

## Form for closure of purchase order

|                                                                                                                                                                                                                                     |                                                                                     |                                                                       |                                                                       |                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------------------------------------|-----------------------|
| PO no.: 96879                                                                                                                                                                                                                       | PO date: 6/8/2023                                                                   | Req. no.: 178948                                                      | Advice Scan ID                                                        |                       |
| Barcoded PO available <input type="checkbox"/> Y/ <input type="checkbox"/> N                                                                                                                                                        | Invoice original available <input type="checkbox"/> Y/ <input type="checkbox"/> N   | Copy available <input type="checkbox"/> Y/ <input type="checkbox"/> N | POD available <input type="checkbox"/> Y/ <input type="checkbox"/> N  |                       |
| Data required from site/engineers:                                                                                                                                                                                                  |                                                                                     |                                                                       |                                                                       |                       |
| MRN nos. related to PO                                                                                                                                                                                                              |                                                                                     |                                                                       |                                                                       |                       |
| <input checked="" type="checkbox"/> Part material received.                                                                                                                                                                         | <input type="checkbox"/> Full material received.                                    | <input type="checkbox"/> Material not received.                       |                                                                       |                       |
| <input type="checkbox"/> Close PO – Balance material will be re-ordered by new requisition.                                                                                                                                         |                                                                                     |                                                                       |                                                                       |                       |
| <input type="checkbox"/> Cancel PO. Material not required.                                                                                                                                                                          | <input type="checkbox"/> Cancel PO. Material will be re-ordered by new requisition  |                                                                       |                                                                       |                       |
| <input type="checkbox"/> Keep PO open. Material required.                                                                                                                                                                           | <input checked="" type="checkbox"/> Keep PO open. Work under progress.              |                                                                       |                                                                       |                       |
| Remarks by engineer: AMC started from 6/2/23 and ends on 5/2/24.                                                                                                                                                                    |                                                                                     |                                                                       |                                                                       |                       |
| Notes: 1. Provide details of material received by way of separate attachment. 2. Provide scanned copy of DCs/proof of delivery + PO. 3. Provide copies of invoices if available. 4. This entire set to be scanned and sent to Ravi. |                                                                                     |                                                                       |                                                                       |                       |
| Prepared by: Duyen                                                                                                                                                                                                                  | Sign: [Signature]                                                                   | Date: 10/4/2023                                                       |                                                                       |                       |
| Data required from accounts:                                                                                                                                                                                                        |                                                                                     |                                                                       |                                                                       |                       |
| <input type="checkbox"/> Checked with E&D for receipt of bills.                                                                                                                                                                     |                                                                                     |                                                                       |                                                                       |                       |
| <input checked="" type="checkbox"/> Bills not received against this PO.                                                                                                                                                             | <input type="checkbox"/> Part bill received against this PO.                        | <input type="checkbox"/> All bills received against this PO.          |                                                                       |                       |
| <input type="checkbox"/> Advance paid against this PO                                                                                                                                                                               | Amount paid:                                                                        | Date of payment:                                                      |                                                                       |                       |
| Details of part bill received:                                                                                                                                                                                                      |                                                                                     |                                                                       |                                                                       |                       |
| Sl. No.                                                                                                                                                                                                                             | Bill no.                                                                            | Bill date                                                             | Bill amount                                                           | Cr. given to supplier |
| 1.                                                                                                                                                                                                                                  |                                                                                     |                                                                       |                                                                       |                       |
| 2.                                                                                                                                                                                                                                  |                                                                                     |                                                                       |                                                                       |                       |
| 3.                                                                                                                                                                                                                                  |                                                                                     |                                                                       |                                                                       |                       |
| Remarks by Accountants:                                                                                                                                                                                                             |                                                                                     |                                                                       |                                                                       |                       |
| Prepared by: Sangeetha                                                                                                                                                                                                              | Sign: [Signature]                                                                   | Date: 11/4/23                                                         |                                                                       |                       |
| Notes: 1. POs/WOs issued for turnkey works - may have been processed by E&D. Check before filling the above.                                                                                                                        |                                                                                     |                                                                       |                                                                       |                       |
| Prepared by:                                                                                                                                                                                                                        | Sign:                                                                               | Date:                                                                 |                                                                       |                       |
| Remarks by Ravi + details of bills to be approved:                                                                                                                                                                                  |                                                                                     |                                                                       |                                                                       |                       |
| Sl. No.                                                                                                                                                                                                                             | Bill no.                                                                            | Bill date                                                             | Bill amount                                                           | MRN no.               |
| 1.                                                                                                                                                                                                                                  |                                                                                     |                                                                       |                                                                       |                       |
| 2.                                                                                                                                                                                                                                  |                                                                                     |                                                                       |                                                                       |                       |
| 3.                                                                                                                                                                                                                                  |                                                                                     |                                                                       |                                                                       |                       |
| Remarks: Swimming PO - AMC so Monthly basis Invoice will submit by vendor.                                                                                                                                                          |                                                                                     |                                                                       |                                                                       |                       |
| Prepared by: Ravi                                                                                                                                                                                                                   | Sign: [Signature]                                                                   | Date: 14/4/23                                                         |                                                                       |                       |
| Advice by MD - action to be taken.                                                                                                                                                                                                  |                                                                                     |                                                                       |                                                                       |                       |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                 | <input type="checkbox"/> Get certified bill from supplier (not original).           |                                                                       | <input type="checkbox"/> Prepare bill in SSLLP for material supplied. |                       |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                 | Thereafter, prepare advice for credit to supplier and send to Soham for processing. |                                                                       |                                                                       |                       |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                 | <input type="checkbox"/> Close PO                                                   | <input type="checkbox"/>                                              | <input type="checkbox"/> Keep PO open. Material awaited               |                       |
| <input type="checkbox"/>                                                                                                                                                                                                            | Accounts to be reconciled with supplier. Get supplier's ledger.                     |                                                                       |                                                                       |                       |
| Remarks:                                                                                                                                                                                                                            |                                                                                     |                                                                       |                                                                       |                       |
| Approved by: Soham                                                                                                                                                                                                                  | Sign:                                                                               | Date:                                                                 |                                                                       |                       |



