

GOVERNMENT OF KERALA
HEALTH DEPARTMENT
Community Health Centre, Koorachundu

No.: 2/2026

Date: 28/09/26

SANITARY CERTIFICATE

Certified that the institution Synergy Hill Valley Public School, functioning in the building at Ward XIV, 479, 480, 481, 482, 482 A, 482 B, and 483 at Koorachundu Panchayat, Kozhikode District, situated at Vattachira, was inspected by the Health Inspector on 28/09/26.

This institution is situated in Survey No. 1025/10 and is under the ownership of Kumari Neenu V J. On inspection of the institution and its surroundings, it was found that the sanitary conditions are satisfactory. Therefore, the Sanitary Certificate is issued to the institution subject to the following conditions and requirements:

The institution shall function in such a manner as not to cause any public health nuisance.

Waste shall be disposed of scientifically, in a manner that does not cause harm to public health.

The water source and other facilities shall be protected in such a manner as to prevent the occurrence of communicable diseases.

No activity shall be carried out in this institution which causes water, air, sound/noise or other pollution.

The institution and its surroundings shall be maintained in such a manner as to prevent the occurrence of communicable diseases.

The health cards of the employees shall be renewed once every six months. Workers in the food service area shall wear health caps, gloves and aprons.

A "NO SMOKING" signboard measuring 30 cm x 60 cm shall be displayed.

The sanitary/toilet facilities of the institution shall be maintained properly as per the requirements of the Koorachundu Community Health Centre.

The Health Inspector of the Centre shall be informed. Plastic waste shall be collected and disposed of scientifically. Banned plastic carry bags shall not be sold or used.

The provisions of the Public Health Act, Panchayat Raj Act, rules and other applicable laws and procedures shall be complied with.

Any kind of development/construction activity undertaken in future shall be subject to obtaining permission from this office.

If any of the above conditions are not complied with, the Sanitary Certificate shall be cancelled without any further notice.

Health Inspector

Community Health Centre, Koorachundu



Signature and official seal

**Health Inspector
Community Health Center
Koorachund - 673527**



TEST REPORT

Report No - KWA/KKD/PMY/0501/26

Date of issue: 04/06/2026

CustoLIJEEESH ANmer Name & Address SYNERGY HILL VALLEY PUBLIC SCHOOL KOORACHUND	1.Date of Receipt	: 02/06/2026
	2.Sampling done by	: HEALTH INSPECTOR
	3.Sample code	: 0501/26
	4.Sample condition	: FIT FOR ANALYSIS
	5.Source of sample	: SPRING WATER
	6.Sample quantity	: 1 LTR
	7.Test performing dates	: From: 02/06/2026 To: 04/06/2026

Sl.No	Characteristics	Unit	Test Method	Acceptable limits as per IS 10500-2012	Result
1	Colour	Pt Co. unit	IS 3025 (part 4)-2021 (PLATINUM COBALT VISUAL COMPARISON METHOD)	5	<5
2	Odour		IS 3025 (part 5)-2018	Agreeable	Agreeable
3	Turbidity	(NTU)	IS 3025 (part 10)-1984 (NEPHLOMETRIC METHOD)	1	0.73
4	pH at 25°C		IS 3025 (PART 11)-2023	6.5 to 8.5	6.56
5	Alkalinity	(mg/L)	IS 3025 (PART 23)-1986 (INDICATOR METHOD)	200	<5.0
6	Total Dissolved Solids (TDS)	(mg/L)	IS 3025 (part 16)-1984 (GRAVIMETRIC METHOD)	500	41.35
7	Total Hardness (as CaCO ₃)	(mg/L)	IS 3025 (part 21)-2009 (EDTA METHOD)	200	8.0
8	Calcium (as Ca)	(mg/L)	IS 3025 (part 40)-1992 (EDTA METHOD)	75	<5.0
9	Magnesium (as Mg)	(mg/L)	IS 3025 (part 46)-1994 (TITRATION METHOD)	30	<5.0
10	Chloride (as Cl)	(mg/L)	IS 3025 (part 32)-1988 (ARGENTOMETRIC METHOD)	250	21.0

Remarks: - The results reported relate only to the sample received and tested. This test Report shall not be reproduced except in full without the written approval of the Laboratory.

