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

| Sl. No. – site bills  | 12=            | <u></u> |                |      | - site bi  | lls    | 28                      | 110/23- |  |
|---|----------------|---------|----------------|------|------------|--------|-------------------------|---------|--|
| register Company Name:  |                |         | Register Site: |      |            |        | 28/10/23.<br>Innopolis. |         |  |
| Name of Contractor  |                |         |                |      |            | spaus. |                         |         |  |
| Name of Contractor Md. Khudoos                                    |                |         |                |      |            |        |                         |         |  |
| Nature of work  | us entra unhal |         |                |      |            |        |                         |         |  |
| Work done   | 1160411        |         |                |      |            |        |                         |         |  |
| Sl. Villa/Flat/block no. Qty.                                     |                |         | Rate Units     |      | Amount     |        | Contractors<br>bill no  |         |  |
| 1. your group   | 9 &            | -       | 400            | 10 r | גיים מ     | 320    | <b>1</b>                |         |  |
| 3. Hoor ent   | _              |         |                |      |            |        |                         |         |  |
| 4. Urinal tit   |                |         |                |      |            |        |                         |         |  |
| 5. LIB) ICI.  | ing            |         |                |      |            |        |                         |         |  |
| 6.  |                |         |                |      |            |        |                         |         |  |
| 7.  |                |         |                |      |            | \      |                         |         |  |
| 8.  |                |         |                |      |            |        |                         |         |  |
| 9.  |                |         |                |      |            |        |                         |         |  |
| 10.   |                |         |                |      |            |        |                         |         |  |
| 11. Total:  |                |         |                |      |            |        | 32,000                  |         |  |
| Bill required   | 1 YES D        |         |                |      | bill requi |        | □ YES                   |         |  |
| Measurement &   | Require        |         |                |      | urement    |        | Enclo                   |         |  |
| estimate sheet:   | ☐ Not req      | uired   |                |      | ate sheet  | :      | ☐ Not er                | nclosed |  |
| PO/WO no. PO/WO date:   |                |         |                |      |            |        |                         |         |  |
| Remarks:  |                |         |                |      |            |        |                         |         |  |
|   |                |         |                |      |            |        |                         | 4       |  |
|   |                |         |                |      |            |        |                         |         |  |
|   |                |         |                |      |            |        |                         |         |  |
|   |                |         |                |      |            |        |                         |         |  |
| Approved by Project Manager Approved by Design Team Approved by M |                |         |                |      | M.D.       |        |                         |         |  |
| Date: Date:   |                |         |                |      |            | Dat    | Date:                   |         |  |
| Sign: July Subject must be se                                     | W              | Sign:   |                |      |            | Sig    | n:                      |         |  |

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 turnley inhorated and provided in the contractors. are not required for turnkey jobs where guideline rates are clearly given.

| ESTIMATE SHEET         |   |          |       |                        |                      |                 |
|------------------------|---|----------|-------|------------------------|----------------------|-----------------|
| Company Name:          | GVRC  |          |       |                        | Approved by T Madhu  | T Madhu         |
| Project:               | Innopolis   |          |       |                        | -                    |                 |
| Work Description:      | 4545 extra urinal wroks                               |          |       | Work date              | Work date 15.09.2023 | 10.10.2023      |
| Name of the Contractor | md.Khudoos  |          |       |                        |                      |                 |
| Prepared By            | Sufyan  |          |       |                        |                      |                 |
| Date:                  | 25.09.2023  |          |       |                        | 部 景學                 |                 |
| S No. Item Head        | Item Description                                      | Quantity | Units | contractor asking rate | circular rate        | Item Head Total |
| 1 4545                 | 4545 ground to third floor extra urinal fitting works | <b>%</b> | no's  | 4000/ each             |                      | 32000           |
|                        |   |          |       |                        | 7.00                 |                 |
|                        |   |          |       |                        | 100                  |                 |
|                        |   |          |       |                        |                      |                 |
|                        |   |          |       |                        |                      |                 |



| ESTIMATE SH    | HEET      |                         |          | T     | T    | Т           |                 |
|----------------|-----------|-------------------------|----------|-------|------|-------------|-----------------|
| Company Name:  |           | GVRC                    |          |       |      | Approved by | T Madhu         |
| Project:       |           | Innopolis               |          |       |      |             |                 |
| Work Descript  | ion:      | 4545 extra urinal works |          |       |      |             |                 |
| Name of the Co | ontractor | Md. Khudoos             |          |       |      |             |                 |
| Prepared By    |           | Sufyan                  |          |       |      |             |                 |
| Date:          |           | 30.10.2023              |          |       |      |             |                 |
| S No.          | Item Head | Item Description        | Quantity | Units | Rate | Amount      | Item Head Total |
|                | 1 Terrace | 4545 extra urinal works |          | no's  | 4000 | 32,000.00   | )               |