



**കേരള സർക്കാർ**  
**കോട്ടയം ഗവ. മെഡിക്കൽ കോളേജ് ഹെൽത്ത് സെന്റർ**  
**ഏറ്റുമാനൂർ പി.ഒ, ഏറ്റുമാനൂർ**  
**ഇ-മെയിൽ - kmchetr@gmail.com ഫോൺ നം. 0481-2535573**

No.PH-283/2025/KMCFHC

Ettumanoor  
29.07.2026

**PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE**

It is certified that an inspection team headed by Health Inspector Ismeh  
Ettumanoor from..... PHED inspected the Holy cross Vidhyasadan  
Thekkom PO Kottayam Kerala on  
26.05.2026 and on the basis of Water Test Report (Attached) bearing no  
773/QC/KTM/05/2026 dtd. 01.06.2026 of Kerala Water Authority  
Kottayam certified that the Holy cross Vidhyasadan has safe  
drinking water facilities for the students and members of staff of the institution.  
School is also maintains the hygienic sanitation condition in the school building & the  
campus as per norms prescribed by the Central/State/UT Govt.

This certificate is valid till 31.03.2027



Signature with Seal: [Signature]  
Name : Masoom Binte  
Designation : Health Inspector  
Name & Address of the Office /  
Department : KMCHC Ettumanoor

To

Holy cross Vidhyasadan  
Thekkom  
(Name & Address of the institution)

Note:- The certificate is to be issued by authorized officer/PHED Lab/Local bodies.





QUALITY CONTROL SUB DISTRICT LAB  
KERALA WATER AUTHORITY  
COLLECTORATE P O, KOTTAYAM

Telephone No. 0481 2302391, Email- qcsdlktm@gmail.com

(NABL Recognized Block Level Government Drinking Water Testing Laboratory)

**Test Report**

Certificate No. NABL-DWT-00897

Report No:773/QC/KTM/05/2026

Date:01.06.2026

|                                                                                                       |                                                   |      |                                                                           |                                               |                    |                                        |              |
|-------------------------------------------------------------------------------------------------------|---------------------------------------------------|------|---------------------------------------------------------------------------|-----------------------------------------------|--------------------|----------------------------------------|--------------|
| Customer Name & Address<br><br>THE PRINCIPAL<br>HOLY CROSS VIDYA SADAN<br>THELLAKOM P. O.<br>KOTTAYAM |                                                   |      |                                                                           | 1.Date of Receipt                             |                    | 25/05/26                               |              |
|                                                                                                       |                                                   |      |                                                                           | 2.Sampling done by                            |                    | HI ETTUMANOOR                          |              |
|                                                                                                       |                                                   |      |                                                                           | 3.Sample Code                                 |                    | 2026/QC/KTM/M1105                      |              |
|                                                                                                       |                                                   |      |                                                                           | 4.Source of Sample                            |                    | WELL                                   |              |
|                                                                                                       |                                                   |      |                                                                           | 5.Sample Quantity                             |                    | 2 Litres                               |              |
|                                                                                                       |                                                   |      |                                                                           | 6.Sample Condition                            |                    | Acceptable                             |              |
|                                                                                                       |                                                   |      |                                                                           | 7.Test performing date: 25.05.2026-28.05.2026 |                    |                                        |              |
| Sl.No.                                                                                                | Characteristics                                   | Unit | Test Method                                                               |                                               | Limit of Detection | Acceptable limits As per IS 10500:2012 | Result       |
| 1                                                                                                     | Colour                                            | HU   | APHA 24 <sup>th</sup> Edition (2023)<br>2120 B Visual comparison Method   |                                               | 1                  | 5                                      | 1            |
| 2                                                                                                     | Odour                                             |      | IS 3025 (part 5) – 2018                                                   |                                               | Agreeable          | Agreeable                              | Agreeable    |
| 3                                                                                                     | Taste                                             |      | IS 3025 (part8)-2023                                                      |                                               | Agreeable          | Agreeable                              | Disagreeable |
| 4                                                                                                     | Turbidity                                         | NTU  | IS 3025(part10):2023<br>Nephelometric Method                              |                                               | 0.5                | 1                                      | 0.9          |
| 5                                                                                                     | pH at 25 <sup>0</sup> C                           |      | IS 3025(part 11)-2022-<br>Potentionmetric Method )                        |                                               | 2                  | 6.5 - 8.5                              | 5.9          |
| 6                                                                                                     | Total Alkalinity(as CaCO <sub>3</sub> )           | mg/l | IS 3025(part 23):2023<br>Indicator Method                                 |                                               | 5                  | 200                                    | BDL          |
| 7                                                                                                     | Total dissolved solids (TDS)at 180 <sup>0</sup> C | mg/l | IS 3025(part16): 2023<br>( TDS Meter/Gravimetric Method )                 |                                               | 10                 | 500                                    | 18           |
| 8                                                                                                     | Total hardness (as CaCO <sub>3</sub> )            | mg/l | IS 3025(part21)-2009<br>(Reaffirmed 2023)<br>EDTA Method                  |                                               | 10                 | 200                                    | 10           |
| 9                                                                                                     | Calcium (as Ca)                                   | mg/l | IS 3025(part40): 2024<br>EDTA Titrimetric Method                          |                                               | 5                  | 75                                     | BDL          |
| 10                                                                                                    | Magnesium (as Mg)                                 | mg/l | APHA 24 <sup>th</sup> Edition<br>(2023)3500 – Mg<br>B- Calculation Method |                                               | 5                  | 30                                     | BDL          |
| 11                                                                                                    | Chloride (as Cl)                                  | mg/l | IS 3025(part32)-2025<br>Argentometric Method                              |                                               | 10                 | 250                                    | 6            |

