

### PCN REGISTRATION FORM / PROJECT HISTOGRAM

Client Project details				
<b>Project Code Number</b>				
Client Billing Name	ZZ			
GST Number	ZZZZZZZZZZZZZZZZ			
Project Name \$ address	zzz - z z zz z z			

Project Targrt Days				
05-12-2023				
06-12-2023				
Approved Holidays 0				

Actual Project Days				
Actual Start Date 01-01-1970				
Actual Completed Date	01-01-1970			
Holidays & Project Hold Days				

PO Date 05-12-2023 PO Number zz
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DLP Applicable	No	DLP Days	DLP End Date	01-01-1970
T T		- J		

# **Project Contact Details**

## **Client Details**

Name	Designation	Organisation	Contact No.	Email ID
Z	Z	Z	ZZZZZZZZZZ	Z

#### **Architect/PMC Details**

Name	Designation	Organisation	Contact No.	Email ID
Z	Z	Z	ZZZZZZZZZZ	Z

**Landlord /Property Coordinators** 

Name	Designation	Organisation	Contact No.	Email ID
z1	Z	Z	ZZZZZZZZZZ	Z

## **HRE Details**

I	Name	Designation	Contact No.	Email ID	Start Date	End Date
	Test	Project Manager	9876543017	testi@gmail.com	05-12-2023	05-12-2023

## **All Vendor Details**

Department Heading	Vendor Company Name	Contractor's Name	Mobile	Supervisor's Name	Mobile	Start Date	End Date
Carpentry	TATA StartBucks	Manoj	1234567895	Z	ZZZZZZZZZZ	05-12- 2023	05-12- 2023

Form Filled By	SuperAdmin	HRE Office Only
Designation	Super Admin	Verified By:
Date	11-12-2023	PCN Alloted By:

Signature · Signature ·		
Signature.	Signature	Signature :