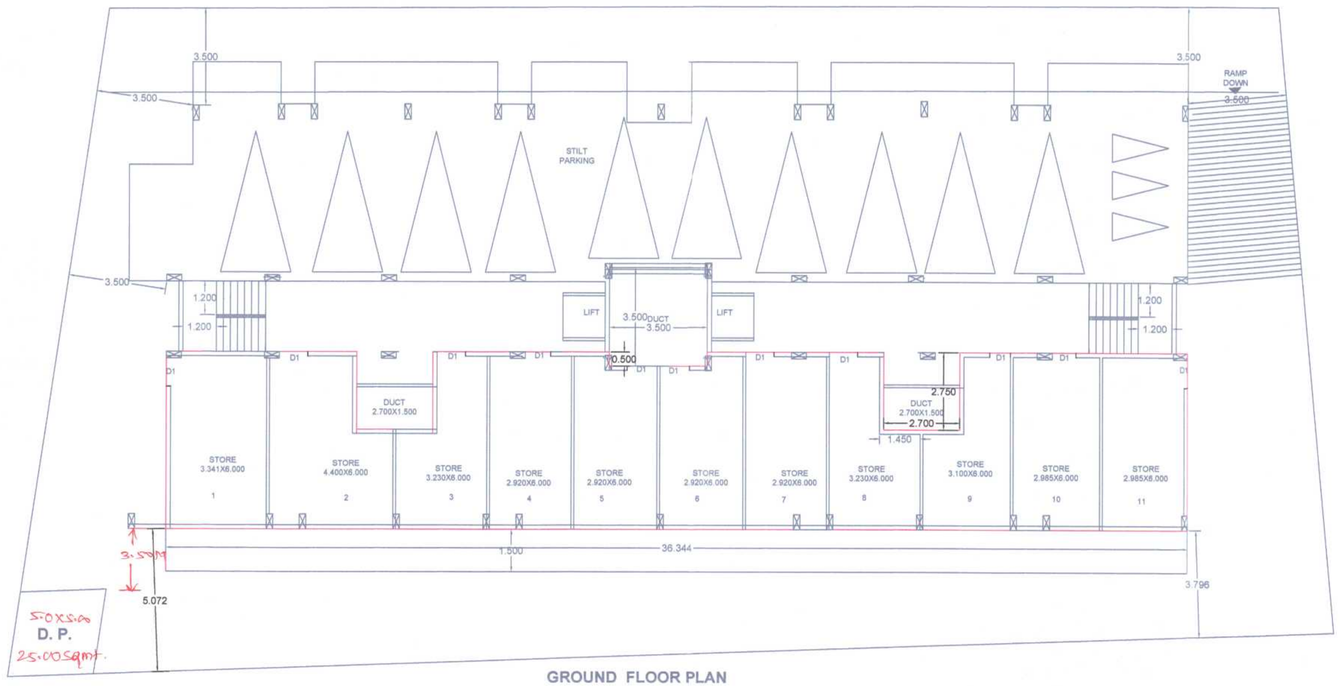
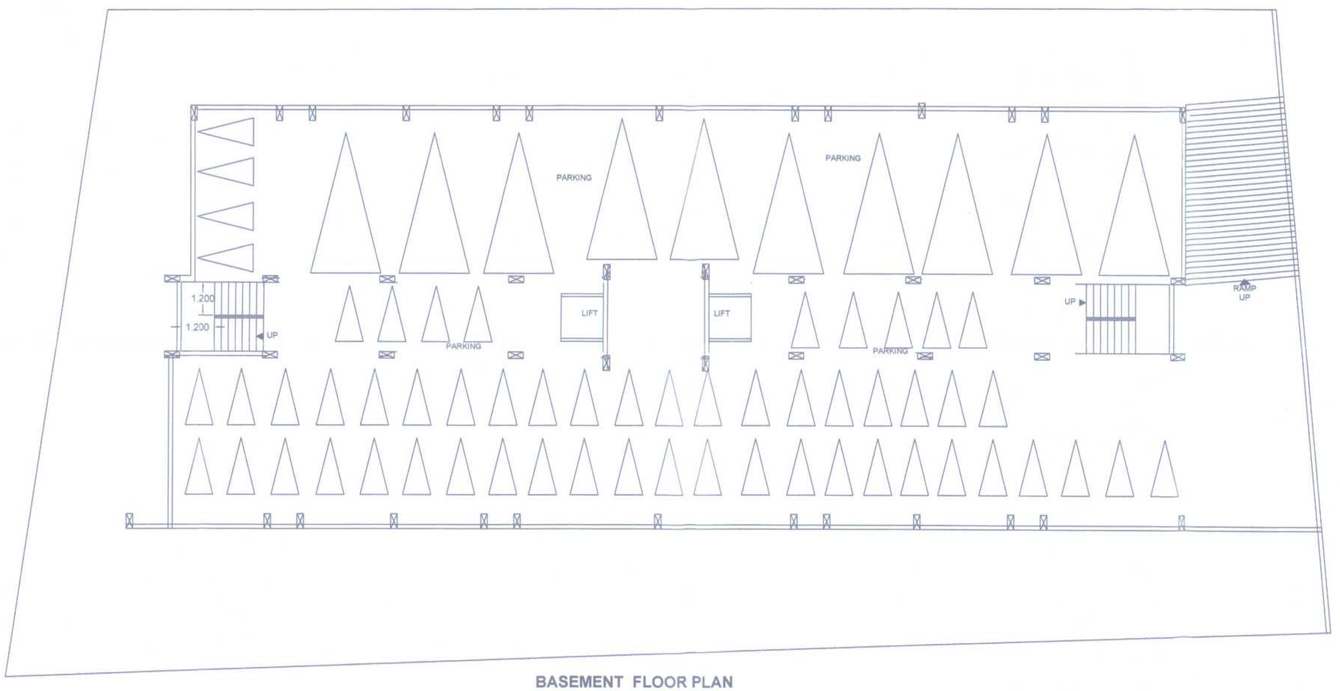
D AND E TYPE
FLATS AND STORE



