

ASSESSMENT FORM TO BE FILLED UP BY THE RESIDENT HUDA WELFARE ASSOCIATION.

DATE OF INSPECTION

1	Name of RWA.	RWA Sector- 23, HUDA Bhiwani
2	Registration number, Act under which registered & date of registration.	126/ 2005,2006
3	Name & Address, Mobile No., e-mail address of the President and General Secretary.	Sh. R.K. Chhinparia President H.N. 235 Sec-23 Mob. No. 94168-74860 Sh. Raj Kumar Sheoran Gen. Secretary H.No. 989 Sec-23 Mob. No. 94160-59130
4.	Name (s) of the representative present during last inspection.	Sh. R.K. Chhinparia Sh. Raj Kumar, Sheoran
4	Assessment out of 10 marks in respect of:	
a)	JE (Civil) for water supply, Sewerage & storm water.	2/10
b)	JE (Electrical) for Street light.	5/10
c)	JE (Horti.) for Parks	2/10
d)	JE (Estate Office) for cleanliness, maintenance of open spaces, sineages, prevention & removal of encroachments.	3/10
e)	Steps taken to improve deficiencies noted during the last inspection	Not Satisfactory

Signature of President/Gen. Secy.
Authorised Representative of RWA.

TO BE FILED UP BY THE INSPECTING OFFICER:

<p>Whether the Inspecting Officer agrees with the above Assessment done by RWA? If not, then what is his Assessment and reasons therefore.</p>	<p>Various unauthorized water and electric connection were noted. Roads are in poor condition sewer system is choked at a No. of places and there are no planned disposal concerned officers/ officials were directed to improve the services remove the defects pointed out and to report within 15 days.</p>
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**Sd/-
(Girish Arora, H.C.S.)
Estate Officer, HUDA, Bhiwani
(Signature of the Inspecting Officer)**

