

PURCHASE DIVISION  
Advice for approval for credit to supplier

|                                                               |                                                                                     |                                                                                                                                                                           |                     |
|---------------------------------------------------------------|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| Date:                                                         | 17.4.21                                                                             | Prepared by:                                                                                                                                                              | T Bhasker           |
| PO/WO no.                                                     | 75285                                                                               | PO / WO Date.                                                                                                                                                             | 10/3/21             |
| Supplier Name                                                 | Santhosh Tarpaan                                                                    | PO/WO amount                                                                                                                                                              | 8496                |
| Firm/Company                                                  | NE                                                                                  | Project                                                                                                                                                                   | NH                  |
| Sl. No.                                                       | Bill No.                                                                            | Bill Date                                                                                                                                                                 | Bill amount         |
| 1                                                             | 145                                                                                 | 22/3/21                                                                                                                                                                   | 8496                |
| 2                                                             |                                                                                     |                                                                                                                                                                           |                     |
| 3                                                             |                                                                                     |                                                                                                                                                                           |                     |
| 4                                                             |                                                                                     |                                                                                                                                                                           |                     |
| Amount A – Bills total(Excluding Transport & Hamali Charges): |                                                                                     |                                                                                                                                                                           | 8496                |
| Sl. No.                                                       | DC No                                                                               | DC. Date                                                                                                                                                                  | MRN No.             |
| 1.                                                            |                                                                                     |                                                                                                                                                                           | 91053               |
| 2.                                                            |                                                                                     |                                                                                                                                                                           |                     |
| 3.                                                            |                                                                                     |                                                                                                                                                                           |                     |
| Amount B –Other Credits :Transportation charges               |                                                                                     |                                                                                                                                                                           | -                   |
| Amount C –Other Debits :                                      |                                                                                     |                                                                                                                                                                           | -                   |
| Amount D (D=A+B-C) – Amount to be credited to the supplier:   |                                                                                     |                                                                                                                                                                           | 8496                |
| Amount E – PO / WO value:                                     |                                                                                     |                                                                                                                                                                           | 8496                |
| Amount F – Difference (A – E): GST-18%                        |                                                                                     |                                                                                                                                                                           | -                   |
| Quantity received as per PO /WO                               |                                                                                     | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Excess received <input type="checkbox"/> Short received <input type="checkbox"/> Other (explained below) |                     |
| Is difference between PO / Bill acceptable?                   |                                                                                     | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (explained below)                                                                                     |                     |
| Excess / short material received                              |                                                                                     | <input checked="" type="checkbox"/> Approved – within acceptable limits <input type="checkbox"/> No (explained below)                                                     |                     |
| Close PO / W?O                                                |                                                                                     | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No – wait for balance material <input type="checkbox"/> No (explained below)                             |                     |
| Advance paid / PDC given (deduct when paying)                 |                                                                                     | <input type="checkbox"/> Yes – Rs. /- <input checked="" type="checkbox"/> No                                                                                              |                     |
| Payment – due date                                            |                                                                                     | 23/4/21                                                                                                                                                                   |                     |
| Remarks:                                                      |                                                                                     |                                                                                                                                                                           |                     |
|                                                               |                                                                                     |                                                                                                                                                                           |                     |
| Approved by                                                   | Purchase Officer                                                                    | Purchase Manager                                                                                                                                                          | Procurement Manager |
| Sign:                                                         |  |                                                                                                                                                                           |                     |
| Date                                                          | 17.4.21                                                                             |                                                                                                                                                                           |                     |

Notes: 1. In case amount to be credited to supplier and the bills total 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/-

**TAX-INVOICE****SANTHOSH TARPAULIN**

# 2-9-39/7/3, Forzenguda,  
Suryanagar, Old Alwal,  
Medchal, Malkajgiri District - 500 010.  
Telangana State

**GSTIN :36ATWPA1307P1ZC**

Email id: santhoshtarp@gmail.com

Cell: 9642662732

Bank Account : AXIS BANK

Acc.No.919020039284737

IFSC CODE :UTIB0001378

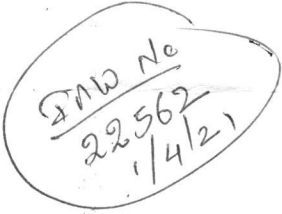
To NILGIRI ESTATES  
5-4-187/3&4 IInd floor MG ROAD  
SECUNDERABAD 500003

