Dr. Amin Controllers Private Limited

Embassy Chambers,6th Floor,Plot-No.5. 3^{rd} Road, Khar(W), Mumbai – 400 052 Tel.: +91-22-2648 9260-7 Fax: +91-22-2648 9270-271 E-Mail: $\underline{vikram@rcaindia.net}$, $\underline{ks@rcaindia.net}$

REQUEST FOR INSPECTION

Date: 10/10/2022

Name of the Client / End User	:	MIDC, CIVIL DIVISION, PUNE (RAWET SITE)				
Name of the Contractor	:	ANANT INDUSTRIAL SUPPLIERS, PUNE				
Name of the Manufacturer * Location, address & Contact Details	:	M/s. NATIONAL ENGINEERING SERVICES, MR. PARMESHWAR PHUKE: 8766541125, 9890831590 4/23, AMAR DARSHAN, NEAR KHADI MACHINE, HP PETROL PUMP, K.B. ROAD, AMBERNATH (W), 421501. THANE DIST.				
Place of Inspection	:	Manufacturer Site				
		☐ Consignee end ☐ Client Premise ☐ Warehouse				
Inspection Location, Contact Person & Contact details *	:	M/s. NATIONAL ENGINEERING SERVICES, MR. PARMESHWAR PHUKE: 8766541125, 9890831590 4/23, AMAR DARSHAN, NEAR KHADI MACHINE, HP PETROL PUMP, K.B. ROAD, AMBERNATH (W), 421501. THANE DIST.				
Date of inspection Required *	:	14/10/2022				
Order No. / P. O. No. / W.O. No.	:	EE/CIVIL/TC/C-16159/22 DATED 27/06/2022, AGREEMENT NO.B2-04 FOR 2022-23.				
Goods to be inspected *	:	SS GATES AS PER APPROVED DRAWING				
Quantity of Goods	:	07 NOS				
ExFactory value of Inspected goods	:	RS. 1473739.00 (WITHOUT GST)				
Scope of Inspection with Ref		■ Visual ■ Dimension □ Document Review				
standards / QAP/specification *		☐ Type Test ☐ Witness Test				
Type of Inspection required	:	Stage Inspection Final Inspection				
Reference Document for Inspection	:	PO Scope QAP Ref. Standard (AS PER APPROVED DRAWING BY MIDC, DRAWING ATTACHED)				
Invoice / Billing Details						
Company Name / Firm Name * Legal name as per GST	:	ANANT INDUSTRIAL SUPPLIERS				
Billing Address *	:	A1/302, RAHUL TOWERS, RIGHT BHUSARI COLONY, INDIRA SHANKAR NAGARI, PAUD ROAD, KOTHRUD, PUNE-411038.				
Contact Number *	:	9764558475				
Email Id *	:	prajaktasheth@yahoo.co.in				
Company Type *	:	Proprietor Private Public				
		☐ Enterprise ☐ Govt ☐ Individual				
Note: 1) * are mandatory fields for scheduling the inspection. 2) Please provide accurate information of the company to whom the Invoice of Inspection fee is to be raised including GST/IGST as no changes in the above will be accepted after the Invoice has been raised. 3) If the amount paid in a Financial Year does not exceed TDS Limit., ie Rs 30000/- NO TDS should be deducted and invoice amount shall be paid in full TDS shall be deducted on the BASIC amount of the Invoice 4) TDS certificate has to be provided within Twenty days of the End of the Quarter of the month of deduction.						

I hereby confirm that I have read the above terms and given accurate details

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REQUEST FOR INSPECTION

GST No.:* 27AMRPS4430P1Z6	PAN NO. *	AMRPS4430P	TAN NO. *	NA		
TDS DEDUCTED						
Bank account Details						
Bank /Branch Name	: UNION B 411038	UNION BANK OF INDIA, PAUD PHATA BRANCH, PUNE- 411038				
Bank Account No. : 498801010036089						
NEFT/RTGS NO.	: UBINJ2	UBINJ22284342006				
IFSC Code	: UBIN054	UBIN0549886				

Name & Signature of Authorized Person FOR ANANT INDUSTRIAL SUPPLIERS



(PROPRIETOR)

Note: 1) * are mandatory fields for scheduling the inspection.

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I hereby confirm that I have read the above terms and given accurate details