Internal memo no. 903/35/A Annexure - B

RMC pour report

Company/ firm:		AMTZ Medpolis Square 702 pvt.ltd		Block No:	AMS702
Project:		AMS702		Flat / Villa no:	AMS702
Supplier:		Ratnadhar infra		Slab no:	M25
Requisition nos:		20250619027		A. Estimated quantity:	75M3
PO nos.:		20250619033		B. Requisition quantity:	75M3
Sign of Security		Sign of Admin	Sign of Project Manger	C. Actual quantity poured	24M3 Used on 28-04-25,8M3
				D. Difference (C-A)	43M3

Details of RMC pour

Sl. No	Date	Time of dispatch from RMC plant	Time of receipt at site	Time of pour	Quantity poured (Cum)	Dc No. / Batch no.	Specified wt @2400 kgs/m3	Measured weight (kgs)	Short fall in weight in kgs	Deduction for shortfall in Rs.	7 day cube test strength in kN/m2	28 days cube test strength in kN/m2
1	22-05-2025	11:00	11:25	11:30	7	6672	16800	17,080	-280			
2	22-05-2025	15:15	15:30	15:45	1	6676	2400	2,520	-120			
			Total		**8M3**		**19,200**	**19,600**	**-400**			
Remarks		Balanced quantity to be use later										

Note: 1. Report to be sent on a daily basis to p urchase@modiproperties.com and r eport-audit@modiproperties.com. 2. Report must be prepared during pour and not later. 3. Report must be sent within one working day. 4. Multiple report can be sent for one PO. 5. Weigh all vehicles. 6. 6 cubic meters vehicle should have a net weight of 14,110 kgs @ 2,400kgs/ m3. If the shortfall is more than 50 kgs per load purchase to debit supplier shortfall amount on pro-rata basis. 7. Site to calculate shortfall. 8. Maintain original report + weighment slips + pour reports + test reports + photographs at site.

Yasanthi CONC
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RATNADHAR INFRA (P) LTD.
AMTZ CAMPUS

Visakhapatnam, AP-531021

ORIGINAL	
DUPLICATE	
TRIPLICATE	

Delivery Challan

S.No. of Challan Order :RDIAMTZ2526--6672			Transport Mode: TRANSIT MIXER
DATE: 22-05-2025			AP07TM 6678
RATNADHAR INFRA			
State: ANDHRA PRADESH	37		AMTZ

Detail of Receiver

Address : AMTZ MEDPOLIS SQUARE 702 PVT LTD

State:ANDHRA PRADESH	Code	37

S. No.	Description of Goods	HSN code	UOM	Qty	Rate	Amount	Taxable Value
1	GRADE-M25	38245010	CUM	7			
Total							
Total Invoice amount in words				7			

Bank Details

Authorised signatory

INWARD	
Inward No: 16	Dt: 22-5-25
MRN No:	Dt:
Received By: Security	Sign: E. Kalyan Raju
AMTZ MEDPOLIS SQUARE 702 PVT LTD	