

PURCHASE DIVISION  
Advice for approval for credit to supplier

①

|                                |  |                          |  |                  |  |
|--------------------------------|--|--------------------------|--|------------------|--|
| Date: 7/03/23                  |  | Prepared by: S. JaySudha |  | Serial no. 15457 |  |
| Supplier name: Prabul Sanitary |  | Project: Sov LLP         |  | HO inward no.    |  |
| Firm/Company: Sov LLP          |  | PO/WO No. 97752          |  | HO received date |  |
| PO/WO date: 2-03-23            |  |                          |  | Scan ID.         |  |

| Sl no. | Bill no. | Bill date | Bill amount | Original attached                                                   |
|--------|----------|-----------|-------------|---------------------------------------------------------------------|
| 1.     | 1244     | 3-03-23   | 566 /-      | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| 2.     |          |           |             | <input type="checkbox"/> Yes <input type="checkbox"/> No            |
| 3.     |          |           |             | <input type="checkbox"/> Yes <input type="checkbox"/> No            |
| 4.     |          |           |             | <input type="checkbox"/> Yes <input type="checkbox"/> No            |

|                                                                                                                                                                                                                                        |                               |                                                                                                                                                                 |                                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| Amount A – Bills total (Excluding Transport & Hamali Charges):                                                                                                                                                                         |                               |                                                                                                                                                                 | 566 /-                                                              |
| Proof of delivery by way of: <input type="checkbox"/> DCs/bill <input type="checkbox"/> Steel report <input type="checkbox"/> RMC pour report <input type="checkbox"/> Solid block report <input type="checkbox"/> Installation report |                               |                                                                                                                                                                 |                                                                     |
| MRN nos.: 118087                                                                                                                                                                                                                       | Proof of delivery matches MRN |                                                                                                                                                                 | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Amount B –Other Credits : Transportation charges                                                                                                                                                                                       |                               |                                                                                                                                                                 | —                                                                   |
| Amount C –Other Debits :                                                                                                                                                                                                               |                               |                                                                                                                                                                 | —                                                                   |
| Amount D (D=A+B-C) – Amount to be credited to the supplier:                                                                                                                                                                            |                               |                                                                                                                                                                 | 566 /-                                                              |
| Amount E – PO / WO value:                                                                                                                                                                                                              |                               |                                                                                                                                                                 | 566 /-                                                              |
| Amount F – Difference (A – E):                                                                                                                                                                                                         |                               |                                                                                                                                                                 | —                                                                   |
| Quantity received as per PO /WO                                                                                                                                                                                                        |                               | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Excess received <input type="checkbox"/> Short received <input type="checkbox"/> Part received |                                                                     |
| Close PO / WO                                                                                                                                                                                                                          |                               | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No – wait for balance material <input type="checkbox"/> Other                                  |                                                                     |
| Payment – due date                                                                                                                                                                                                                     |                               | 13-03-23                                                                                                                                                        |                                                                     |
| Remarks: final bill                                                                                                                                                                                                                    |                               |                                                                                                                                                                 |                                                                     |

| Approved by    | Purchase Officer | Purchase Manager | M D        | Accountant | Accounts Manager |
|----------------|------------------|------------------|------------|------------|------------------|
| Name:          |                  | V. eew           |            |            |                  |
| Sign:          |                  |                  |            |            |                  |
| Date           |                  |                  |            |            |                  |
| Approval limit | Upto 20k         | Above 20k        | Above 100k | Upto 20k   | Above 20k        |

Notes: 1. In case amount to be credited to supplier and the bills total does not match, accountants to prepare JV for debit or credit. 2. This set should only have 5 documents i.e., advice to credit to supplier, original bill, proof of delivery, original purchase order with barcode, original requisition. 3. Do not attach additional documents like weighment slips, RMC batch reports, duplicate documents, Eway bills, test reports, etc. 4. In Amount A, exclude transport, Hamali charges, etc., and instead include in Amount B. 5. This report must reach HO within one working day of approval by purchase officer/purchase manager.

(ORIGINAL FOR RECIPIENT)

GSTIN/UIN : 36ADBFS3288A2Z7  
State Name : Telangana, Code : 36

Self

Cherlapally

|            |       |
|------------|-------|
| Total      |       |
| Tax Amount | 86.40 |
|            | 86.40 |



Authorised Signatory

This is a Computer Generated Invoice



## Purchase Order

Page(s) 1 Of 1

02-03-2023 16:10:34



97752

16.02.23 5:15:19

From Company : **Silver Oak Villas LLP**  
5-4-187/3 & 4, IInd Floor, M.G.Road, Secunderabad - 500003  
G S T No. : 36ADBFS3288A2Z7

### Supplier Details

Praful Sanitary  
3-6-138/5, Himayat Nagar, Hyderabad.