Remarks

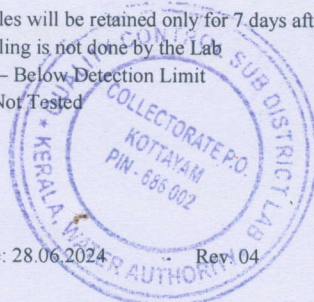
NB:- The result stated above related only to the sample(s) submitted for testing. This test Certificate shall not be reproduced except in full without the written approval of the laboratory

\*Samples will be retained only for 7 days after completion of analysis

\*Sampling is not done by the Lab

\*BDL – Below Detection Limit

\*NT- Not Tested



Verified and Authorized By  
(Signature with Name)

*Jyothikshmi K.G.*





**QUALITY CONTROL SUB DISTRICT LAB**  
**KERALA WATER AUTHORITY**  
**COLLECTORATE P O, KOTTAYAM**  
Telephone No. 0481 2302391, Email- [qcsdlktm@gmail.com](mailto:qcsdlktm@gmail.com)  
**Test Report**

|                              |                 |
|------------------------------|-----------------|
| Report No:773/QC/KTM/05/2026 | Date:01.06.2026 |
|------------------------------|-----------------|

|                                                                                                       |                                              |                   |
|-------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------|
| Customer Name & Address<br><br>THE PRINCIPAL<br>HOLY CROSS VIDYA SADAN<br>THELLAKOM P. O.<br>KOTTAYAM | 1.Date of Receipt                            | 25/05/26          |
|                                                                                                       | 2.Sampling done by                           | HI ETTUMANOOR     |
|                                                                                                       | 3.Sample Code                                | 2026/QC/KTM/M1105 |
|                                                                                                       | 4.Source of Sample                           | WELL              |
|                                                                                                       | 5.Sample Quantity                            | 2 Litres          |
|                                                                                                       | 6.Sample Condition                           | Acceptable        |
|                                                                                                       | 7.Test performing date:25.05.2026-28.05.2026 |                   |

| Sl. No | Characteristics                              | Unit            | Test Method                                                 | Desirable limits as per IS 10500:2012 | Result |
|--------|----------------------------------------------|-----------------|-------------------------------------------------------------|---------------------------------------|--------|
| 1      | Electrical conductivity at 25 °C             | (Micro mhos/cm) | IS 3025(part14)-2013 (Reaffirmed 2023)                      |                                       | 30     |
| 2      | Acidity                                      | (mg/litre)      | IS 3025(part22)-2024 Indicator Method                       |                                       | 12.1   |
| 3      | Sulphate (as SO <sub>4</sub> )               | (mg/litre)      | IS 3025(part24/Sec 1)2022 Turbidity Method                  | 200                                   | BDL    |
| 4      | Fluoride (as F)                              | (mg/litre)      | KIT Method                                                  | 1                                     | BDL    |
| 5      | Iron (as Fe)                                 | (mg/litre)      | IS 3025(part53)-2024 (Phenanthroline Method )               | 1                                     | BDL    |
| 6      | Nitrate(as NO <sub>3</sub> )                 | (mg/litre)      | KIT Method                                                  | 45                                    | BDL    |
| 7      | Residual chlorine                            | (mg/litre)      | KIT Method                                                  | 0.2                                   | NIL    |
| 8      | Biological Oxygen Demand                     | (mg/litre)      | IS 3025(part 44)-2023-Oxygen Depletion Method               |                                       | NT     |
| 9      | Dissolved Oxygen                             | (mg/litre)      | IS 3025(part 38)-1989 (Reaffirmed 2019) –Winkler Method     |                                       | NT     |
| 10     | Chemical Oxygen Demand                       | (mg/litre)      | IS 3025(part 58)-2006 (Reaffirmed 2023) –Open Reflux Method |                                       | NT     |
| 11     | Total Suspended Solids @ 103°C - 105°C (TSS) | (mg/litre)      | IS 3025(part 17)-2023 Gravimetric Method                    |                                       | NT     |

Remarks

NB:- The result stated above related only to the sample(s)submitted for testing. This test Certificate shall not be reproduced except in full without the written approval of the laboratory

- \*Samples will be retained only for 7 days after completion of analysis
- \*Sampling is not done by the Lab
- \*BDL – Below Detection Limit
- \*NT- Not Test

**\*End of the Report\***

Verified and Authorized By  
(Signature with Name)

*Jyathidek Shree K.A.*





**QUALITY CONTROL SUB DISTRICT LAB**  
**KERALA WATER AUTHORITY**  
**COLLECTORATE P O, KOTTAYAM**  
Telephone No. 0481 2302391, Email- [qcsdlktm@gmail.com](mailto:qcsdlktm@gmail.com)

**TEST REPORT**

|                              |                  |
|------------------------------|------------------|
| Report No:907/QC/KTM/06/2026 | Date: 20.06.2026 |
|------------------------------|------------------|

|                                                                                                  |                                                 |                   |
|--------------------------------------------------------------------------------------------------|-------------------------------------------------|-------------------|
| Customer Name & Address<br><br>PRINCIPAL<br>HOLY CROSS VIDYA SADAN<br>THELLAKOM P. O<br>KOTTAYAM | 1.Date of Receipt                               | 16/06/2026        |
|                                                                                                  | 2.Sampling done by                              | CUSTOMER          |
|                                                                                                  | 3.Sample Code                                   | 2026/QC/KTM/M1266 |
|                                                                                                  | 4.Source of Sample                              | WELL              |
|                                                                                                  | 5.Sample Quantity                               | 200ML             |
|                                                                                                  | 6.Sample Condition                              | Acceptable        |
|                                                                                                  | 7.Test performing date: 16.06.2026 - 19.06.2026 |                   |

**BACTERIOLOGICAL ANALYSIS**

|   | Parameters | Acceptable Limits as per IS 10500-2012 | Test Method                        | Result |
|---|------------|----------------------------------------|------------------------------------|--------|
| 1 | Coliforms  | Shall not be detected/100ml            | IS 15185:2016<br>(Reaffirmed 2021) | ABSENT |
| 2 | E.coli     | Shall not be detected/100ml            | IS 15185:2016<br>(Reaffirmed 2021) | ABSENT |

Test Method :

Coliforms- Membrane filtration Method

E coli- Membrane filtration Method

Remarks: -

NB:- The result stated above related only to the sample(s) submitted for testing. This test Certificate shall not be reproduced except in full without the written approval of the laborator

\*Samples will be retained only for 7 days after completion of analysis

\*Sampling is not done by the Lab

**\*END OF REPORT\***



Verified and Authorized By  
(Signature with Name)

*Chandrasekhar R. Chidambaram*  
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Rev. No.02 Rev. Date 20.04.2026