

Quality Control Check Report. Stage: After Finishing Stage II (Apartments)

| | | | | |
|---------------------------|----------------|-------------------------------|---|--------|
| Flat No | D-425 | Other | SI. No. | 31047 |
| Company | Rmv-II | Project | Phase | II |
| Prepared by | P. Sri Kumar | Sign | Date | 3/8/18 |
| Project Manager | K. Shish Kumar | Sign | Date | 3/8/18 |
| Previous stage report no. | 29725 | Report filed and signed by PM | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Checked By MD on | MD Sign | For filling | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

Recommendation:

Stop further work. Submit ATR on QC report to QC team. Proceed only after recheck by QC.

Stop further work. Proceed with work after submitting ATR on QC report to QC team.

Proceed with further work only after making corrections pointed out in the QC report. ATR not required.

Proceed with further work. ATR not required.

Inspection should be done after:

- Completion of flooring, bathroom/utility tiles, doors & beading, first coat of paint.
- Completion of windows, grills, electrical wiring, switches must be done in next stage
- False ceiling must be completed before flooring.
- Kitchen platform, granite and dado must be completed where modular kitchen is not provided.
- Provide granite soffit for main door and balconies in this stage.

Miscellaneous check:

| | | | |
|---------------------------------------|--|---|--|
| Main door fixed with lock & stopper | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Granite soffit for balcony required | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Granite soffit for balcony provided | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Balcony granite soffit workmanship | <input type="checkbox"/> Good <input type="checkbox"/> Avg <input type="checkbox"/> Poor | Balcony granite soffit edge polishing | <input type="checkbox"/> Good <input type="checkbox"/> Avg <input type="checkbox"/> Poor |
| Granite soffit for main door required | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Granite soffit for main door provided | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Main door granite soffit workmanship | <input type="checkbox"/> Good <input type="checkbox"/> Avg <input type="checkbox"/> Poor | Main door granite soffit edge polishing | <input type="checkbox"/> Good <input type="checkbox"/> Avg <input type="checkbox"/> Poor |
| False ceiling to be provided? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | False ceiling workmanship | <input type="checkbox"/> Good <input type="checkbox"/> Avg <input type="checkbox"/> Poor |

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| Tiling & granite work | | Rate the quality of (Good ✓, Avg. X, Poor - needs correction XX, NA) | | | | | | | | | | | | |
|-----------------------|-----------------------------|--|--|-------------------|----------------------|---------------------------|----------------------------|-------------------------------------|----------------------------|---------------------|---|------------------------|-------------------------|----------------------------------|
| S No | Room | Workmanship of tiling | White cement filling around CPVC lines | Corners finishing | Finishing near doors | Finishing on top of tiles | Finishing near ventilators | Step at bathroom entrance / utility | Step for shower / pot wash | Tile joint grouting | Granite platform finishing and edge polishing | Granite platform slope | Granite platform height | Finishing under granite platform |
| 1 | Toilet 1 NA | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 2 | Toilet 2 ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 3 | Toilet 3 ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 4 | Toilet 4 ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 5 | Wash basin in dining area ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 6 | Kitchen ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 7 | Utility ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 8 | Other ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 9 | Other ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Remarks | | Note: Provision for Modular Kitchen provided | | | | | | | | | | | | |

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| S No | Room | Flooring & painting | Rate the quality of (Good ✓, Avg. X, Poor - needs correction XX, NA) | | | | | | | | | | | | | | | | |
|------|---------------------|---------------------|--|---------------------------------|--------------------|----------------------|---------------------------|---------------------------------|---------------|----------------|---|-------------------------------|--|---------------|---|---|---|---|---|
| | | | Color variation of floor tiles | Flooring workmanship & grouting | Skirting size (3") | Skirting workmanship | Plastering above skirting | Plastering & finishing of walls | Crack filling | Loft Finishing | General quality of painting & finishing | Door & frame painting quality | Door beading, Juppam and painting quality. | Edge building | | | | | |
| 1 | Bedroom 1 | NA | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 2 | Bedroom 2 | NA | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 3 | Bedroom 3 | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 4 | Drawing | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 5 | Dining | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 6 | Lobby 1 | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 7 | Utility / balcony 1 | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 8 | Utility / balcony 2 | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 9 | Utility / balcony 3 | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 10 | Kitchen | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 11 | Other | | | | | | | | | | | | | | | | | | |
| 12 | Other | | | | | | | | | | | | | | | | | | |
| | | | Remarks | | | | | | | | | | | | | | | | |