FIRE SAFETY CERTIFICATE

C.No.FIRE/13/JFS/2023   Dated: 09/05/2023

Certified that the **Mount Carmel School, Ward No 79(S), Hanuman Colony, Diagri Kalla, Jodhpur.** Comprised of **Ground Floor First Floor and Second Floor** owned/occupied by **Mount Carmel School , Ward No 79(S), Hanuman Colony, Diagri Kalla , Jodhpur.** (name of the Institution) have complied with the fire prevention and fire safety requirements in accordance with rule of State/UT Fire Service Rules, and verified by the officers concerned of Fire Service on **05/05/2023** (date of inspection) in the presence of Chairman **Mr. Poonaram Choudhary, Mount Carmel School , Ward No 79(S), Hanuman Colony, Diagri Kalla , Jodhpur.** and that the building/premises is fit for occupancy class I to X with effect from 09/05/2023 for a period of 1 year in accordance with rule and subject to compliance of the specific conditions as appended:-

1. Explosive and flammable materials should not be stored in the store room, UPS room, Electrical panel area, class rooms, laboratory & electrical sum panel premises.
2. Accumulation of combustible waste in and around the premises should be avoided.
3. The exist ways shall be always kept clear without any obstruction emergency
4. As per Hon'ble Supreme Court order all teachers and staffs shall be trained to handle safety equipment, initiate emergency evacuation and protect their students in the event of fire and other emergency and the school shall observe the fire safety day on April 14th of every year by conducting fire safety drills with coordinate with fire service department.

Issued on 09/05/2023 at **Jodhpur** by

* Strike out whichever is not applicable.

Signature with Seal: ....

Name   : Mr Sanjay Sharma

Designation   : ....

Name & Address of Department/ Office: ....

मुख्य अग्निशमन अधिकारी
नगर निगम जोधपुर (उत्तर-दक्षिण)

To

The Chairman
Mount Carmel School,
Ward No 79(S), Hanuman Colony, Diagri Kalla ,
Jodhpur.

ENDORSEMENT

The No Objection Certificate issued by Fire Service stand cancelled and annulled due to
……………………………………………………………………………………………………
……………………………………………………………………………… (reasons to be
recorded).

(Name and designation of the authorized signatory).