**GSTIN No. 36AAHFN0766F1ZA**Invoice No: **145**

Invoice Date: 22/03/2021

P.O.No.74989/156348

P.O.Date: 20.02.2021

| Sl. No. | Descriptions                                                                                                                                  | Code SAC HSN | Qty         | Rate  | Amount Rs. Ps. |
|---------|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------|-------|----------------|
| 1       | HDPE TARPAULIN<br>(uv stabilized )<br>SIZE 18 X 12<br><br> | 3926         | SFT<br>1440 | @ 5/- | 7,200.00       |

**Rupees in words EIGHT THOUSAND FOUR  
HUNDERD NINETY SIX only**

**Total :: 7,200.00****CGST @ 9 % :: 648.00****SGST @ 9 % :: 648.00****IGST 18% ::****adjust ::****Grand Total :: 8496.00**

Receiver Signature &amp; Seal

**For SANTHOSH TARPAULIN****Authorized Signatory**

Santhosh TarPaulin

NUGIRI ESTATES

22/3/21

HDPE TarPaulin

PO No 74989

1440 SFT

|                                 |                          |
|---------------------------------|--------------------------|
| INWARD                          |                          |
| Inward No: 22562                | Dt: 1/4/21               |
| MKN No: 91053                   | Dt:                      |
| Received By: <i>[Signature]</i> | Sign: <i>[Signature]</i> |
| Nigiri Estates                  |                          |

# Purchase Order

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10-Mar-21 12:21:43 PM



75285

04.03.21 12:20:51

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

**Supplier Details**

Santosh Tarpaulin  
2-9-39/7/3, Forzenguda, Suryanagar, Old Alwal, Medical Malkagiri Dist  
-500010

**GSTIN** 36ATWPA1307P1ZC

9642662732

|                   |            |        |
|-------------------|------------|--------|
| <b>Doc No</b>     | 75285      | 175191 |
| <b>Doc Date</b>   | 10-03-2021 |        |
| <b>Quote No</b>   | Nil        |        |
| <b>Quote Date</b> | 20-02-2021 |        |
| <b>SupplyType</b> | Supply     |        |

**Kind Attn : Santosh Kumar**

Purchase Order for the Supply of following Items.

| Item Name                                                                                     | Qty      | Rate | Dis% | GST   | Amount          |
|-----------------------------------------------------------------------------------------------|----------|------|------|-------|-----------------|
| 1 6010 - Miscellaneous - Plastic Blue Sheet - 18 ft x 12 ft - sft<br>HDPE UV stablized- 2 non | 1,440.00 | 5.00 | 0.00 | 18.00 | 8,496.00        |
| <b>Total Order Value . . .</b>                                                                |          |      |      |       | <b>8,496.00</b> |
| Rupees : Eight Thousand Four Hundred Ninty Six Only.                                          |          |      |      |       |                 |

**Terms and Conditions :-**

|                              |                                                                                                                                 |
|------------------------------|---------------------------------------------------------------------------------------------------------------------------------|
| <b>Specification / Brand</b> | As per details given in the quotation.                                                                                          |
| <b>Payment Terms</b>         | After Delivery & Production of bill                                                                                             |
| <b>Tax</b>                   | Inclusive of all taxes                                                                                                          |
| <b>Delivery Date</b>         | Next Day.                                                                                                                       |
| <b>Delivery Location</b>     | Nilgiri Estate<br>Sy.No.143/133/134/135/136, Rampally Village.<br>Phone. 9030931172                                             |
| <b>Penalty For Delay</b>     | Nil                                                                                                                             |
| <b>Transportation Cost</b>   | Transport cost shall be borne by us.                                                                                            |
| <b>Warranty</b>              | Nil                                                                                                                             |
| <b>Advance Paid</b>          | Nil                                                                                                                             |
| <b>Other Terms</b>           | We reserve the right to reject items not conforming to quality and specifications. Above order for feeder box covering, Purpose |
| <b>Completion Date</b>       | Nil                                                                                                                             |
| <b>Measurment</b>            | Nil                                                                                                                             |
| <b>Security</b>              | Nil                                                                                                                             |
| <b>Remarks</b>               |                                                                                                                                 |

