कार्यालय कार्यपालन यंत्री, लोक निर्माण विभाग, संभाग क्रं.–1 ग्वालियर

☎0751–2371231, Email: eepwd1gwl@nic.in

ग्वालियर दिनांक 16/11/26

क्रमांक 7894 /तक./भवन सुरक्षा प्रमाण–पत्र/2026–27

प्रति,

संयुक्त संचालक
लोक शिक्षण
संभाग ग्वालियर (म0प्र0)।

विषय :– **अशासकीय विद्यालय के भवन का सुरक्षा प्रमाण–पत्र के संबंध में।**

सन्दर्भ :– **आपका कार्यालयीन पत्र क्रं./मान्यता/2026/6410 ग्वालियर दिनांक 23.10.2026**

विषयान्तर्गत सन्दर्भित पत्र के तारतम्य में लेख है कि अशासकीय विद्यालय अशोका इंटरनेशनल पब्लिक स्कूल कम्पू ग्वालियर के भवन का अनुविभागीय अधिकारी लोक निर्माण विभाग पथ उपसंभाग ग्वालियर एवं सम्बंधित उपयंत्री द्वारा निरीक्षण कराया गया उनके द्वारा प्रस्तुत भवन सुरक्षा प्रमाण–पत्र आपकी ओर आवश्यक कार्यवाही हेतु संलग्न प्रेषित है।

सहपत्र :– **भवन सुरक्षा प्रमाण–पत्र।**

कार्यपालन यंत्री
लोक निर्माण विभाग संभाग क्रं.–1
ग्वालियर

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Annexure D

BUILDING SAFETY CERTIFICATE

No. Dated: .....

It is certified that the existing building Ashoka International Public School...(name of the building or premises) at ..Piparali, Kampoo...Gwalior.....

..... (address) is having block(s)/Floor(s) as per details below:

Detail of Block(s) in school	Block (1)	Block (2)	Block (3)	Block (4)	Block (5)	Block (6)
No. of Floor(s) in the Block	2+G.	—	—	—	—	—

The building is owned/occupied by Ashoka International Public School (name of the Institution) have complied with the Building safety requirements in accordance with National Building code Rules, and verified by the officers concerned of .....P.W.D..... (Name of Department/ Govt.) on...5.11.2026.....(date of inspection) in the presence of Ruchi Chauhan..... (name and addresses of the Manager/Secretary or his representative) and that the building/premises is fit for occupancy for running school with effect for year 2026-27 for a period of ...One..... years in accordance with rule and subject to compliance of the specific conditions as appended.

1.
2. Notary S/E
3.
4.

Assistant Engineer
P.W.D. Road Sub Division
Gwalior (M.P.)

C.S.

Executive Engineer
PWD Dn.No.1, Gwalior

Issued on ..... at ..... by

* Strike out whichever is not applicable. In case of block is more than six use separate sheet for detail.

Signature with Seal :_____

Name : _____

Designation : _____

Name & Address of Department/ Office: _____

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