**Purchase Order**

From Company :

**Mayflower Platinum Welfare Association**

Sy.82/1 Mallapur Main Road, Mallapur

GST No. :

**Supplier Details**

|                                         |            |                         |        |
|-----------------------------------------|------------|-------------------------|--------|
| Pragati Consultants                     | Doc No     | 96879                   | 178948 |
| #23-6-87, Hari Bowli, Hyderabad-500065. | Doc Date   | 06-02-2023              |        |
|                                         | Quote No   | Nil                     |        |
| <b>GSTIN</b> 36ACWPA0921A1Z4            | Quote Date | 23-01-2023              |        |
| 65702402                                | SupplyType | Supply And Installation |        |
| 9848131574                              |            |                         |        |
| 24522715                                |            |                         |        |

**Kind Attn : Mr.Dheeraj Ananthoj**

Purchase Order for the Supply of following Items.

| Item Name                                                                                    | Qty   | Rate      | Dis% | GST   | Amount            |
|----------------------------------------------------------------------------------------------|-------|-----------|------|-------|-------------------|
| 1. 6213 - Miscellaneous - Annual Maintenance Contract - NA - Nos<br>Swimming pool- 12 months | 12.00 | 25,000.00 | 0.00 | 18.00 | 354,000.00        |
| Total Order Value . . .                                                                      |       |           |      |       | <b>354,000.00</b> |

Rupees : Three Lakh(s) Fifty Four Thousand Only.

**Terms and Conditions :-****Specification /**

Swimming pool maintenance contract, 12 months, includes the supply of Dosing chemicals- TCCA-90, Chlorine, Alum, Nets, Brushes, service person for filter operations, suction sweeping up to 2 hours daily.

**Payment Terms**

Rs. 29,500-00 to be paid monthly on submission of GST bill.

**Tax**

GST included in the above prices

**Delivery Date**

With in 3-4 days

**Delivery Location**

May Flower Platinum

Sy 82/1, Mallapur, Nacharam.

Phone. 7680971999

**Penalty For Delay**

Nil

**Transportation**

Included in the above prices

**Warranty**

Nil

For **Mayflower Platinum Welfare Association**

Authorised Signatory

Accepted the above Terms And Conditions

For **Pragati Consultants**

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

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

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

## Purchase Order

Page(s) 2 Of 2

10/04/2023 13:01:14

Original / Office Copy / Purchase Div Copy

**Advance Paid**

Nil

**Other Terms**

We reserve the right to reject items not conforming to quality and specifications, the above order is required for MFP swimming pool maintenance pupose

**Completion Date**

Nil

**Measurement**

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 invoices must be sent to HO office or purchase site office. Proof of delivery/DC can be sent by email.'

