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

Sl. No. – site bills register Company Name:	GV.	Dr.		Date Regis Site:	- site b	ills	16/	6/22 polis
Name of Contractor Nature of work	7.K	nanon sicade					Inno	bone
Work done St. Villa/Flat/block	From L	Date	1	106/2	2 T	o Date	Indi	16/22
No.	io. Qt	y.	Rate		Units	Amor	int	Contractors bill no
2. Barricade Klo	oxk la	18	SE		SH-	114	20.	
4.			,				1	
5.								
7.								
8.								
9.								
10.							1	
Bill required	otal:	7110				11/4		
Measurement &	YES				bill requi		□ YES	
estimate sheet: PO/WO no.	Requ			estim	urement ate sheet		☐ Enclos	
Remarks :				PO/W	O date:			
Approved by Project Ma	anager	Approv	ved by	Desig	gn Team	App	roved by	M.D.
Date: 16/6/22		Date:				Date		
Sign: Out		Sign:				Sign	1:	

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, each 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.

Approved	Approved By	Approved By	Approved By Madhu.T
Approved	Approved By	Approved By	
Approved	Approved By	Approved By	
Approved	Approved By	Approved By	
Madhu.T	Madhu.T		

11484.00							
	11484.00	58.00	sft	198.00	Barigate work	1 5600C-East	
Item Head Total	_	Rate	Units	Quantity	Item Description	Item Head	SNo.
						16-06-2022	Date:
						Salman.MD	Project:
						T.Kurmanna	Name of the Contractor
						Barigate work	Work Description:
						Innopolis	Project:
	Madhu.T					GVRC	Company Name:
Ву	Approved By						ESTIMATE SHEET
							The second secon