GROUND FLOOR PLAN



BASEMENT FLOOR PLAN

NORTH

SCALE 1:100

Approved as ammended
In.....Colour Subject to
the Conditions mentioned in
this office Building Permit No.....
Date :

DY.ENGINEER
Town Planning
Municipal Corporation
Chhatrapati Sambhajinagar

O.C. Signed By D.D.T.P.

सूचना

वांधकाम परवानगीनुसार बांधकाम सु
ल्यानंतर ओट्यापर्यंत (Plinth Level) ह
बांधकाम पूर्ण झाल्यावर वास्तुविशारद /
व्यवसायीक अभियंता/ सुपरवायजर, यांचे
मार्फत ओट्याचे पूर्णत्वाचे प्रमाणपत्र ह
कार्यालया हून प्राप्त करून घेणे गरज
पूर्वीच बांध. नि सुरु कराये अन्यथा आपण
त्या पुढे केल बांधकाम अनधिकृत समजू
कार्यवाही करण्यात येईल ह्याची नोंद घ्या

नारत बांधकाम संबंध
च माती म.न.पा.च्या
रस्त्यावर ठेवू नये

REVISED PLAN OF GROUP HOUSING SCHEME " PRATIK ANGAN" BUILDING ON GUT NO:8/PART, SITUATED AT NAKSHTRAWADI CHHATRAPATI SAMBHAJINAGAR, BELONGS TO SMT. VIDYA SHAMSUNDER NAIK AND MISS. MEDHA SHAMSUNDER NAIK

CERTIFICATE OF AREA :
CERTIFIED THAT THE PLOT UNDER REFENCE WAS SURVEYED BY ME ON 12.2.2023 AND THE DIMENSIONS OF SIDES ETC. OF PLOT STATED ON PLAN ARE AS MEASURED ON SITE AND THE AREA SO WORKED OUT TALLIS WITH THE AREA STATED IN DOCUMENT OF OWNERSHIP/T.P. SCHENE RECORDS/LAND RECORDS DEPARTMENT/CITY SURVEY RECORDS.

ER. ASHOK BALANDE
B.E. (Civil), D.B.M.
AMC Certificate No:
DDMCB/R/2021/APL/01117

Signature
(Name of Architect/ Licensed Engineer/ Supervisor.). Ashok Balande

OWNER (s) DECLARATION-
I/WE UNDERSIGNED HEREBY CONFIRM THAT I/WE WOULD ABIDE BY PLANS APPROVED BY AUTHORITY /COLLECTOR. I/WE WOULD EXECUTE THE STRUCTURE AS PER APPROVED PLANS. ALSO, I/WE WOULD EXECUTE THE WORK UNDER SUPERVISION OF PROPER TECHNICAL PERSON SO AS TO ENSURE THE QUALITY AND SAFETY AT THE WORK SITE.

1) SMT. VIDYA SHAMSUNDER NAIK Sow. V.S. Naik.

2) MISS. MEDHA SHAMSUNDER NAIK

Owner (s) Name and Signature

ARCHITECT/ LICENSED ENGINEER/ SUPERVISOR NAME AND SIGNATURE

ARCHITECT / ENGINEER

A B ASSOCIATES
ARCHITECTURAL / STRUCTURAL / 3D DESIGNERS
ASHOK BALANDE
B.E.(CIVIL); D.B.M.
GURUNAGAR, 12, N-8,
CIDCO AURANGABAD.
9422201975
ashokbalande@gmail.com

REGISTRATION NO. OF ARCHITECT/ LICENSE NO. OF LICENSED ENGINEER/ SUPERVISOR : **REGISTRATION/LICENSE NO: DDMCB/R/2021/APL/01117**

REVISED SUBMISSION DRAWING