For **Mayflower Platinum Welfare Association**  
Authorised Signatory

Accepted the above Terms And Conditions  
For **Pragati Consultants**

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

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

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



# Purchase Order

Page(s) 1 Of 1

08-02-2023 11:25:51



From Company : **Mayflower Platinum Welfare Association**  
Sy.82/1 Mallapur Main Road, Mallapur  
G S T No. :

**Supplier Details**

Pragati Consultants  
#23-6-87, Hari Bowli, Hyderabad-500065.

**GSTIN** 36ACWPA0921A1Z4 24522715  
65702402 9848131574

|                   |                         |        |
|-------------------|-------------------------|--------|
| <b>Doc No</b>     | 96879                   | 178948 |
| <b>Doc Date</b>   | 06-02-2023              |        |
| <b>Quote No</b>   | Nil                     |        |
| <b>Quote Date</b> | 23-01-2023              |        |
| <b>SupplyType</b> | Supply And Installation |        |

**Kind Attn : Mr.Dheeraj Ananthoj**

Purchase Order for the Supply of following Items.

| Item Name                                                                                      | Qty   | Rate      | Dis% | GST   | Amount            |
|------------------------------------------------------------------------------------------------|-------|-----------|------|-------|-------------------|
| 1 6213 - Miscellaneous - Annual Maintenance Contract - NA<br>- Nos<br>Swimming pool- 12 months | 12.00 | 25,000.00 | 0.00 | 18.00 | 354,000.00        |
| <b>Total Order Value . . .</b>                                                                 |       |           |      |       | <b>354,000.00</b> |
| Rupees : Three Lakh(s) Fifty Four Thousand Only.                                               |       |           |      |       |                   |

**Terms and Conditions :-**

**Specification /** Swimming pool maintenance contract, 12 months, includes the supply of Dosing chemicals-TCCA-90, Chlorine, Alum, Nets, Brushes, service person for filter operations, suction sweeping up to 2 hours daily.

**Payment Terms** Rs. 29,500-00 to be paid monthly on submission of GST bill.

**Tax** GST included in the above prices

**Delivery Date** With in 3-4 days

**Delivery Location** May Flower Platinum  
Sy 82/1, Mallapur, Nacharam.  
Phone. 7680971999

**Penalty For Delay** Nil

**Transportation** Included in the above prices

**Warranty** Nil

**Advance Paid** Nil

**Other Terms** We reserve the right to reject items not conforming to quality and specifications, the above order is required for MFP swimming pool maintenance pupose

**Completion Date** Nil

**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 invoices must be sent to HO office or purchase site office. Proof of delivery/DC can be sent by email.'

Accepted the above Terms And Conditions

For **Mayflower Platinum Welfare Association**  
Authorised Signatory

For **Pragati Consultants**

Date : \_/\_/\_

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

# Estimate/Draft PO

Page(s) 1 Of 1

06-02-2023 16:28:59

Original / Office Copy / Purchase Div.Copy

From Company : **Mayflower Platinum Welfare Association**  
Sy.82/1 Mallapur Main Road, Mallapur  
GST No. :

To,  
Mr. Venkateshwarlu

## Supplier Details

Pragati Consultants  
#23-6-87, Hari Bowli, Hyderabad-500065.

GSTIN 36ACWPA0921A1Z4  
65702402

24522715  
9848131574

|            |                         |        |
|------------|-------------------------|--------|
| Doc No     | 96879                   | 178948 |
| Doc Date   | 06-02-2023              |        |
| Quote No   | Nil                     |        |
| Quote Date | 23-01-2023              |        |
| SupplyType | Supply And Installation |        |

Kind Attn : Mr.Dheeraj Ananthoj

Estimate/Draft PO for the Supply of following Items.

| Item Name                                                                                      | Qty   | Rate      | Dis% | GST   | Amount     |
|------------------------------------------------------------------------------------------------|-------|-----------|------|-------|------------|
| 1 6213 - Miscellaneous - Annual Maintenance Contract - NA<br>- Nos<br>Swimming pool- 12 months | 12.00 | 25,000.00 | 0.00 | 18.00 | 354,000.00 |
| Total Order Value . . .                                                                        |       |           |      |       | 354,000.00 |

Rupees : Three Lakh(s) Fifty Four Thousand Only.

## Terms and Conditions :-

Specification / Brand Swimming pool maintenance contract, 12 months, includes the supply of Dosing chemicals-TCCA-90, Chlorine, Alum, Nets, Brushes, service person for filter operations, suction sweeping up to 2 hours daily.

Payment Terms Monthly to pay Rs. 29,500-00 including GST for 12 months after submission of the bill.

