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

Notes: 1. This required i.e., detail respective E&D1 within 2 workin	Date:	Sign:	Approved by	Remarks:				10	9	8	.7	6	5	4	3	2	1	SI. No.	WO date	WO no.	Block no.	Project/site	Company
sheer replaces installation reports cannot be entered above. 5. Is cannot be entered above. 7. Director member to be taken. 7. Director g days of work completion (wi	1:1	- June	Approved by project manager	•													Scaffolding work	Unit/floor no			Clubhouse	GMR	MRMILLP
ort and advice for credit to For bill amount greater to r include – Soham, Anan th or without contractors			•														Clubhouse duct						
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 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 o respective E&D member to be taken. 7. Director include – Soham, Anand Mehta (for GHT + GMR), Sachin (for Vivopolis), B. anand Kumar (for NGH + NRK). 8. Entry of rate ID is mandatory. 9. This sheet must be sent within 2 working days of work completion (with or without contractors bill). 10. Contractors to send scanned copy of bill to site and QS by email. 11. Contractors must submit original bills at HO (can be sent by courier).	Date:	Sign:	Approved by QS team															Details of work	Contractor bill no.	Work done to date	Work done from date	Nature of work	Name of contractor
must be typed. 3. Use approval is required in the following specific specif																				15.07.23	01.07.23	Scaffolding work	M. Naresh
Jse this form even if wor red. 6. For bill amount le b, B. anand Kumar (for No o site and QS by email.					Total a												170.78	Qty				work	
k order is not issuess than 10k any (IGH + NRK). 8.1	Date:	Sign:	Approved by Director/E&D team		mount inclu												sft	Units	GST bill required?	WO issued?	M-codex bill ID.	Dt. site bills reg.	Sl. No. site bills reg.
ed. 4. Attach mee 2S team member Entry of rate ID is ust submit origin			Director/E&		ding taxes fo	Add GST @											SCF119	Rate ID	uired?		ID.	reg.	ills reg.
ork order is not issued. 4. Attach measurement and estimate sheets only if less than 10k any QS team member may sign and in place of director sign of NGH +NRK). 8. Entry of rate ID is mandatory. 9. This sheet must be sent 11. Contractors must submit original bills at HO (can be sent by courier).			D team		amount including taxes for work done		Total										7.00	Rate				24.08.24	
te sheets only if of director sign of theet must be sent sent by courier).					8,195		8,195										8,195	Amount					

	-	D 110.	ON S	Date:	Prepared by	Contractor Name:	Work Description:	Tiofort.	Project:	MEASURI
ocarroiding work	Conffelding	неш пеад	The Hand		y	Name:	ription:		vame:	MEASUREMENT SHEET
Clubhouse duct	2	Item Description		24.08.24	Nagendar	M. Naresh	Scaffolding work	Gulmohar Residency	MRMLLP	
20.54		Length	A							
1.00	の方面を	Width	В							
57.00		Height	С					Sign:	Approved by:	
1.00		Nos	D						by:	
1,170.78 sft		Quantity	E= AxBxCxD						Ahmed	
S sft		Units	F							September 1

1	S No.		Date:	Prepared By	Contractor Name:	Work Description	Project:	Company Name:	ESTIMATE SHEET
Scaffolding work	Item Head		· N	8у	Name:	ription:		Name:	E SHEET
Clubhouse duct	Item Description	M. LOOGOWA	24 08 24	Nagendar	M. Naresh	Scaffolding work	Gulmohar Residency	MRMLLP	
1,170.78	Quantity								
3 ft	Units								
7.00	Rate						Sign:	Approved	
8,195	Amount							Ahmed	