Anx B - Work Completion Report

		ate:	Date:			Date:	Date: Date: D		Date:
			Sign:			Sign:			Sign:
	team	pproved by Director/E&D team	Approved by		QS team	Approved by QS team	er	Approved by project manager	Approved by
							led	Work completed	Remarks:
16,290	r work done	mount including taxes for work done	l amount incl	Total a					
0		Add GST @							Ī
16,290	Total								
									13
									12
									111
									10
									9
									8
									7
9,060			No's	1,812		ledger 2m	ms cuplock signature paint ledger 2m		6
4,830			No's	966		ledger 1.2m	ms cuplock signature paint ledger 1.2m		5
210	5		No's	42		verticle 2.1m	ms cuplock signature paint verticle 2.1m		4
1,035			No's	207		verticle2.6m	ms cuplock signature paint verticle2.6m		3
1,155			No's	231		verticle 3m	ms cuplock signature paint verticle 3m		2
0					n ms pipe	d white colour or	Painting of signature yellow and white colour on ms pipe scaffolding work.	AMS801	1
Amount	Rate	Rate ID	Units	Qty		Details of work	Details	Unit/floor no	Sl. No.
								Sultan	Prepare by.
	YES		GST bill required?			Contractor		28-09-2024	WO date
	YES		WO issued?		15-03-2025	Work done			WO no.
		ID.	M-codex bill ID.		13-02-2025	Work done		4554 block	Block no.
	15-03-2025	reg.	Dt. site bills reg.		painter	Nature of		4554 block	Project/site
		ills reg.	Sl. No. site bills reg.		vivek kumar	Name of contractor	M/s. AMTZ MEDPOLIS SQUARE 4554 PVT. LTD	M/s. AMTZ ME 4554 PVT. LTD	Company

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 sent by courier). 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 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

Company Name:	Ms. AMTZ MEDPOLIS SOUARE PAT: 1 TD			Approved by: N. Loela Venkatesh
Project:	AMS 4554			
Work Description:	cuplock fixing			
Propared By	Sultan ali			
Date:	12-03-2025			
S No. Item Head	Item Description			
1 cuplock	painting signature for cuplock	Units	Units Rate	-
3	O Guaranto relatory			
	Verticle 3m 231	no's	no's	no's 1,155,00
u	verticle 2.6m 207	no's	no's	
-	verticle 2.1m	no's	no's 5.00	See
5	ledger 1.2 966	no's	1	
6	ledger 2m 1812	no's	no's	

The state of the s	THE RESIDENCE OF THE PROPERTY							
S No.	Item Head	Item Description	Length	Width	Height	Nos.	Quantity	Units
Company Name:		M/s. AMTZ MEDPOLIS SQUARE PVT. LTD.		Approved by:		N. Loela Venkatesh	katesh	
Project:		AMS 4554		Sign:				
Work Description:	n:	cuplock scaffolding		Work start date:	ile:	24-01-2025		
Contractor:		vivek kumar		Work end date:	e:	11-01-2025		
Propaned By:		Sultan ali		Date:		24-01-2025		
			^	В	c	D	E=AxBxCxD	F
S No.	Item Hend	Item Description	Length	Width	Height	Nos.	Quantity	Units
-		painting signature for cuplock						
2		verticle 3m	1	1	1	231	231	no's
3		verticle 2.6m	1 1	1	1	207	207	no's
4		verticle 2.1m	1	1	1	42	42	no's
5		ledger 1.2	1	1	1	966	966	no's
6		ledger 2m	1	1	1	1812	1812	no's

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