Tax GST included in the above prices

Delivery Date With in 3-4 days

Delivery Location May Flower Platinum  
Sy 82/1, Mallapur, Nacharam.  
Phone. 7680971999

Penalty For Delay Nil

Transportation Cost Included in the above prices

Warranty Nil

Advance Paid Nil

Other Terms We reserve the right to reject items not conforming to quality and specifications, the above order is required for MFP swimming pool maintenance pupose

Completion Date Nil

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 invoices must be sent to HO office or purchase site office. Proof of delivery/DC can be sent by email.'



For **Mayflower Platinum Welfare Association**

Authorised Signatory

Name :

Accepted the above Terms And Conditions

For **Pragati Consultants**

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

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

# Requisition Form

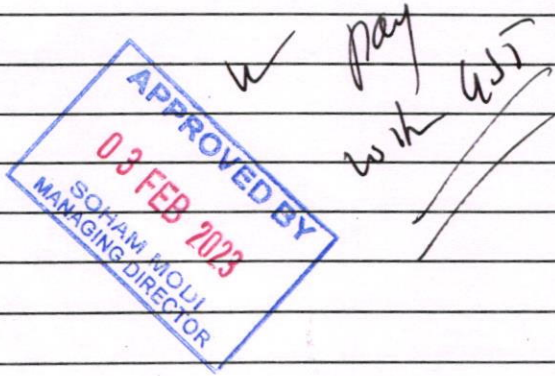
| Company Name:                             |                             | May flower Platinum Welfare association |          | Date:        |           | 06-2-2023        |  |
|-------------------------------------------|-----------------------------|-----------------------------------------|----------|--------------|-----------|------------------|--|
| Site & Phase :                            |                             | May flower Platinum Welfare association |          | Time:        |           | 11-45            |  |
| Supplier                                  |                             |                                         |          | Req. No.     |           | 178948           |  |
| Material required before date:            |                             | 09.02.2023                              |          | ID No.       |           | 84064            |  |
| No                                        | Description/Brand/Model No. | Size                                    | Quantity | Units        | Inward No | Date             |  |
| 1                                         | Swimming pool -AMC          |                                         | 1        | NO'S         |           |                  |  |
| 2                                         | 96879                       |                                         |          |              |           |                  |  |
| 3                                         |                             |                                         |          |              |           |                  |  |
| 4                                         |                             |                                         |          |              |           |                  |  |
| 5                                         |                             |                                         |          |              |           |                  |  |
| 6                                         |                             |                                         |          |              |           |                  |  |
| 7                                         |                             |                                         |          |              |           |                  |  |
| 8                                         |                             |                                         |          |              |           |                  |  |
| 9                                         |                             |                                         |          |              |           |                  |  |
| 10                                        |                             |                                         |          |              |           |                  |  |
| Remarks: Toward Swimming pool use purpose |                             |                                         |          |              |           |                  |  |
| Prepared By                               |                             | N.Divya                                 |          | Approved by  |           | K.Narendar Reddy |  |
| Sign. & Date                              |                             |                                         |          | Sign. & Date |           |                  |  |

Note: On receipt of material at site write inward number and date in last 2 columns.

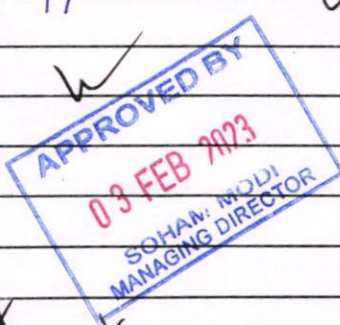
APPROVED  
06 FEB 2023  
P. PRABHAKAR  
Sr. MANAGER PURCHASE  
6/2/2023



MEMO

| DATE & FROM: | TO & REMARKS.                                                                                                                                                                                                                                                                                                                                                                         |
|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|              | AMC - MFB.                                                                                                                                                                                                                                                                                                                                                                            |
| Prashant     | Soham Sir,                                                                                                                                                                                                                                                                                                                                                                            |
| 3/2          | If we pay cash he can give bill without GST. If we pay by cheque or Online / RTGS without GST Bill cannot possible Sir.                                                                                                                                                                                                                                                               |
|              | Cindly suggest me.                                                                                                                                                                                                                                                                                                                                                                    |
|              |  <p>Handwritten signature and a blue rectangular stamp. The stamp contains the text: "APPROVED BY" (top), "03 FEB 2023" (middle, in red), and "SOHAM MOULI MANAGING DIRECTOR" (bottom). To the right of the stamp is a handwritten note: "pay with GST" with a checkmark and a large checkmark.</p> |

