

## PROJECT INFORMATION BULLETIN

Project Name:		Location:	
Category:	___ Structural    ___ Electrical    ___ Cladding ___ others _____	By: (Avolution)	Date: _____  _____ Name/Signature
<input type="checkbox"/> REQUEST FOR INFORMATION <input type="checkbox"/> CONFIRMATION ON VERBAL INSTRUCTION <input type="checkbox"/> WORK SUSPENSION <input type="checkbox"/> DOCUMENT TRANSMITTAL			
Purpose:	<input type="checkbox"/> REVISION	<input type="checkbox"/> APPROVAL	<input type="checkbox"/> CLARIFICATION <input type="checkbox"/> SUBMISSION <input type="checkbox"/> UPDATE
Details:                    			
Remarks:                    			
___ Confirmed / ___ Instructed / ___ Received by:   <div style="display: flex; justify-content: space-around;"><div>_____ Name and Designation (Client)</div><div>_____ Signature and Date</div></div>			
Attachments:    ___ Layout Plan         ___ Document (if any)			
AVO DCPMO-2023			