## FIRE SAFETY CERTIFICATE

			Dated:	03/06/20	24
C SCHOOL (nan	e of the bui	ding or pren	nises) at <u>P.O</u>	. BOX NO 2,	
N 301019 (Add	ess) compr	sed of ZEF	(0) base	ment(s) and	
ed by MODERN	PUBLIC SC	HOOL (nam	e of the inst	itution) have	
afety requirement	s in accordar	nce with rule	of State/ UT	Fire Service	
erned of Fire Se	rvice on <u>03</u>	.06.2024 (da	ate of inspe	ction) in the	
ddresses of the N	lanager/ Sec	cretary or his	representat	ive) and that	
up to classes <b>TV</b>	ELFTH (12th	<u>")</u> (X/XII) Wi	th effect from	1 03.06.2024	
nce with rule and	I subject to	compliance	of specific o	conditions as	
HIWADI (Place) b	y PREM ME	ENA			
6: 1	\l	Ney	305,06,24		
	eai :	सहायक आ	ग्निशमन अधिव	हा <del>री</del>	
		नगर प	रिषद भिवाड़ी		
•	s of Departm	ent/ Office			
Ivaille & Addres	3 of Departir				
ENDORSEMENT					
		cancelled	an annull	ed due to	
	AN 301019 (Address of the Market Programments of Fire Senderesses of the Market Programment of Fire Senderesses of	AN 301019 (Address) comprised by MODERN PUBLIC SC afety requirements in accordance and of Fire Service on 03 addresses of the Manager/ Secup to classes TWELFTH (12th ance with rule and subject to support the Name Signature with Seal Name Designation Security Name & Address of Department of Department of Name & Address of Department of Name & Addres	AN 301019 (Address) comprised of ZER ed by MODERN PUBLIC SCHOOL (name afety requirements in accordance with rule erned of Fire Service on 03.06.2024 (diddresses of the Manager/ Secretary or his up to classes TWELFTH (12th) (X/XII) Wince with rule and subject to compliance.  HIWADI (Place) by PREM MEENA  Signature with Seal  Name  Designation  Name & Address of Department/ Office:	C SCHOOL (name of the building or premises) at P.O. (IN 301019) (Address) comprised of ZERO (IO) base and by MODERN PUBLIC SCHOOL (name of the instance of Fire Service on 03.06.2024) (date of insperdence of Fire Service on 03.06.2024) (date of insperdence of the Manager/ Secretary or his representation up to classes TWELFTH (12th) (X/XII) With effect from the with rule and subject to compliance of specific of the Minager of Secretary or his representation of Se	Signature with Seal Name Designation Name & Address of Department/ Office:  ENDORSEMENT

(Name and designation of the authorized signatory)

\* The filled up certificate should be either in Hindi or English. If it is issued in vernacular language, translated netarized version in English be uploaded along with the original vernacular certificate as a single pdf.

(Reasons to be recorded).