MEMO

| DATE & FROM:   | TO & REMARKS.                                                                                                                                                                  |
|----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Basphar<br>1/2 | Sohan Sir,<br>During past some order are per month & yearly kindly see the revised Company suggestion.                                                                         |
| Basphar<br>2/2 | Sohan Sir<br>Price negotiated with Dheera of M. 25000 + 18% Per month and it is the final price kindly suggest. ✓                                                              |
|                | <div style="text-align: center;">  </div> <p>See if<br/>can get<br/>bill without<br/>GST</p> |



| Procurement/Purchase comparison sheet |                                               |                                       |                  |             |           |                 |                  |               |                 |
|---------------------------------------|-----------------------------------------------|---------------------------------------|------------------|-------------|-----------|-----------------|------------------|---------------|-----------------|
| Prepared by: Prabhakar                |                                               |                                       |                  |             |           |                 |                  |               |                 |
| Date: 02-02-23                        |                                               |                                       |                  |             |           |                 |                  |               |                 |
| Swimming pool AMC comparison-MFP      |                                               |                                       |                  |             |           |                 |                  |               |                 |
| Sl. No.                               | SKU                                           | Net rate after discount + GST         | Duration- Months | ABI-Rate    | ABI-Total | S. Kistiah-Rate | S-Kistiah-Amount | Pragathi-Rate | Pragathi-Amount |
| 1                                     | Swimmingpool Maintenance for 12 months        | 12                                    | 17,000.00        | 2,04,000.00 | 19,500.00 | 2,34,000.00     | 29,500.00        | 3,54,000.00   |                 |
| 2                                     |                                               |                                       |                  |             |           |                 |                  |               |                 |
| 3                                     |                                               |                                       |                  |             |           |                 |                  |               |                 |
| 10                                    | Total:                                        |                                       |                  | 2,04,000.00 |           | 2,34,000.00     |                  | 3,54,000.00   |                 |
| Notes:                                |                                               |                                       |                  |             |           |                 |                  |               |                 |
| 1                                     | Material required for site:                   | MPL                                   |                  |             |           |                 |                  |               |                 |
| 2                                     | Details of requisition no., required by, etc: |                                       |                  |             |           |                 |                  |               |                 |
| 3                                     | Transport charges                             | Included                              |                  |             |           |                 |                  |               |                 |
| 4                                     | Delivery period                               | 1 day                                 |                  |             |           |                 |                  |               |                 |
| 5                                     | Advance                                       | 100% Advance                          |                  |             |           |                 |                  |               |                 |
| 6                                     | Payment terms                                 | NA                                    |                  |             |           |                 |                  |               |                 |
| 7                                     | Loading cost                                  | Included.                             |                  |             |           |                 |                  |               |                 |
| 8                                     | Unloading cost                                | Included.                             |                  |             |           |                 |                  |               |                 |
| 9                                     | Warranty                                      | NA                                    |                  |             |           |                 |                  |               |                 |
| 10                                    | Other term 1                                  | No GST Bill                           |                  |             |           |                 |                  |               |                 |
| 11                                    | Other term 2                                  | Daily 3 hours, weekly 6 days cleaning |                  |             |           |                 |                  |               |                 |
| 12                                    | Other term 3                                  | Included chemicals, brushes, nets     |                  |             |           |                 |                  |               |                 |

