Hon-DAYNULM

C Temporary)

Performa for 3rd Party Quality Audit of Shelters for Urban Homeless

Name of ULB:	Doraha	Name of SUH:	Rehair Barera	
Name of Agency through which 3 rd Party Quality Audit is being conducted	Bhalla ASSOC gd. No: 37-3/200	Address of SUH	MC Office Doraha	
D . C. 15	15-3-24		4	

Γ				A) Genera	1			- 1			
1	Type of Building	Residential	C	Commercial Institute Hospital Oth				Other			
		A SE		652 o ce		-		Rehan Bai	gora		
2	Description Court MC Rooms into SVH Shelfer										
3 Location Mc attice Darata											
L				Tehsil			yal	Distt	Dist Ledliana		1
4	General information of build /structure		ilding Approximate o dimension			length	201	width	101	height	10/
				Overall det	ails of Bu	ilding/s	tructure				
	No. of st	No. of story		symmetrical	/		Nonsymmetrical				
5	No. of Ro	No. of Rooms					0		J		
	No. of Bathi	No. of Bathrooms			2						
	No. of Kitchen			I							

100										1		
(Starting y		NA	-	Reference		Permission certificate		44		41	
	year of completion of construction		N.A	,	Reference		completion certificate		1, 4,			
			at one time or		a in the second		und constru			stage		
6	Name of N.A				address				es e d _e i	Contact No		-
7	Name of	00.71				address						
8	Engineer Name of Builder	NA			address					Contact No		
9	Name of contractor	NA N.A			address					Contact No		-1
+	Competent A	uthority		a garage			No.	84,7				- 40
11	Existing use	yes		No	7	Fully	<u> </u>	partly			18	
12	Adjoining	structure if		No								
13		any urt matter if any yes/No		No	if yes,		Report dertaking	i surgendon				21
13			ves/No	Yes	fencing	Yes/No	0	NOC f		m Fire Brigade		
14	security facility changes done in ori structure/plan		ginal	yes/ No		No		if yes,		nils		
	If minor changes done, please specify				*				By	•		(

	N. C.		<u>y</u>			ekta, - i
15	(History of f	ailure in structure or part of it, if any	Wo-			- 92 93
16	failure of ad	joining structure, if any	16.			
		structural	N-A			
		Non-structural	NA			
17	Maintenance details	water supply /sanitary	N.A			
		Electrification	NA			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
18	Any other infor	mation like use of solar en	ergy Wo			
19	_	ection done in presence of				No.
	\$. \$a	Name of person	address	Position	Email	9417969 ac2
	1	Sh. Randhir Sing	h StoroLer	uxpeour -	Tay tay	1 46
	2					
	3					
	4	ar district			71 1 1	1.37

В	Technical record Year of construction	N.A. Reference
	2 Age of structure 3 Materials for construction	years W.A Steel Masonry plastic/ fiber RCC Steel Wall Tk External wall W.A wall Tk wall Steel grade wall Tk wall

-			- /				
4	Documents / records available	Yes	No		Wo	,	
1	if yes, describe	plan				. 6-	
4		elevation		1	ride"	1 2 2 3 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	
1		cross section		11/4			1. 2
	1.2	structural drawings				300	
	\$	completion cert	ificate				
		Test reports materials			-		
		any other docu	ument		+		
5	Mode of construction contract	tender negotiat			N.A	If any other, please specify	
6	Changes made in cons	truction as compared t	o struct	ural desi	gn and di	rawings available	
7	Adjoining structures available be			yes/No		NS.	
, ,		letails thereof					
8	Additional structure constructe		ure	yes/No		NOT.	
0	A Red World Control of the Control o			date		11-1	
9	Extension to existi	Extension to existing structure				Non	
+	if yes, details	thereof	1		if ves	, details thereof	
10	Delay in construction if any wi	th reason V		C	11 700		V v
11	change of Engineer	yes/No. NA	1	f yes		Bod.	

+-					,details		7				
2	change of contractor	yes/No.	Wo		if yes ,details		91 t				
2	stages of construction	<u> </u>	7 1-			With the		,			
3	Maintenance Type	water proofing		yes/No	No.	If yes, frequency			yrs/month		
	13,00	pl	astering	yes/No	Yes		yes, quency	-	yrs/month	- ·	
			coloring	yes/No	Yes	STREET, SHOW THE	If yes, frequency		yrs/month	-	
		strengthenin g		yes/No	Yes		If yes, frequency		yrs/month		
		water supply			(e)					٠-	
			drainage		Yes	If yes, frequency			yrs/month	_	
14	Previous inspection	done	yes/No		No						
	if yes, details						reason				
	document available	4	yes/No.		No						
	If, done when			name of authority						F 1	
15	Action taken then, yes/No		No.		f yes, etails		The state of the s				

	Major repairs if any		y No			Type o	f repair v	vith reason			
	Minor repair if any		Ves			Type of repair with reason		•			-
16	Anv	structural d	efects obs	served like	No	9 •	Туре			Mo)
	wing/flat			1	settlement		yes/No		Tilting	yes/No	
	Wing had wing have				major/ mi		yes/No	14	lo .		
				leakage	in slab	yes/No	16	roof slab	yes/No	No	
					seepage	in slab	yes/No	NO	roof slab	yes/No	No-
						ling of	yes/No	Yes	roof slab	yes/No	No
	major/minor cracks in pl			laster		yes/No	Xes	roof slab	yes/No	No-	
17	Signs	of failure a	t Ground l	Floor	No			,			
18		compound		1	No						
19		of failure in	compound	wall	No						1
-									Bay		//3/