14, DD Main Rd, opp. Agarwal Eye Hospital, 1st street, Arappalayam, Madurai-625016 Cell: 77089 66134 Email: info@kudilagam.com www.kudilagam.com | GST UUHSIOIO5788



Ouotation issued for:

Mr./Ms. GUHAN,

City: Madurai Mob: 6383571197

Mail: guhanb1308@gmail.com

BALCONY SCREENS

Invoice Number: KA0124

Invoice Date: 05-03-2024

Valid Till: 20-03-2024

1. VELCRO FIT

Fibreglass Mesh

Room	Size (wxh)	Qty	Total Sq.	Rate sq.ft	Total
Hall	5 x 4in	1	1	45	45
Hall	4 x 2in	2	1	45	45
			2	TOTAL	90







14, DD Main Rd, opp. Agarwal Eye Hospital, 1st street, Arappalayam, Madurai-625016 Cell: 77089 66134 Email: info@kudilagam.com www.kudilagam.com | GST UUHSIOIO5788



Ouotation issued for:

Mr./Ms. GUHAN,

City: Madurai Mob: 6383571197

Mail: guhanb1308@gmail.com

Invoice Number: KA0124

Invoice Date: 05-03-2024

Valid Till: 20-03-2024

2. CLASSIC WINDOW FIT



Room	Size (wxh)	Qty	Total Sq.	Rate sq.ft	Total
Hall	5 x 4in	1	1	240	240
Hall	4 x 2in	2	1	240	240
			2	TOTAL	480







14, DD Main Rd, opp. Agarwal Eye Hospital, 1st street, Arappalayam, Madurai-625016 Cell: 77089 66134 Email: info@kudilagam.com www.kudilagam.com | GST UUHSIOIO5788



Quotation issued for:

Mr./Ms. GUHAN, Invoice Number: KA0124

City: Madurai Invoice Date: 05-03-2024 Mob: 6383571197

Mail: guhanb1308@gmail.com

Valid Till: 20-03-2024

3. GLOSSY ROLL FIT - INNER



Room	Size (wxh)	Qty	Total Sq.	Rate sq.ft	Total
Hall	5 x 4in	1	1	350	350
Hall	4 x 2in	2	1	350	350
			2	TOTAL	700



14, DD Main Rd, opp. Agarwal Eye Hospital, 1st street, Arappalayam, Madurai-625016 Cell: 77089 66134 Email: info@kudilagam.com www.kudilagam.com | GST UUHSIOIO5788



Quotation issued for:

Mr./Ms. GUHAN, Invoice Number: KA0124

City: Madurai Invoice Date: 05-03-2024 Mob: 6383571197

Mail: guhanb1308@gmail.com

Valid Till: 20-03-2024

4. CREASE FIT DITTO - SINGLE



Room	Size (wxh)	Qty	Total Sq.	Rate sq.ft	Total
Hall	5 x 4in	1	1	410	410
Hall	4 x 2in	2	1	410	410
			2	TOTAL	820



14, DD Main Rd, opp. Agarwal Eye Hospital, 1st street, Arappalayam, Madurai-625016 Cell: 77089 66134 Email: info@kudilagam.com www.kudilagam.com | GST UUHSIOIO5788



Ouotation issued for:

Mr./Ms. GUHAN,

City: Madurai Mob: 6383571197

Mail: guhanb1308@gmail.com

Invoice Number: KA0124

Invoice Date: 05-03-2024

Valid Till: 20-03-2024

5. TRIM GLIDE FIT (SLIDING)



Room	Size (wxh)	Qty	Total Sq.	Rate sq.ft	Total
Hall	5 x 4in	1	1	670	670
Hall	4 x 2in	2	1	670	670
			2	TOTAL	1,340







TERMS AND CONDITIONS
1. 50% Advance payment for order confirmation.
2. 18% GST 2% Packing Charges and Transportation are additional.
3. Payment should be made in favour of Kudilagam Interiors & Promoters.
4. Balance Payment should be made on date once the supply or installation is completed.
5. Kudilagam Interiors & Promoters accepts no liability for consequential damages however caused.
6. Supply and installation of product will be 15 days from date of confirmation.
7. No Replacement of material on placement of order.
8. Advance paid is non refundable on cancellation of the order.
9. Electricity, water and storage for safeguarding the goods should be provided by the client at free of cost.