*Prabhakar*  
2/2/23

Swimming Pool-AMC- MEP.xlsx  
Sheet1

| Procurement/Purchase comparison sheet |                                               |                     |                               |           |                                       |                    |                                       |               |                                       |
|---------------------------------------|-----------------------------------------------|---------------------|-------------------------------|-----------|---------------------------------------|--------------------|---------------------------------------|---------------|---------------------------------------|
| Prepared by: Prabhakar                |                                               |                     |                               |           |                                       |                    |                                       |               |                                       |
| Date: 01-02-23                        |                                               |                     |                               |           |                                       |                    |                                       |               |                                       |
| Swimming pool AMC comparison-MFP      |                                               |                     |                               |           |                                       |                    |                                       |               |                                       |
| Sl. No.                               | SKU                                           | Duration-<br>Months | Net rate after discount + GST | ABI-Rate  | ABI-Total                             | S. K. Istiaah-Rate | S-K. Istiaah-<br>Amount               | Pragathi-Rate | Pragathi-Amount                       |
| 1                                     | Swimmingpool Maintenance for 12 months        | 12                  |                               | 17,000.00 | 2,04,000.00                           | 19,500.00          | 2,34,000.00                           | 30,680.00     | 3,68,160.00                           |
| 2                                     |                                               |                     |                               |           |                                       |                    |                                       |               |                                       |
| 3                                     |                                               |                     |                               |           |                                       |                    |                                       |               |                                       |
| 10                                    | Total:                                        |                     |                               |           | 2,04,000.00                           |                    | 2,34,000.00                           |               | 3,68,160.00                           |
| Notes:                                |                                               |                     |                               |           |                                       |                    |                                       |               |                                       |
| 1                                     | Material required for site:                   |                     |                               | MPL       |                                       |                    |                                       |               |                                       |
| 2                                     | Details of requisition no., required by, etc: |                     |                               |           |                                       |                    |                                       |               |                                       |
| 3                                     | Transport charges                             |                     |                               |           | Included                              |                    | Included                              |               | Included                              |
| 4                                     | Delivery period                               |                     |                               |           | 1 day                                 |                    | 1 day                                 |               | 1 day                                 |
| 5                                     | Advance                                       |                     |                               |           | 100% Advance                          |                    | 100% Advance                          |               | 100% Advance                          |
| 6                                     | Payment terms                                 |                     |                               |           | NA                                    |                    | NA                                    |               | NA                                    |
| 7                                     | Loading cost                                  |                     |                               |           | Included                              |                    | Included                              |               | Included                              |
| 8                                     | Unloading cost                                |                     |                               |           | Included                              |                    | Included                              |               | Included                              |
| 9                                     | Warranty                                      |                     |                               |           | NA                                    |                    | NA                                    |               | NA                                    |
| 10                                    | Other term 1                                  |                     |                               |           | No GST Bill                           |                    | No GST Bill                           |               | GST Bill                              |
| 11                                    | Other term 2                                  |                     |                               |           | Daily 3 hours, weekly 6 days cleaning |                    | Daily 3 hours, weekly 6 days cleaning |               | Daily 2 hours, weekly 6 days cleaning |
| 12                                    | Other term 3                                  |                     |                               |           | Included chemicals, brushes,nets      |                    | Included chemicals, brushes,nets      |               | Included chemicals, brushes,nets      |

APPROVED BY  
01 FEB 2023  
SOFAM, WCDI  
MANAGING DIRECTOR

1/2/23

Sathya  
25th  
month

MEMO

| DATE & FROM: | TO & REMARKS.                                                  |
|--------------|----------------------------------------------------------------|
| Basipakar    | Soham Sir.                                                     |
| 31/01        | Swimming Pool - AMC Quota for MPP kindly suggest me.           |
|              | ABI - Pandu is doing at low. Please advise me further Sir.     |
| Soham<br>h2  | Is this per                                                    |
| 1/2          | month!                                                         |
|              |                                                                |
| Basipakar    | Soham Sir.                                                     |
| 01/02        | The rates are per annum. month & <del>annum</del> yearly. Sir. |



