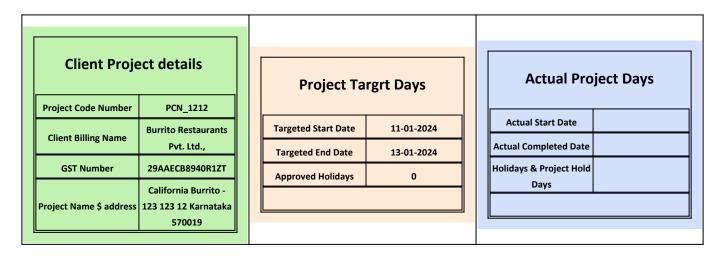


## PCN REGISTRATION FORM / PROJECT HISTOGRAM



PO Date	11-01-2024	PO Number	123456

DLP Applicable No DLP Days 0 DLP End Date
---

### **Project Contact Details**

#### **Client Details**

Na	ame	Designation	Designation Organisation		Email ID	
R	aju	MD	qqqq	8999000000	raju@gmail.com	

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

Name	Designation Organisation Con		Contact No.	Email ID
Abhinav	Architect	mallls	0909090909	arch@gmail.com

# **Landlord / Property Coordinators**

Name	Designation	Organisation	Contact No.	Email ID
land	Landlord	malllls	333333333	land@gmail.com

#### **HRE Details**

Name	Designation	Contact No.	Email ID	Start Date	End Date
itailic	Designation	Contact No.	Lillali ID	Start Bate	Liia Date

#### **All Vendor Details**

De	partment	Vendor Company	Contractor's	Na abila	Supervisor's	Da a bila	Start	End
I	Heading	Name	Name	Mobile	Name	Mobile	Date	Date

Form Filled By	Super Admin	HRE Office Only
Designation	Super Admin	Verified By : Super Admin - ADMIN001
Date	15-03-2024 14:56	PCN Alloted By : Super Admin - ADMIN001
Signature		Signature :