

PURCHASE DIVISION
Advice for approval for credit to supplier

Date:	09/01/2021	Prepared by:	MINISH
PO/WO no.	72579.	PO / WO Date.	01/12/2020
Supplier Name	Pratul Sanitary.	PO/WO amount	9,060/-
Firm/Company	Nilgiri Estates.	Project	NE.
Sl. No.	Bill No.	Bill Date	Bill amount
1	636.	10/12/2020.	9,060/-
2			
3			
4			

Amount A – Bills total(Excluding Transport & Hamali Charges):				9,060/-
Sl. No.	DC No	DC. Date	MRN No.	DC matches MRN
1.			87091	☒ Yes ☐ No
2.				☐ Yes ☐ No
3.				☐ Yes ☐ No

Amount B –Other Credits : Transportation charges		
Amount C –Other Debits :		
Amount D (D=A+B-C) – Amount to be credited to the supplier:		9,060/-
Amount E – PO / WO value:		9,060/-
Amount F – Difference (A – E): GST-18%		Nil
Quantity received as per PO / WO	☒ Yes ☐ Excess received ☐ Short received ☐ Other (explained below)	
Is difference between PO / Bill acceptable?	☒ Yes ☐ No (explained below)	
Excess / short material received	☒ Approved within acceptable limits ☐ No (explained below)	
Close PO / WO?	☒ Yes ☐ No – wait for balance material ☐ No (explained below)	
Advance paid / PDC given (deduct when paying)	☐ Yes – Rs. /- ☒ No	
Payment – due date	16/01/2021.	

Remarks:							
Approved by	Purchase Officer	Purchase Manager	Procurement Manager	MD	Accounts – receiver of bill	Accountant	Accounts Manager
Sign:			APPROVED				
Date			09 JAN 2021				
			MINISH PARIKH				

Notes: 1. In case amount to be credited to supplier does not match prepare JV for debit or credit. 2. Attach additional sheets if quantity of bills or DCs is more than the space provided. Clearly mark the space provided with 'see attachment'. 3. Purchase Officer can approve Pos/Wos upto Rs. 10,000/-, Purchase Manager or Procurement Manager to approve all bills from 10,000/- to 1,00,000/- . 4. Attach JV, Office copy of PO/WO, DCs and bills to this advice. 5. In Amount A, exclude transport, Hamali charges, etc and instead include in Amount B. 6. To be approved by accounts manager if bill value exceeds Rs. 10,000/- 7. MD to approve all bills above 1,00,000/-

GST INVOICE

(ORIGINAL FOR RECIPIENT)

Praful Sanitary3-6-429/6, SRI SAI TOWER,
St.No.4 HIMAYAT NAGAR**HYDERABAD**

GSTIN/UIN: 36ACWPG4864A1ZG

State Name : Telangana, Code : 36

E-Mail : prafulsanitary@gmail.com

Buyer

Nilgiri Estates5-4-187/3&4, IInd Floor, M.G. Road
Secunderabad

GSTIN/UIN : 36AAHFN0766F1ZA

State Name : Telangana, Code : 36

Invoice No.	Dated
PS/20-21/ 636	10-Dec-2020
Delivery Note	
Invoice	
Supplier's Ref.	Other Reference(s)
	Credit
Buyer's Order No.	Dated
72579	1-Dec-2020
Despatch Document No.	Delivery Note Date
Invoice	10-Dec-2020
Despatched through	Destination
Self	Rampally

SI No.	Description of Goods and Services	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	75mm Pvc FTA	3917	18 %	4 No:	56.30	No:	30 %	157.64
2	75mm CF Adaptor	3917	18 %	4 No:	475.00	No:	20 %	1,520.00
3	75mm Hdpe Pipe	3917	18 %	30 No:	250.00	No:	20 %	6,000.00
								7,677.64
								690.99
								690.99
								0.38

Output CGST
Output SGST
ROUNDING OFF

INWARD	
In ward No: 2233A	Dt: 04/01/21
MRN No: 87091	Dt: 04/01/21
Received By: <i>[Signature]</i>	Sign: <i>[Signature]</i>
Nilgiri Estates	