Swimming Pool-AMC- MFP.xlsx  
Sheet1

| Procurement/Purchase comparison sheet |                                               |           |                               |                                       |             |                                       |                  |                                       |                 |
|---------------------------------------|-----------------------------------------------|-----------|-------------------------------|---------------------------------------|-------------|---------------------------------------|------------------|---------------------------------------|-----------------|
| Prepared by: Prabhakar                |                                               |           |                               |                                       |             |                                       |                  |                                       |                 |
| Date: 31-01-23                        |                                               |           |                               |                                       |             |                                       |                  |                                       |                 |
| Swimming pool AMC comparison-MFP      |                                               |           |                               |                                       |             |                                       |                  |                                       |                 |
| Sl. No.                               | SKU                                           | Qty (nos) | Net rate after discount + GST | ABI-Rate                              | ABI-Total   | S.Kistiah-Rate                        | S.Kistiah-Amount | Pragathi-Rate                         | Pragathi-Amount |
| 1                                     | Swimmingpool Maintenance                      | 1         | 2,04,000.00                   | 2,04,000.00                           | 2,34,000.00 | 2,34,000.00                           | 3,68,160.00      | 3,68,160.00                           |                 |
| 2                                     |                                               |           |                               |                                       |             |                                       |                  |                                       |                 |
| 3                                     |                                               |           |                               |                                       |             |                                       |                  |                                       |                 |
| 10                                    | Total:                                        |           | 2,04,000.00                   |                                       | 2,34,000.00 |                                       | 3,68,160.00      |                                       |                 |
| Notes:                                |                                               |           |                               |                                       |             |                                       |                  |                                       |                 |
| 1                                     | Material required for site:                   |           | MPL                           |                                       |             |                                       |                  |                                       |                 |
| 2                                     | Details of requisition no., required by, etc: |           |                               |                                       |             |                                       |                  |                                       |                 |
| 3                                     | Transport charges                             |           |                               | Included                              |             | Included                              |                  | Included                              |                 |
| 4                                     | Delivery period                               |           |                               | 1 day                                 |             | 1 day                                 |                  | 1 day                                 |                 |
| 5                                     | Advance                                       |           |                               | 100% Advance                          |             | 100% Advance                          |                  | 100% Advance                          |                 |
| 6                                     | Payment terms                                 |           |                               | NA                                    |             | NA                                    |                  | NA                                    |                 |
| 7                                     | Loading cost                                  |           |                               | Included                              |             | Included                              |                  | Included                              |                 |
| 8                                     | Unloading cost                                |           |                               | Included                              |             | Included                              |                  | Included                              |                 |
| 9                                     | Warranty                                      |           |                               |                                       |             |                                       |                  |                                       |                 |
| 10                                    | Other term 1                                  |           |                               | No GST Bill                           |             | No GST Bill                           |                  | GST Bill                              |                 |
| 11                                    | Other term 2                                  |           |                               | Daily 3 hours, weekly 6 days cleaning |             | Daily 3 hours, weekly 6 days cleaning |                  | Daily 2 hours, weekly 6 days cleaning |                 |
| 12                                    | Other term 3                                  |           |                               | Included chemicals, brushes,nets      |             | Included chemicals, brushes,nets      |                  | Included chemicals, brushes,nets      |                 |

31/1/23



**ABI & JEMI**  
Facilities Management Services

# ABI & JEMI

## FACILITIES & MANAGEMENT SERVICES

Date: 31/01/2023

TO: MAY FLOWER PLANTINUM.

Sub: Quotation for Swimming pool maintenance.

Dear Sir I'm Mr Pandu Proprietor of ABI & JEMI Facilities Management specialist in swimming pool maintenance & chemicals suppliers.

1. Swimming pool Monthly maintenance with chemicals & cleaing Charges(Day by Day) = 17.000 (Seventeen Thousand)

- 1. Section sweeping
- 2. Pool brushing
- 3. Wall brushing
- 4. Maintened PH & Chlorine levels
- 5. Filter Operation

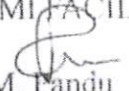
Every Tuesday weekly half

Including supply and dosing of required chemicals like TCCA-90, clorine, Alum and Acid and other required materials.

We assure that we keep the swimming pool neat & clean.

Thanking You Sir,

From ABI & JEMI FACILITIES MANAGEMENT

  
M. Pandu

9063175201,9703537201

Security Guards | House Cleaning | House Keeping | Swimming Pool Maintenance | Electrician | Plumber | Carpenter  
Painter | All Events | Bathroom Cleaning | Interior Designing | Home Automation | Dance & Music Painting Coaching

Plot No. 79, 80, New Bhavani Nagar, Dammaiguda, Nagaram, Hyderabad. Mail : [ajservices333@gmail.com](mailto:ajservices333@gmail.com)

**Cell : 9703537201, 9848838203, 8519839571, 9441807567**





# SUNKARI KRISHNAIAH GOUD

Swimming Pool Water Treatment Solutions

H NO:8-7-13/8/1, Sai Colony, Rajendra Nagar, Katedhan, Rangareddy, Telangana - 500077

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To

Modi Properties,  
Mayflower Platinum,  
Mallapur, Hyd-76.

## Sub: Swimming Pool Maintenance Reg:

### Work Description:

- Swimming Pool Brushing.
- Vacuum Cleaning.
- Net Cleaning.
- Filter Back Wash Rins.
- Water Purification with Chlorine & Alum.
- Daily 3 Hours / Weekly 6 Days.

Estimated Cost: Including Chemical: 19500/-  
Excluding Chemical : 13000/-

### Exciting Sites:

Mayflower Grande, Mallapur.  
Nilgiri Homes, Rampally.  
Silver Oak Bungalows, Cherlapalli.  
Paramount Avenue, Nagaram.

