbeam School, Cholapur
Lakhanpur, Post- Cholapur
Varanasi
Uttar Pradesh -221101