

**FIRE SAFETY CERTIFICATE**

No C -194/2024

Dated 23-04-2024

Certified that the **St .Joseph Convent senior Secondary E.M School Pulluvazhy** (Name of the building or premises) at **Manager St .Joseph Convent senior Secondary E.M School Pulluvazhy.** (address) comprised of **One** Ground /basements and **one** .(upper floor) owned/occupied by **St .Joseph Convent senior Secondary E.M School Pulluvazhy.**(name of the institution) have complied with the fire prevention and fire safety requirement in accordance with rule of state/UT Fire Service Rules and verified by the officers concerned of Fire Services on **15/04/2024.**(Date of inspection) in the presence of **Manager St .Joseph Convent senior Secondary E.M School Pulluvazhy.**(name and address of the manager/Secretary or his representative) and that the building/premises is fit for occupancy class **XII** with effect from **23/04/2024.**for a period of...**one**... years in accordance with rule and subject to compliance of the conditions.

- 1 No further construction will be allowed in the vacant spaces provided in the approved plan
- 2 The Fire fighting system installed will be kept always functional
- 3 The owner of the building should take special care to maintain the system installed in proper working condition
- 4 All officers of and above the rank of station officers of the Fire & Rescue services Department will have the right to inspect the building on any day/time after serving 7 days notice to ensure that the installed systems are in good working condition.

Issued NOC No D1/402/2020 Dated 27-01-2020 and renewed on 23/04/2024.at Fire & Rescue Station Perumbavoor by

\*Strike out whichever is not applicable



Signature with seal-----

Name

T.K SURESH

Designation

STATION OFFICER  
FIRE & RESCUE STATION  
PERUMBAVOOR

To

**Manager**  
**St .Joseph Convent senior Secondary E.M School**  
**Pulluvazhy** (Name & Address of the Institution)

ENDORSEMENT

The No Objection Certificate issued by Fire Service stand cancelled and annulled due to

.....  
.....(reason to be recorded)

(Name and designation of the authorized signatory)