For **Nilgiri Estates**

Authorised Signatory

Name :

Accepted the above Terms And Conditions

For **Santosh Tarpaulin**

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

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

# Estimate/Draft PO

Page(s) 1 Of 1

27-Feb-21 1:57:37 PM

Original / Office Copy / Purchase Div.Copy

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

**Supplier Details**

Santosh Tarpaulin  
2-9-39/7/3, Forzenguda, Suryanagar, Old Alwal, Medical Malkagiri Dist  
-500010

**GSTIN** 36ATWPA1307P1ZC

9642662732

|                   |            |        |
|-------------------|------------|--------|
| <b>Doc No</b>     | 75285      | 175191 |
| <b>Doc Date</b>   | 27-02-2021 |        |
| <b>Quote No</b>   | Nil        |        |
| <b>Quote Date</b> | 20-02-2021 |        |
| <b>SupplyType</b> | Supply     |        |

**Kind Attn : Santosh Kumar**

Estimate/Draft PO for the Supply of following Items.

| Item Name                                                                                      | Qty      | Rate | Dis% | GST   | Amount          |
|------------------------------------------------------------------------------------------------|----------|------|------|-------|-----------------|
| 1 6010 - Miscellaneous - Plastic Blue Sheet - 18 ft x 12 ft - sft<br>HDPE UV stabilized- 2 non | 1,440.00 | 5.00 | 0.00 | 18.00 | 8,496.00        |
| <b>Total Order Value . . .</b>                                                                 |          |      |      |       | <b>8,496.00</b> |
| Rupees : Eight Thousand Four Hundred Ninty Six Only.                                           |          |      |      |       |                 |

**Terms and Conditions :-****Specification / Brand** As per details given in the quotation.**Payment Terms** After Delivery & Production of bill**Tax** Inclusive of all taxes**Delivery Date** Next Day.

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

**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 feeder box covering, Purpose**Completion Date** Nil**Measurment** Nil**Security** Nil**Remarks**

PS 27/2/21

For **Nilgiri Estates**

Authorised Signatory

Accepted the above Terms And Conditions

For **Santosh Tarpaulin**

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

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

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

# Requisition Form

|                                |                 |          |            |
|--------------------------------|-----------------|----------|------------|
| Company Name:                  | NILGIRI ESTATES | Date:    | 12-02-2021 |
| Site & Phase :                 | NILGIRI ESTATE  | Time:    | 10:45      |
| Supplier                       |                 | Req. No. | 175191     |
| Material required before date: |                 | ID No.   | 63917      |

| No | Description          | Size | Quantity | Units | Inward No | Date |
|----|----------------------|------|----------|-------|-----------|------|
| 1  | UV Plastisizer sheet | STD  | 1440     | Sft   |           |      |
| 2  |                      |      |          |       |           |      |
| 3  |                      |      |          |       |           |      |
| 4  |                      |      |          |       |           |      |
| 5  |                      |      |          |       |           |      |
| 6  |                      |      |          |       |           |      |
| 7  |                      |      |          |       |           |      |
| 8  |                      |      |          |       |           |      |
| 9  |                      |      |          |       |           |      |
| 10 |                      |      |          |       |           |      |

Remarks: -For feeder boxes purpose.

|              |            |              |  |
|--------------|------------|--------------|--|
| Prepared By  | Kvaitha    | Approved by  |  |
| Sign. & Date | 12-02-2021 | Sign. & Date |  |

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



|                                |        |          |  |
|--------------------------------|--------|----------|--|
| 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.