

ESTIMATE SHEET						
Company Name:		MRMallapur LLP	Approved by:		Ram prasad	
Project:		Gulmohar Residency.	Sign:			
Work Description:		Painting work for ms frames at labour quarters				
Contractor Name:		Shobaram				
Prepared By		P.sai kumar				
Date:		20.05.2020				
S No.	Item Head	Item Description	Quantity	Units	Rate	Amount
1	labour quarters	Redoxide painting for ms door frames	836.00	rft	1.50	1254
Amount in Words : One Thousand Two Hundred and Four Rupees Only.						

Bill for Equipment Allowance

Shobha ram,
Mallapur ,
Hyderabad.

Date: 20.05.2020.

In favor of: MRMLLP
Project / Site: Gulmohar Residency
Location: Mallapur

Type of Work: Painting work for ms frames at labour quarters..
Towards: Allowance for Equipment

S No.	Description	Amount
1.	Brief description of work done: Towards Painting work for ms frames at labour quarters . Total Amount = 1,254/- Work done from date 01.05.20 to date 10.05.2020.	Rs.501/-

Amount in words: Five Hundred and One Rupees Only.

Sign: 511 011

Construction division.
Advice for giving credit to contractors/suppliers.

Sl. No. – site bills register		- 73 -		Date - site bills Register		20/5/2020	
Company Name:		MR Mallapur LLP.		Site:		GMR.	
Name of Contractor		Shoba Ram					
Nature of work		Painting work for MS frames at Labour Quarters					
Work done		From Date		To Date			
		01/5/20		10/5/20			
Sl. No.	Villa/Flat/block no.	Qty.	Rate	Units	Amount	Contractors bill no	
1.	Labour Quarters	-836 -	Rs. 1.50/-	sqft	Rs. 1254/-		
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.	Total:				Rs. 1254/-		
Bill required		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO.		GST bill required		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO.	
Measurement & estimate sheet:		<input checked="" type="checkbox"/> Required <input type="checkbox"/> Not required		Measurement & estimate sheet:		<input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Not enclosed	
PO/WO no.		-		PO/WO date:		-	
Remarks :							
Approved by Project Manager		Approved by Design Team		Approved by M.D.			
Date: 20/05/2020		Date:		Date:			
Sign: <i>[Signature]</i>		Sign:		Sign:			

Notes: 1. This advice must be sent within 7 days of completing work. 2. This form can be used for certifying labour bills, bills for hire charges, earth work, turnkey civil contractors. 3. Wherever not applicable – fill NA. 4. Estimate and measurement sheets are not required for turnkey jobs where guideline rates are clearly given.