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: KA0137

Invoice Date : 05-03-2024

Valid Till: 20-03-2024

1. VELCRO FIT



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
Hall	5 x 4in	1	1	45	45
Hall	4 x 2in	2	1	45	45
Hall	5 x 4in	1	1	45	45
Hall	4 x 2in	2	1	45	45
Hall	5 x 4in	1	1	45	45
Hall	4 x 2in	2	1	45	45
Hall	5 x 4in	1	1	45	45
Hall	4 x 2in	2	1	45	45
			10	TOTAL	450







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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
Hall	5 x 4in	1	1	240	240
Hall	4 x 2in	2	1	240	240
Hall	5 x 4in	1	1	240	240
Hall	4 x 2in	2	1	240	240
Hall	5 x 4in	1	1	240	240
Hall	4 x 2in	2	1	240	240
Hall	5 x 4in	1	1	240	240
Hall	4 x 2in	2	1	240	240
			10	TOTAL	2,400







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Room	Size (wxh)	Qty	Total Sq.	Rate sq.ft	Total







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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
Hall	5 x 4in	1	1	350	350
Hall	4 x 2in	2	1	350	350
Hall	5 x 4in	1	1	350	350
Hall	4 x 2in	2	1	350	350
Hall	5 x 4in	1	1	350	350
Hall	4 x 2in	2	1	350	350
Hall	5 x 4in	1	1	350	350
Hall	4 x 2in	2	1	350	350
			10	TOTAL	3,500



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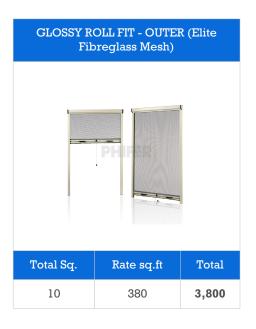
Invoice Number: KA0137

Invoice Date: 05-03-2024

Valid Till: 20-03-2024



Room	Size (wxh)	Qty	Total Sq.	Rate sq.ft	Total



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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
Hall	5 x 4in	1	1	410	410
Hall	4 x 2in	2	1	410	410
Hall	5 x 4in	1	1	410	410
Hall	4 x 2in	2	1	410	410
Hall	5 x 4in	1	1	410	410
Hall	4 x 2in	2	1	410	410
Hall	5 x 4in	1	1	410	410
Hall	4 x 2in	2	1	410	410
			10	TOTAL	4,100



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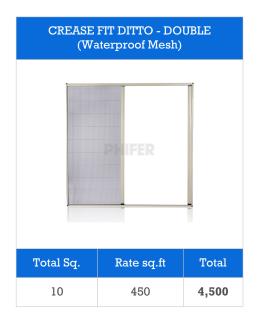
Invoice Number: KA0137

Invoice Date: 05-03-2024

Valid Till: 20-03-2024



Room	Size (wxh)	Qty	Total Sq.	Rate sq.ft	Total



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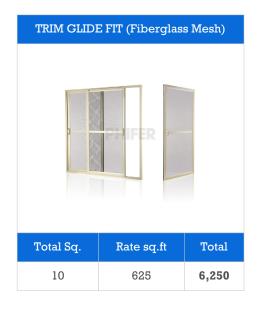
Invoice Date: 05-03-2024

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
Hall	5 x 4in	1	1	670	670
Hall	4 x 2in	2	1	670	670
Hall	5 x 4in	1	1	670	670
Hall	4 x 2in	2	1	670	670
Hall	5 x 4in	1	1	670	670
Hall	4 x 2in	2	1	670	670
Hall	5 x 4in	1	1	670	670
Hall	4 x 2in	2	1	670	670
			10	TOTAL	6,700







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Invoice Number: KA0137 Invoice Date: 05-03-2024

Valid Till: 20-03-2024



Room	Size (wxh)	Qty	Total Sq.	Rate sq.ft	Total







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.