	Date:	Sign:	Approved b	Remarks:				10	9	%	7	6	4		3		2		1	SI No.	WO date	WO no.	Block no.	Project/site	Company
his sheet replaces installat			Approved by project manager																	Unit/floor no			north/ south block	gv1	crescentia lab pvt ltd
This short 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		7	Well or	1 / 24							1.5		general door fxing for stilt floor gents bathroom	pump room door frame making	pump room door fixing	ramp frame repair making	ramp store door fixing	chemical door frame	door fixing in chemical block for store safety	Details of work					
contractors, 2. This word f	Date:	Sign:	Approved by QS team									*	ents bathroom						tore safety	f work	Contractor bill no.	Work done to date	Work done from	Nature of work	Name of contractor
orm must be ty																				Qty		29-09-	03-02-	carp	Sad
yped. 3	I	150	_		Total amo					_	_	_	-	-	-	-	-	3	3	y	(29-09-2024 WO	-2024 N	carpenter Dt. si	liq ali S
Use this fo	Date:	Sign:	Approved b		amount in	Add							No's	No's	No's	No's	No's	No's	No's	Units	GST bill required?	WO issued?	03-02-2024 M-codex bill ID.	It. site bills reg.	Sadiq ali Sl. No. site bills reg.
orm even if work			Approved by Director/E&D team		unt including taxes for work done	Add Transpotation @							cp140	cp137	cp140	cp137	cp140	cp137	cp140	Rate ID	uired?	?	HD.	reg.	bills reg.
order is not			team		r work done	25.00%	Total						500.00	400.00	500.00	400.00	500.00	400.00	500.00	Rate					
issued. 4. Attach					6,250	1,250	5,000						500	400	500	400	500	1,200	1,500	Amount					523

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 of 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 Notes: 1. This sheet replaces installation report and advice for credit to contractors. 2. 1 ms word form must be typed. 3. Use this form even it work order is 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).

MEASUREMENT SHEET	Company Name:	Project:	Work Description:	Name of the Contractor	Prepared By	Date:		S No.	1							
NT SHEET			r.	tractor				Item Head	door fixing							
	crescentia	gvl	Carpenter work	sadiq ali	sultan	14-09-2023		Item Description		door fixing in chemical block for store safety	chemical door frame	ramp store door fixing	ramp frame repair making	pump room door fixing	pump room door frame making	general door fxing for stilt floor gents bathroom
							Α	Length		-	1	1			1	
			+				В	Width		-	-	1	-	1	_	,
		Approved	1				C	Height		-	_	-	-		_	
	+	+	+	\dagger	+	1	D	No's	+	3	3	-			-	-
	GW Galla addu	SV Subba ready					E=AxBxCxD	Quantity	,	3	3					_
	+	+	\dagger	\dagger	\dagger	+		Units	T	T	T	No's	No's	No's	No's	No's