Form-5

Certificate by Architect / Licensed Surveyor

(Certificate for the purpose of completion of Layout/ Sub-Division Project)

Address of the Project: Survey **S.F.No: 44/1B, 44/2, 44/3 , Uma Mageshwari Nagar in Vathistapuram** Village, **Tittagudi** Taluk , **Cuddalore** District.

Date: 1.2.2024

D.Selvaraj, (Name of the Promoter)
No:17/8, 21th Cross Street, Nehru Colony, (Address of the Promoter)
Pazhavanthangal , Kanchipuram District – 600 114.
Contact No : 7339362634
Email.Id : karthikharith1988@gmail.com

Subject: Certificate for TN-RERA Approval (Name of the project)

Ref: (TNRERA Registration Number)

Sir,

I, **MADHAN** (name of the Architect / Licensed Surveyor) having License No. **RE/GR-III/50/2020** had undertaken assignment as an Architect/ Licensed Surveyor for theassessment and verification of development of work done at **Uma Mageshwari Nagar** (name of the project) situated on the Plot bearing Survey no's. **44/1B, 44/2, 44/3** demarcated by its boundaries (latitude and longitude of the end points) 11.412957° to the North 79.126886° to the South - to the East - to the West of Division **Vathistapuram** Village, **Tittagudi** Taluk, **Cuddalore** District . Measuring **15950.00** sq.mts. Being developed by **D.Selvarasu** (Name of the Promoter).

Based on site inspection carried out by me with respect to each of the plot(s) of the aforesaid Layout/ Sub-Division Project, I certify that as on date of this certificate, the project has been developed and completed in all respects as per the Plotting layout plan sanctioned by Document Certified by emaraani (Name ofthe sanctioned authority) vide Planning Permission No. **68/2023** dated **07/07/2023** including all amenities and facilities as committed by the promoter to the allottes.

Yours Faithfully,

Stamp, Signature & Name (IN BLOCK LETTERS) of Architect/ Licensed Surveyor with (Reg.

LicenseNo: **RE/GR-III/50/2020**

Enclosed:

Photographs of all sides of site

V. Madhan

Er.V.MADHAN B.E.,
Registered Engineer
RE/GR - III/VR/050-2020
No.56E, Govt. Hospital (Opp.)
Villupuram - 605 602.
Cell: 9655053187


உமாமகேஸ்வரி நகர்


நிறைவு பெற


மதேஸ்வரி நகர்
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