With Regards

S. Krishna

Sunkari Krishnaiah Goud  
Ph No: 8096101618

భారత ప్రభుత్వం  
Government of India

Issue Date: 02/11/2011



సుంకరి కృష్ణాలాల్ గౌడ్  
Sunkari Krishnalah Goud  
పుట్టిన తేదీ/DOB: 17/04/1982  
పురుషుడు/ MALE

3214 9606 5140

VID : 9169 2312 1657 2916

నా ఆదార్, నా సర్దింపు

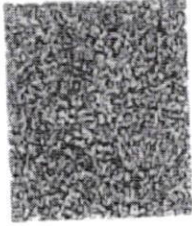
భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ  
Unique Identification Authority of India

సంకెట్ కోడ్: 500077

సంకెట్ కోడ్: 500077

పునరామోదానం: సుంకరి జంగాల గౌడ్, 8-7-13/8/1,  
సాయి కాలనీ, సాయి గ్రామీణ హై స్కూల్ పక్కం,  
రాజేంద్రనగర్ మండలం, కేతెడన్, కె.వి. రంగారెడ్డి,  
తెలంగాణ - 500077

Address:  
C/O: Sunkari Jangalah Goud, 8-7-13/8/1, Sai  
Colony, Near Sai Grammar High School,  
Rajendranagar Mandal, Katedhan, K.V.  
Rangareddy,  
Telangana - 500077



3214 9606 5140

VID : 9169 2312 1657 2916

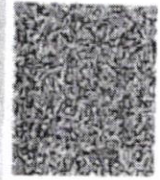
1847 | help@uidai.gov.in | www.uidai.gov.in

आयकर विभाग  
INCOME TAX DEPARTMENT

भारत सरकार  
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड  
Permanent Account Number Card  
**EOXPS9464D**



नाम / Name  
SUNKARI KRISHNAIAH GOUD

पिता का नाम / Father's Name  
SUNKARI JANGALAH GOUD

जन्म की तारीख /  
Date of Birth  
17/04/1982

S. V. S. S. S. S. S.

हस्ताक्षर / Signature

20082022

# pragati consultants

SWIMMING POOLS\*PLUMBING\*CIVIL ENGINEERS

L1.Lattitude Tower, Timberlake colony, Off Gachibowli road, Hyderabad  
Regd off. 23-6-87, Haribowli, Hyderabad Ph : 65702402, Mobile : 9848131574,

Email: pragatipools@gmail.com

WWW.PRAGATIPOOLS.COM

TO,

DATE: 23-01-23

MODI PROPERTIES AND INVESTEMENTS (P) LTD,

M.G ROAD, SECUNDRABAD

KIND ATTN: MR.NARENDER REDDY

SUB: MAYFLOWER PLATINUM- SWIMMING POOL AMC QUOTE.

Sir,

We are here by forwarding the Quote for the swimming pool maintainance contract.

For MAYFLOWER PLATINUM SWIMMING POOL

## 1) SWIMMING POOL MAINTANANCE

### (OUR SCOPE OF WORK)

\* Includes supply and dosing of required chemicals like TCCA-90

Chlorine,Alum, and other required materials like nets, brushes, etc

- Including services of one person for FILTER OPERATIONS/  
SUCTION SWEEPING and other cleanings for upto 2 hours.  
Daily to keep the pool neat ,clean and hygienic.
- With one day weekly off

THE TOTAL COST OR ALL THE ABOVE MATERIALS  
AND SERVICES PER MONTH WILL BE Rs (28,000-00)  
(RUPEES TWENTY EIGHT THOUSANDS ONLY).

NOTE: GST EXTRA @ 18%

GSTN: 36ACWPA0921A1Z4

*Handwritten notes:*  
Negotiated  
26,000/-  
25,000/-  
Per month





## **pragati consultants**

**SWIMMING POOLS\*PLUMBING\*CIVIL ENGINEERS**

**L1.Lattitude Tower, Timberlake colony, Off Gachibowli road, Hyderabad**

**Regd off. 23-6-87, Haribowli, Hyderabad Ph : 65702402, Mobile : 9848131574,**

**Email: pragatipools@gmail.com**

**WWW.PRAGATIPOOLS.COM**

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**NOTE: \* The above cost does not include any**

- **COACHING SERVICES./LIFE GUARD SERVICES /HOUSE KEEPING( DECK AREA)**
- 

- **FILTER TO BE SWITCHED OFF BY SITE SECURITY AFTER 4 HOURS**
- **CONTRACT SHOULD BE FOR A MINIMUM PERIOD OF 12 MONTHS**
- **PAYMENT TO BE MADE ON OR BEFORE 5<sup>th</sup> OF EVERY MONTH.**

Thanking you,

**For PRAGATI CONSULTANTS**

**(DHEERAJ ANANTHOJ).**