

**PURCHASE DIVISION**  
Advice for approval for credit to supplier

(E) (M)

|                                                               |                  |                                                                                                                                                                           |                     |                                                          |            |
|---------------------------------------------------------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|----------------------------------------------------------|------------|
| Date:                                                         | 03/09/21         |                                                                                                                                                                           | Prepared by:        | BHAVANI                                                  |            |
| PO/WO no.                                                     | 79407            |                                                                                                                                                                           | PO / WO Date.       | 5/8/21                                                   |            |
| Supplier Name                                                 | Pratul Sanitary  |                                                                                                                                                                           | PO/WO amount        | 23,040                                                   |            |
| Firm/Company                                                  | Nigri Estate     |                                                                                                                                                                           | Project             | NE                                                       |            |
| Sl. No.                                                       | Bill No.         | Bill Date                                                                                                                                                                 | Bill amount         |                                                          |            |
| 1                                                             | PS/21-22/468     | 27/8/21                                                                                                                                                                   | 23,040              |                                                          |            |
| 2                                                             |                  |                                                                                                                                                                           |                     |                                                          |            |
| 3                                                             |                  |                                                                                                                                                                           |                     |                                                          |            |
| 4                                                             |                  |                                                                                                                                                                           |                     |                                                          |            |
| Amount A – Bills total(Excluding Transport & Hamali Charges): |                  |                                                                                                                                                                           |                     | 23,040                                                   |            |
| Sl. No.                                                       | DC No.           | DC Date                                                                                                                                                                   | MRN No.             | DC matches MRN                                           |            |
| 1.                                                            | /                | /                                                                                                                                                                         | 95811               | <input type="checkbox"/> Yes <input type="checkbox"/> No |            |
| 2.                                                            | /                | /                                                                                                                                                                         |                     | <input type="checkbox"/> Yes <input type="checkbox"/> No |            |
| 3.                                                            | /                | /                                                                                                                                                                         |                     | <input type="checkbox"/> Yes <input type="checkbox"/> No |            |
| Amount B – Other Credits : Transportation charges             |                  |                                                                                                                                                                           |                     | -                                                        |            |
| Amount C – Other Debits :                                     |                  |                                                                                                                                                                           |                     | -                                                        |            |
| Amount D (D=A+B-C) – Amount to be credited to the supplier:   |                  |                                                                                                                                                                           |                     | 23,040                                                   |            |
| Amount E – PO / WO value:                                     |                  |                                                                                                                                                                           |                     | 23,040                                                   |            |
| 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 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 / WO                                                 |                  | <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                                            |                  | 6/9/21                                                                                                                                                                    |                     |                                                          |            |
| Remarks:                                                      |                  |                                                                                                                                                                           |                     |                                                          |            |
| Approved by                                                   | Purchase Officer | Purchase Manager                                                                                                                                                          | Procurement Manager | Accounts – receiver of bill                              | Accountant |
| Sign:                                                         |                  |                                                                                                                                                                           | <b>APPROVED</b>     |                                                          |            |
| Date                                                          | 3/9/21           |                                                                                                                                                                           | 03 SEP 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/-



# Purchase Order

Page(s) 1 Of 1

05-08-2021 3:09:30 PM



79407

10.08.21 11:14:45

From Company : **Nilgiri Estates**

5-4-187/3 &amp; 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

79407

175345

Doc Date

05-08-2021

Quote No

Nil

Quote Date

27-07-2021

SupplyType

Supply

Kind Attn : **Mr. Ashish Gupta**

Purchase Order for the Supply of following Items.

| Item Name                                                             | Qty  | Rate     | Dis%  | GST   | Amount    |
|-----------------------------------------------------------------------|------|----------|-------|-------|-----------|
| 1 7301 - Plumbing - sanitary - Gasket Saifan Set - NA - nos<br>Etios  | 5.00 | 3,255.00 | 30.00 | 18.00 | 13,443.15 |
| 2 7343 - Plumbing - other - Ball cock - other - nos<br>1 1/4"         | 5.00 | 1,680.00 | 35.00 | 18.00 | 6,442.80  |
| 3 7086 - Plumbing - GI - Reducing Socket - other - nos<br>1 1/4" x 1" | 5.00 | 91.60    | 30.00 | 18.00 | 378.31    |
| 4 7042 - Plumbing - CP - Stop Cock - 1/2 In - nos                     | 5.00 | 750.00   | 37.28 | 18.00 | 2,775.36  |
| Total Order Value ...                                                 |      |          |       |       | 23,039.62 |
| Rupees : Twenty Three Thousand Thirty Nine and Paise Sixty Two Only.  |      |          |       |       |           |

**Terms and Conditions :-**

Specification / As per details given in the quotation.

Payment Terms After Delivery &amp; Production of bill

Tax Inclusive of all taxes

Delivery Date Same Day

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

Penalty For Delay Nil

Transportation 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.116,142,138,182 purpose

Completion Date Nil

Measurment Nil

Security Nil

Remarks

For **Nilgiri Estates**

Authorised Signatory

Name :

Accepted the above Terms And Conditions

For **Praful Sanitary**

Name :

Date : / /

1074

## Requisition Form

| Company Name:                                     |                    | NILGIRI ESTATES |          | Date:        |           | 04-08-2021                         |  |
|---------------------------------------------------|--------------------|-----------------|----------|--------------|-----------|------------------------------------|--|
| Site & Phase :                                    |                    | NILGIRI ESTATE  |          | Time:        |           | 16:18                              |  |
| Supplier                                          |                    |                 |          | Req. No.     |           | 175345                             |  |
| Material required before date:                    |                    | Urgent          |          | ID No.       |           | 68204                              |  |
| No                                                | Description        | Size            | Quantity | Units        | Inward No | Date                               |  |
| 1                                                 | Ball cocks         | 1 1/4"          | 05       | Nos          |           |                                    |  |
| 2                                                 | GI Reducing Socket | 1 1/4"X1"       | 05       | Nos          |           |                                    |  |
| 3                                                 | Angle Cocks        | STD             | 05       | Nos          |           |                                    |  |
| 4                                                 | Alpha set          | STD             | 05       | Nos          |           |                                    |  |
| 5                                                 |                    |                 |          |              |           |                                    |  |
| 6                                                 |                    |                 |          |              |           |                                    |  |
| 7                                                 |                    |                 |          |              |           |                                    |  |
| 8                                                 |                    |                 |          |              |           |                                    |  |
| 9                                                 |                    |                 |          |              |           |                                    |  |
| 10                                                |                    |                 |          |              |           |                                    |  |
| Remarks: -For villa no:116, 142, 138, 182 purpose |                    |                 |          |              |           |                                    |  |
| Prepared By                                       |                    | Sadhana         |          | Approved by  |           | Certified by:                      |  |
| Sign. & Date                                      |                    | 04-08-2021      |          | Sign. & Date |           | Project Manager<br>Nilgiri Estates |  |

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                              |             |        |          |              |           |      |  |
| 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.