Authorized By: Deputy Quality Manager



DEPUTY QUALITY MANAGER
KERALA WATER AUTHORITY
SUB DISTRICT LABORATORY
PERUVANNAMUZH, KOZHIKODE

KWA/QC/KKD/PMY/F4

Issue No. 01

Issue Date: 01/12/2020

Rev.No. 00

Rev.Date : 00



KERALA WATER AUTHORITY

QUALITY CONTROL SUB DISTRICT LAB

PERUVANNAMOOZHI, KOZHIKOD

Ph: 8078336416

E-mail: pmoozhiqsd@gmail.com

TEST REPORT

Report No - KWA/KKD/PMY/0501/26

Date of issue: 04/06/2026

Customer Name &Address SYNERGY HILL VALLEY PUBLIC SCHOOL KOORACHUND	1.Date of Receipt	: 02/06/2026
	2.Sampling done by	: HEALTH INSPECTOR
	3.Sample code	: 0501/26
	4.Sample condition	: FIT FOR ANALYSIS
	5.Source of sample	: SPRING WATER
	6.Sample quantity	: 1 LTR
	7.Test performing dates	: From: 02/06/2026 To: 04/06/2026

Sl.No	Characteristics	Unit	Test Method	Acceptable limits as per IS 10500-2012	Result
1	Electrical conductivity at 25°C	(micro mhos/cm)	IS 3025 (part 14)-2013 (Reaffirmed 2019)		60.81
2	Sulphate (as SO ₄)	(mg/L)	IS 3025 (PART 24)-1986 (Reaffirmed 2019)	200	0.24
3	Phosphate [as PO ₄]	(mg/L)	IS 3025 (PART 31)-2008 (Reaffirmed 2019)		BDL
4	Fluoride (as F)	(mg/L)	APHA 4500F-D 23rd Edition	1.0	BDL
5	Iron (as Fe)	(mg/L)	IS 3025 (part 53)-2003 (Reaffirmed 2014)	1.0	BDL
6	Nitrate (as NO ₃)	(mg/L)	APHA4500NO3-B 23rd Edition	45	BDL
7	Ammonia	(mg/L)	IS 3025 (part 34)-2008 (Reaffirmed 2019)	0.5	BDL
8	Residual Chlorine	(mg/L)	IS 3025 (part 26)-1986 (Reaffirmed 2019)	0.2	ND

*BDL: - Below detection level ND- Not Detected

Remarks: - The results reported relate only to the sample received and tested. This test Report shall not be reproduced except in full without the written approval of the Laboratory.



Authorized By: Deputy Quality Manager

DEPUTY QUALITY MANAGER
KERALA WATER AUTHORITY
SUB DISTRICT LABORATORY
PERUVANNAMUZHI, KOZHIKODE

KWA/QC/KKD/PMY/F4

Issue No. 01

Issue Date: 01/12/2020

Rev.No. 00

Rev.Date : 00



KERALA WATER AUTHORITY

QUALITY CONTROL SUB DISTRICT LAB

PERUVANNAMOOZHI, KOZHIKODE

Ph.: 8078336416

E-mail: pmoozhiqsd@gmail.com

TEST REPORT

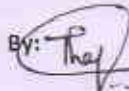
Report No - KWA/PMY/0501/26

Date of issue: 04/06/2026

Customer Name & Address SYNERGY HILL VALLEY PUBLIC SCHOOL KOORACHUND	1.Date of Receipt	: 02/06/2026
	2.Sampling done by	: HEALTH INSPECTOR
	3.Sample code	: 0501/26
	4.Sample condition	: FIT FOR ANALYSIS
	5.Source of sample	: SPRING WATER
	6.Sample quantity	: 100 ML
	7.Test performing dates	: From: 02/06/2026 To: 04/06/2026

Sl.No	Characteristics	Unit	Test Method	Acceptable limits as per IS 10500-2012	Result
1	Coliforms	CFU/100 ml	IS 15185(part1) 2002 reaffirmed 2016	Shall not be detectable in any 100ml sample	NIL
2	E coli	CFU/100 ml	IS 15185(part1) 2002 reaffirmed 2016	Shall not be detectable in any 100ml sample	NIL

NB:- The results stated above related only to the samples(S) submitting for testing. This test Certificate shall not be reproduced except in full without the written approval of the Laboratory.

Authorized By: 



KWA/QC/KKD/PMY/F4

Issue No. 01

Issue Date: 01/12/2020

Rev.No. 00

Rev.Date : 00