

Office Note / Check List For Agreement

Date : **15-06-2022**
Plant Location : **Gaya**
Route : _____
Client Id : **CLn24430**
File No : **fasf**

Name Of HCF : afd

Marketing Executive: _____

New ☐ Renewal ☐ Addendum ☐

As Per Fresh Proposal / Renewal

1 First Agreement Date	03-02-2022	KYC Doc Recieved	<input type="checkbox"/>
2 Last Renewal Agg. Date	_____	KYC Doc Recieved	<input type="checkbox"/>
3 Rate(Per Month)	NA	Rate(Per Month)	NA
4 Beds	NA	Beds	NA
5 Waste Limit (p.m.)	NA	Waste Limit (p.m.)	NA

Deviation , if any

As Per Policy

1 Security Deposit Equal to 3 months charges	1 Security Deposit Not Taken / Less Taken
2 One Time Registration Fee Rs 0	2 _____
3 Monthly Charges Of Rs	3 _____
4 Annual Increase	4 _____

Authority Who permitted Deviation

Documentation Department

Balance (if any) :- 0	1 Security Deposit :- 0
	2 Registration Fee :- 0

Accounts Department

Remarks /

Observation _____
