Form-5

Certificate by Architect / Licensed Surveyor

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

Address of the Project: S.No. 524/1B2, 527/1B, 527/2, 527/3, 527/4, Naikenpalayam Village, Coimbatore North (TK), Coimbatore (DT).

KAMALANATHAN (Name of the Promoter)

Date: 31.08.2024

R. Kamalanathan. (Address of the Promoter)
2/135, Kovanoor, Naikanpalayam, Coimbatore - 641020

Subject: Certificate for Sakthi Garden (Name of the project)

Ref: _____ (TNRERA Registration Number)

Sir,

I. S. Chinraj (name of the Architect/ Licensed Surveyor) having License No. 154/LS/2020/00002 had undertaken assignment as an Architect/ Licensed Surveyor for the assessment and verification of development of work done at Sakthi Garden (name of the project) situated on the Plot bearing Survey no./ Plot no. 524/1B2, 527/1B, 2, 3, 4 demarcated by its boundaries (latitude and longitude of the end points) 11.151°36'3 to the North _____ to the South 76.917598 to the East _____ to the West of Division Naikenpalayam Village Coimbatore North Taluk Coimbatore District _____ measuring 7835.00 sq. mts. Being developed by Sakthi Garden (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 DTCP Coimbatore (Name of the sanctioned authority) *vide* Planning Permission No. 303/2024 dated 08.06.2024 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. License No_____)

Enclosed:

Photographs of all sides of site

Er. S. CHINRAJ, DCE.,
Registered Engineer,
Reg. No.154/LS/2020/00002.
Reg. No.TD/RE-III/2021/11/001,
45/2, Kottapulipalayam Road, Dharapuram - 638 656.
Cell : 90424 73687