**GSTIN** 36ACWPG864A1ZG  
65526886.

40077300

9849624797

|                   |            |        |
|-------------------|------------|--------|
| <b>Doc No</b>     | 97752      | 212138 |
| <b>Doc Date</b>   | 02-03-2023 |        |
| <b>Quote No</b>   | Nil        |        |
| <b>Quote Date</b> | 02-03-2023 |        |
| <b>SupplyType</b> | Supply     |        |

**Kind Attn : Mr. Ashish Gupta**

Purchase Order for the Supply of following Items.

| Item Name                                                                                 | Qty  | Rate   | Dis%  | GST   | Amount        |
|-------------------------------------------------------------------------------------------|------|--------|-------|-------|---------------|
| 1 666000 - SACP-Sanitary-CP - SS Sink--Nirali -<br>500X430mm - Nos<br>only waste coupling | 2.00 | 300.00 | 20.00 | 18.00 | 566.40        |
| <b>Total Order Value . . .</b>                                                            |      |        |       |       | <b>566.40</b> |

Rupees : Five Hundred Sixty Six and Paise Fourty Only.

### Terms and Conditions :-

**Specification / Brand** As per details given in the quotation.

**Payment Terms** Within 30 days of delivery.

**Tax** Inclusive of all taxes

**Delivery Date** Within 7 days

**Delivery Location** Silver Oak Villas Part III  
Sy .No.11,12,14,15,16,17,18 , 294  
Phone. 0

**Penalty For Delay** Nil

**Transportation Cost** Transport cost shall be borne by us.

**Warranty** Nil

**Advance Paid** Nil

**Other Terms** We reserve the right to reject items not conforming to quality and specifications.Above order for villa no. 103 sanitary fitting purpose.

**Completion Date** NA

**Measurment** Nil

**Security** Nil

**Remarks** Original invoice +copy of proof of delivery is required to process invoice for payment .DO NOT send original invoice to site.Original invoice must be

For **Silver Oak Villas LLP**

Authorised Signatory

Name : \_\_\_\_\_

Name : \_\_\_\_\_

Date : \_\_\_\_/\_\_\_\_/\_\_\_\_

Accepted the above Terms And Conditions

For **Praful Sanitary**



|                                                                   |                                                                                |                                                        |                       |
|-------------------------------------------------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------|-----------------------|
| Requisition Form                                                  |                                                                                | Date: 28-02-2023                                       |                       |
| Company Name: Silver Oak Villas LLP                               |                                                                                | Time: 14:50                                            |                       |
| Site & Phase : Sov III                                            |                                                                                |                                                        |                       |
| Unit No./Block No. For villa no 103 Sanitary Fitting work purpose |                                                                                | Req. No. 212138                                        |                       |
| Supplier:                                                         |                                                                                | ID No. 84746                                           |                       |
| Material required before date: urgent                             |                                                                                | Qty required                                           | Qty available at site |
| S No                                                              |                                                                                | Order Qty                                              | Inward No Inward Date |
| 1                                                                 | SACP4804-Sanitary CP-Wall Hung EWC with seat cover-White---Nos                 | 3                                                      | 3                     |
| 2                                                                 | SACP3298-Sanitary CP-Wall Hung WC Rack Bolts--Fisher--Pairs                    | 3                                                      | 3                     |
| 3                                                                 | PLUM9961-Plumbing-PVC Connection---600mm-Nos 257900                            | 8                                                      | 8                     |
| 4                                                                 | SACP6660-Sanitary CP-Concealed flush tank plate--Gebrille--Nos 987100          | 3                                                      | 3                     |
| 5                                                                 | SACP7647-Sanitary CP-PVC Waste Pipe----Nos 257600                              | 4                                                      | 4                     |
| 6                                                                 | SACP6705-Sanitary CP-Rack Bolts - Wash Basin-Fisher--Pairs 242100              | 4                                                      | 4                     |
| 7                                                                 | PLCP6006-Plumbing-CP Wash Basin Waste Coupling ----Nos 238100                  | 4                                                      | 4                     |
| 8                                                                 | SACP1613-Sanitary CP-SS Sink--Nirali-500X430mm-Nos (only waste coupling) 97752 | 2                                                      | 2                     |
| 9                                                                 |                                                                                |                                                        |                       |
| 10                                                                |                                                                                |                                                        |                       |
| Remarks: For villa no 103 Sanitary Fitting work purpose           |                                                                                |                                                        |                       |
| Engineer                                                          |                                                                                | Project Manager                                        | Purchase Manager      |
| Prepared By: B.Meenakshi                                          |                                                                                | APPROVED 01 MAR 2023 P.VENKATESHWARLU MANAGER PURCHASE |                       |
| Approved By: K.Purshotham                                         |                                                                                | MD                                                     |                       |
| Sign & Date:                                                      |                                                                                | 28-02-2023                                             |                       |

(DUPLICATE FOR TRANSPORTER)

SECTION

VOICE

SUNNIT SALES LTD.

INWARD

No. 87262

Date: 7/3/23

Sign: L

P. A. DIST.