

FORM -III

CEWSSR No.: 0020/2023
Issue Date of CEWSSR: 20/02/2023

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	: Smt Lila Devi	Registration no. of LTP	: Dmc/EN61/0022/2016
Name of Local body	: Dmc Dhanbad	Validity of Registration No. of LTP	: 13/05/2023
Plot No.	: 639(0) 533(N)	Village Name / Mouza Name	: Bhelafand
Ward No.	: 22	Project / Proposal Type	: Residential
Thana name / No.	: 89	Occupancy Type/Purpose	: 2e/f.
Khastra/ Khatian No.	: 40(0) 13(N)	Application / file no.	: Dmc/TEMP/BB/0059/W22/2023
Village Name / Mouza Name	: Bhelafand	Date and Time of Application / file	: 20/02/2023
Street address	: Bhelafand	CEWSSR (No)	: 0020/2023
Landmark / Locality	: Kamal Katesariya School	Issue date of CEWSSR	: 20/02/2023

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

1. 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.
2. That the construction has been done under my supervision and guidance and adheres to the structural drawings and specifications prepared by me and records of supervision have been maintained.

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

Smt. K. B. Borthi
Authorized Signatory

(Name of Structure Engineer / Civil Engineer)

Registration No.: Dmc/EN61/0022/2016

Validity No.: 13/05/2023

Address: Dhanbad

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Authorized Signatory

(Name of Owner/Builder)

Registration No.:

Validity No.:

Address: