SAFAI KARAMCHARI CERTIFICATE

**This is to certify that following candidates with Aadhar No. mentioned in Column 6, with residential address mentioned in Column 7 is a Safai Karamchari engaged by our organization.**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sl. No.**  **(1)** | **Name of the Candidate**  **(2)** | **Gender**  **(3)** | **Age**  **(4)** | **Name of Father / Husband**  **(5)** | **Aadhar Number**  **(6)** | **Residential Address**  **(7)** | **Workplace Address**  **(8)** | **Signature**  **(9)** |
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**Sign and Stamp**

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| --- | --- |
| **Name of the officer issuing Certificate:** |  |
| **Designation and Department:** |  |
| **District and State:** |  |
| **Contact Number:** |  |