Anx B - Work Completion Report

mate sheets only if	asurement and estin	ed 4 Attach me	orb order is not issu	2 The thir form even if work order is not issued 4. Attach measurement and estimate sheets only if			81016	Date.
			Date:		Date:			Data:
			Sign:		Sign:		Minde	Sign:
	&D leam	Approved by Director/E&D team	Approved by		Approved by QS team		Approved by project manager	Approved b
								Remarks:
68,151	or work done	ding taxes fo	Total amount including taxes for work done	Total:				
68,151	Total							
								10
								9
								8
								7
								6
								5
-)-	00:10	CWIDT		138,00 811	ice)	South east lift(silt to terrace)		4
5.279	38 25	CW/10A		127.00 311	ernal	South block east side external		ယ
4,674	36.55	CW189	eff	127 00		South clock south size of		7
10,782	36.55	CW189	sft	295.00 sft	ternal	South block south side external		٠ -
4/,41/	38.33	CW189	sft	1230.00	wall	Site south side compound wall		-
Allount	Kate	Kate ID	Units	Qty	Details of work		Unit/floor no	SI. No.
A 100 100 100 100 100 100 100 100 100 10		ired?	GST bill required?		Contractor bill no.			WO date
			20-09-2024 WO issued ?	20-09-2024	Work done to date			WO no.
		D.	25-08-2024 M-codex bill ID.	25-08-2024	Work done from date	ock	North & South block	Block no.
30-09-2024		g.	Dt. site bills reg	Plastering	Nature of work P		GV-ONE	Project/site
30 00 3034		ls reg.	Sl. No. site bills reg.	N.Darma Rao	Name of contractor N		Crescentia	Company
7.7.7								

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 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 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 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 by courier).

		4	ပ	2	_	S No.			Prenared Ry.	Contractor:	Work	Troject.	Project	Compa	MEAS
			3 South block east side external	2 South block south side external	Site south side compound wall Plastering other compound is	Item Head		ca by.	ed Ry.		Work Description :			Company Name:	MEASUREMENT SHEET
	Elit Halic alld existing Wall gap plasterin	Tiff frame and original	Plastering up to buttom	Plastering on to button	Plastering (other company is 1)	Item Description		K.Praveen	N.Dailia Kao	N Downs D.	Plastering	GV-ONE	Crescentia	Crossontia	
	23.00	85.25	147.50	205.00	Length	A									
	1.00	1.00	1.00	1.00	Width	B	Date:		Work end date:	Work start date:	Sign:	2	Approved by:		
	1.00	1.50	2.00	6.00	Height	1			d date:	irt date:		4 20)	d by:		
	6.00	1.00	1.00	1.00	No's	D	30-09-2024	30 00	20-09-2024	25-08-2024		Cuponic	Subhareddy		
	138.00 sft	127.88 sft	295.00 sft	1230.00 sft	Quantity u	E=AxBxCxD F	.4		4	4		udy	ddv		
	ft	ft	ft	ft	units	T									
					Item Head Total	G= Sum of F									

GV-ONE
CICIE
Plastering
Praveen.K
23-09-2024
Item Description
Item Description Plastering(out side) Il Plastering up to buttom Plastering up to buttom
wall gap plastering
Item Description II Plastering (out side) al Plastering up to buttom I Plastering up to buttom Lift frame and existing wall gap plastering