Total

38 No:

₹ 9,060.00

E. & O.E

Amount Chargeable (in words)

Indian Rupees Nine Thousand Sixty Only

HSN/SAC	Taxable Value	Central Tax Rate	Central Tax Amount	State Tax Rate	State Tax Amount	Total Tax Amount
3917	7,677.64	9%	690.99	9%	690.99	1,381.98
99		9%		9%		
Total	7,677.64		690.99		690.99	1,381.98

Tax Amount (in words) : Indian Rupees One Thousand Three Hundred Eighty One and Ninety Eight paise Only

Company's PAN : ACWPG4864A

Declaration

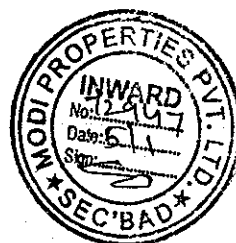
We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

for Praful Sanitary

Authorized Signatory

SUBJECT TO HYDERABAD JURISDICTION

This is a Computer Generated Invoice



Purchase Order

Page(s) 1 Of 1

01-12-2020 3:21:18 PM

Original



72579

25.11.20 1:07:27

From Company : **Nilgiri Estates**
5-4-187/3 & 4, IInd Floor, M.G.Road, Secunderabad - 500003.
G S T No. : 36AAHFN0766F1ZA

Supplier Details

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

GSTIN 36ACWPG864A1ZG
65526886.

40077300

9849624797

Doc No	72579	175024
Doc Date	01-12-2020	
Quote No	Nil	
Quote Date	01-12-2020	
SupplyType	Supply	

Kind Attn : Mr. Ashish Gupta

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 10234 - Plumbing - PVC - FTA - NA - Nos 75 mm	4.00	56.30	30.00	18.00	186.02
2 7331 - Plumbing - HDPE - Elbow - other - nos 75 mm Male Adopter	4.00	475.00	20.00	18.00	1,793.60
3 7103 - Plumbing - HDPE - Pipe - 6Kgs pressure - 3 In - mtrs 75 mm	30.00	250.00	20.00	18.00	7,080.00
Total Order Value . . .					9,059.62
Rupees : Nine Thousand Fifty Nine and Paise Sixty Two Only.					

Terms and Conditions :-

Specification / Brand As per details given in the quotation.

Payment Terms After Delivery & Production of bill

Tax All taxes included in above price.

Delivery Date Next Day

Delivery Location Nilgiri Estate
Sy.No.143/133/134/135/136, Rampally Village.
Phone. 9030931172, 8297349480

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 V.no.99-100 purpose.

Completion Date Nil

Measurment Nil

Security Nil

Remarks

For **Nilgiri Estates**

Authorised Signatory

Accepted the above Terms And Conditions

For **Praful Sanitary**Name : 

Name : _____

Date : __/__/__

Requisition Form

Company Name:		NILGIRI ESTATES		Date:		22.10.2020	
Site & Phase :		NILGIRI ESTATE		Time:		12:40	
Supplier				Req. No.		175024	
Material required before date:				ID No.		61868	

No	Description	Size	Quantity	Units	Inward No	Date
1	3" pvc fap	75mm	04	Nos		
2	HDPE male adopter	3"	04	Nos		
3	HDPE PIPE	3"	30	mtrs		
4						
5						
6						
7						
8						
9						
10						

Remarks: - for laying hdpe pipe in leach pit area from villa 99 -100 purpose..

Prepared By	Vijay	Approved by	
Sign. & Date	22.10.2020	Sign. & Date	

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

APPROVED
26 OCT 2020
P. PRABHAKAR
Sr. MANAGER PURCHASE

Company Name:				Date:			
Site & Phase :				Time:			
Supplier				Req. No.			
Material required before date:		Urgent		ID No.			

No	Description	Size	Quantity	Units	Inward No	Date
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Remarks:

Prepared By		Approved by	
Sign. & Date		Sign. & Date	

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