1709209412_Intl memo no. 918-001_ - Anx B - Work Completion Report_28-02-2024_ver3.xlsx

Date: Notes: 1. Ti required i.e., de	Approved by project	Remarks:			10	9	000	7	6	5 +	_ ω	2	•	_	SI. No.	WO date	WO no.	Block no.	Project/site	Company
ins sheet replaces installation retails cannot be entered above. 2.D member to be taken. 7. Direction of the control of the co	y project manager												work	E block safety net	Unit/floor no			E block safety net work	GMR	MRMILLP
Date: Notes: 1. This sheet replaces installation report and advice for credit to contractors. 2. This word form must be typed. 3. Use this form even if work order is not issued. 4. Attach measurement and estimate sheets only if Notes: 1. This sheet replaces installation report and advice for credit to contractors. 2. This word form must be typed. 3. Use this form even if work order is not issued. 4. Attach measurement and estimate sheets only if Notes: 1. This sheet replaces installation report and advice for credit to contractors approval is required. 6. For bill amount less than 10k any QS team member may sign and in place of director sign of required i.e., details cannot be entered above. 5. For bill amount greater than 10k QS manager and directors approval is required. 6. For bill amount less than 10k any QS team member may sign and in place of director sign of required i.e., details cannot be entered above. 5. For bill amount greater than 10k QS manager and directors approval is required. 6. For bill amount less than 10k any QS team member may sign and in place of director sign of required. 6. For bill amount less than 10k any QS team member may sign and in place of director sign of required i.e., details cannot be entered above. 5. For bill amount greater than 10k QS manager and directors approval is required. 6. For bill amount less than 10k any QS team member may sign and in place of director sign of required. 6. For bill amount less than 10k any QS team member may sign and in place of director sign of required. 6. For bill amount less than 10k any QS team member may sign and in place of director sign of required. 6. For bill amount less than 10k any QS team member may sign and in place of director sign of required. 6. For bill amount less than 10k any QS team member may si	, Sign:	Approved by OS team												Safety net brackets cutting & welding works	Details of work	Contractor bill no.	Work done to date		Nature of work	Name of contractor
form must be typed. 3. Use this form even it rectors approval is required. 6. For bill amounts, Sachin (for Vivopolis), B. anand Kumar (), Sachin (for vivopolis), B. anand Kumar ()		п	Tot												Qty	?	10.08.24	10.08.24	Frableation work	B. Thirupathi raju
Date: 'work order is not issued. 4. Attach mut less than 10k any QS team mem for NGH +NRK). 8. Entry of rate of 11 Contractors must submit or	Sign:	Approved by Director/E&D team	Total amount including taxes for work done	Add GST @										250.00 Kgs MSF182	Offits	Unite Rate ID	GCT hill required?	WO issued?	M-codex bill ID	Dr site hills reg
measurement and estima ber may sign and in place D is mandatory. 9. This iginal bills at HO (can be		&D team	for work done	@ 18.00%	Total									20.00	Ivano	Rate				23 08 24 23 08 24
ate sheets only if to of director sign of sheet must be sent sent by courier).			5,000		5,000	g and a second								5,000		Amount				

1	S No.	Date:	Prepared By	Contractor Name:	Work Description:	Project:	Company Name:	ESTIMATE SHEET
IND Habication Work	Item Head		y	Name:	iption:		ame:	SHEET
welding	Item Description Safety net brackets cutting &	23.08.24	Nagendar	B. Thirupathi raju	Frabication work	Gulmohar Residency	MRMLLP	
200.00 Kgs	Quantity							
Ngs	Units							
20.00	Rate					Sign:	Approved by: Ahmed	1
oun'c	Amount						Ahmed	

1	S No.	CNI	Date:	Prepared By	Contract	Work De	Project:	Company Name:	MEASU
MS frabication work	Item Head			d By	Contractor Name:	Work Description:		y Name:	MEASUKEMENI SHEET
Safety net brackets cutting & welding	Item Description		23.08.24	Nagendar	B. Thirupathi raju	Frabication work	Gulmohar Residency	MRMLLP	
10.00	Length	Α							
1.00	Width	В							
1.00	Height	С					Sign:	Approved by:	
25.00	Nos	D						by:	
250	Quantity	E = AxBxCxD						Ahmed	
kgs	Units	H							

Allowance for Consumables

B. Thirupathi raju Mallapur Hyderabad

Date: 23.08.2024.

In favor of:

MRMLLP

Project / Site:

Gulmohar Residency

Location:

Mallapur

Type of Work:

Frabication work

Towards:

Allowance of consumables

S No.	Description Spring Control of the Co	Amount
1.	Brief description of work done: Towards E block safety net bracket cutting & welding work Total amount =5,000/	Rs.1,000/-
	Work done from date 01.08.24 to date 10.08.2024.	

Amount in words: One thousand rupees Only.

Sign:	
51gm	

Bill for Equipment Allowance

B. Thirupathi raju Mallapur Hyderabad

Date: 23.08.2024.

In favor of:

MRMLLP

Project / Site:

Gulmohar Residency

Location:

Mallapur

Type of Work:

Frabication work

Towards:

Allowance of equipment.

S No.	Description	Amount
1.	Brief description of work done: Towards E block safety net bracket cutting & welding work Total amount =5,000/	Rs.2,000/-
	Work done from date 01.08.24 to date 10.08.2024.	

Amount in words: Two thousand rupees Only.

Sign:				
0	-		and the same	

Allowance for Labour charges

B. Thirupathi raju Mallapur Hyderabad

Date: 23.08.2024.

In favor of:

MRMLLP

Project / Site:

Gulmohar Residency

Location:

Mallapur

Type of Work:

Frabication work

Towards:

Allowance of labour charges.

S No.	Description	Amount
1.	Brief description of work done: Towards E block safety net bracket cutting & welding work Total amount =5,000/ Work done from date 01.08.24 to date 10.08.2024.	Rs.2,000/-

Amount in words: Two thousand rupees Only.

Sign:	