

FORM -III

Certificate for Execution of Work as Per Structural Safety Requirement (CEWSSR)

(This certificate Adheres to Jharkhand Municipal Act 2011, Jharkhand Regional Development Authority Act 2002, Mineral Area Development Authority Act, Jharkhand Industrial Area Development Authority Act, & Jharkhand Building Bye-Laws 2016)

Owner / Builder Name	Arunima Nandita Sen	Registration no. of LTP	DNP/ENG/0002/2018
Name of Local body	DUMKA NAGAR PARISH	Validity of Registration No. of LTP	17.03.2021
Plot No.	95	Village Name / Mouza Name	DUMKA TOWN
Ward No.	09	Project / Proposal Type	RESIDENTIAL
Thana name / No.	07	Occupancy Type/Purpose	
Khasra / Khathan No.	36/32	Application / file no.	
Village Name / Mouza Name	DUMKA TOWN	Date and Time of Application / file	
Street address	KUMHARI PARA	CEWSSR (No.)	
Landmarks / Locality	MANDIR	Issue date of CEWSSR	

With respect to the building work for above said project/proposal type with respect of above referred plot / locality:

- That the building has been constructed according to structural design and specification prepared by me which incorporates the provisions of structural safety norms as specified in part 6 (Structural Design) of the national building code of India, 2005 and other relevant codes and the design complies with the Earthquake safety requirement.

- That the construction has been done under my supervision and guidance and adheres to the structural drawings and specifications prepared by me and recorded in

Any subsequent changes or deviation from the structural drawings and specifications shall be the responsibility of the owner / builder 31/01/2021 31/02/2021.

Authorized Signatory
Name of Structure Engineer / Civil Engineer _____
Registration No. _____
Validity No. _____
Address _____

Valid till _____
Address _____


Surjya Choudhary
Civil Engineer
REG. No.
DNP/ENG/0002/2018

Authorized Signatory
Name of Structure Engineer / Civil Engineer _____
Registration No. _____
Validity No. _____
Address _____

Authorized Signatory
Name of Owner (Builder)
Registration No. _____
Validity No. _____
Address _____