

### Ground Water Department RDPC Building, Kakkanad, Kerala State.

Email: ralgwdekm@gmail.com

(BIS: IS: 10500: 2012, REV 2018) Telephone: 0484 2958331

TEST REPORT

Report No: RL/E/468/25

Customer Name & Address	·	Mar Gregorios Memorial Public school Kandanadu, Vattakunnu.
Sample Description	:	Drinking Water (Open Well)
Sampled by	:	Customer
Sample Condition	:	Satisfactory
Purpose	:	Domestic
Quantity of Sample	:	150 ml
Date of receipt of sample	:	11.06.25
Lab ID.	:	272/25
Date of start of analysis	- :	11.06.25
Date of completion of analysis	:	24.06.25
Date of issue of report	:	02.07.25

TEST RESULTS - BACTERIOLGICAL ANALYSIS

SI. No	Parameter	Analytical results	Acceptable Limit (BIS)	Permissible limit (BIS)
1	Total coliform (cfu/100mL)	Absent	Absent	Absent
2	Ecoli or Thermo tolerant coliform bacteria (cfu/100mL)	Absent	Absent	Absent

Remarks: Please chlorinate using bleaching powder @10gm/4000L

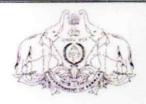
In the given sample the parameter pH is below the acceptable limit

**Authorized Signatory** 

EXECUTIVE CHEMIST
REGIONAL ANALYTICAL LABORATORY
GROUND WATER DEPARTMENT

End report

**Disclaimer**: This test report refers only to the item submitted for testing. The test results reported in this report are valid at the time forward under the stated condition of the measurement. This test report cannot be reproduced except in full, without prior permission of head of this office. Any discrepancies may be brought to the laboratory within 30 days of the issue of the report.



## REGIONAL ANALYTICAL LABORATORY GROUNDWATER DEPARTMENT

RDPC Building, Kakkanad, Kerala State. Email: <u>ralgwdekm@gmail.com</u> Telephone: 0484 2958331



TC-15779

### TEST REPORT

Report No: RL/E/467/25

Customer Name & Address	.:	Mar Gregorios Memorial Public school Kandanadu, Vattakunnu.
Sample Description	:	Drinking Water (Open Well)
Sampled by	:	Customer
Sample Condition	:	Satisfactory
Purpose ·	:	Domestic
Quantity of Sample	:	2 L ,
Date of receipt of sample	:	11.06.25
Lab ID.	:	E-272/25
Date of start of analysis		11.06.25
Date of completion of analysis	:	24.06.25
Date of issue of report		02.07.25

#### TEST RESULTS - CHEMICAL ANALYSIS

SI. No.	Parameters	Unit	Test Method	Result	Acceptable Limit as per IS 10500: 2012
1	Odour		IS 3025(part 5): 2018	Agreeable	Agreeable
2.	Colour	CU	IS 3025(part 4): 2021	1	5
3.	Turbidity	NTU	IS 3025(part 10): 2023	0.08	1
4.	pH		IS 3025(part 11): 2022	7.04	6.5- 8.5
5.	Specific Conductance	μS/cm	IS 3025(part 14): 2013	95.21	
6.	Total Dissolved Solids	mg/l	IS 3025(part 16): 2023	52.4	500
7.	Total Hardness as CaCO <sub>3</sub>	mg/l	IS 3025(part 21): 2009	26	200
8.	Calcium as Ca	mg/l	IS 3025(part 40): 2024	8	75
9.	Magnesium as Mg	mg/l	IS 3025(part 46): 2023	1.46	30
10.	Sodium	mg/l	APHA, 3500: Na B 24th Edition	5.05	
11.	Potassium	mg/l	APHA,3500: K B 24th Edition	3.63	-
12	Total Alkalinity as CaCO <sub>3</sub>	mg/l	IS 3025(part 23): 2023	BQL	200
13	Chloride as Cl	mg/l	IS 3025(part 32): 1988	13.33	250
14	Sulphate (as SO <sub>4</sub> )	mg/L	IS 3025(part 24): Sec 1/2022	BQL	200
15	Nitrate (as NO <sub>3</sub> )	mg/l	1S 3025(part 34): Sec 1/2023	15.19	45
16	Iron (as Fe)	mg/l	RAL/GWD/EKM/SOP/01/016	BQL	1

**BQL: Below Quantification Limit** 

Authorized Signatory Dr. Bindumol G.P.

End report

**Disclaimer**: This test report refers only to the item submitted for testing. The test results reported in this report are valid at the time forward under the stated condition of the measurement. This test report cannot be reproduced except in full, without prior permission of head of this office. Any discrepancies may be brought to the laboratory within 15 days of the issue of the report.

RL/E/FRM/016	ssue No:01 / Date: 08.01.2024	Page 1 of 1	Amend. No. / Date: 00 /
--------------	-------------------------------	-------------	-------------------------

# PROFORMA REGARDING SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE.

No. 514 /25		Date: 25/09/15
It is certified that an inspect Raphy Joseph, Healt with designation) from HSD, F	h Inspector	Health Inspector  (Name of Officers  (Name of
	ne Max areg	(Name & Address of
the School) on 25/09/2025 at (mam) Public School		ar Gregorios Memoria  (Name of school) has safe
the hygienic sanitation condition in t	he school building & t	
prescribed by the Central/State/U.T Go The above valid for a period of _		
A STATE OF THE STA	Signature with S	seal:
Carrier San Cos	Signature with S	eal: Raphy Joseph
To .		: Raphy Jaseph : Health Inspector Gr HEALTH INSPECTOR FAMILY HEALTH CENTRE
To Jahson Varghese	Name	: Raphy Jaseph : Health Inspector Gri HEALTH INSPECTOR
To Jahson Varghese  May aregorias memor	Name Designation	: Raphy Jaseph : Health Inspector Gr HEALTH INSPECTOR FAMILY HEALTH CENTRE
Jabson Varghese	Name Designation	: Raphy Jaseph : Health Inspector Gr HEALTH INSPECTOR FAMILY HEALTH CENTRE
Jahson Varghese Max aregories memor	Name Designation	: Raphy Jaseph : Health Inspector Gr HEALTH INSPECTOR FAMILY HEALTH CENTRE
Jahson Varghese  May aregories memor  kandanad  (Name & Address of the Institution)	Name Designation	: Raphy Jaseph : Health Inspector Gr HEALTH INSPECTOR FAMILY HEALTH CENTRE
Jahson Varghese  May aregories memor  kandanad  (Name & Address of the Institution)	Name Designation	: Raphy Jaseph : Health Inspector Grine HEALTH INSPECTOR FAMILY HEALTH CENTRE UDAYAMPEROOR
Jabson Varghese Max aregories memor kandanad	Name Designation	: Raphy Jaseph : Health Inspector Gr. HEALTH INSPECTOR FAMILY HEALTH CENTRE

KANDANAD, ERNAKULAM-682 305