

ਦਫਤਰ,
ਨਗਰ ਕੌਂਸਲ, ਪਾਇਲ,
ਜ਼ਿਲ੍ਹਾ ਲੁਧਿਆਣਾ।
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ਪੱਤਰ ਨੰਬਰ: 254 /ਪਾਇਲ/2024



Office of the
Municipal Council Payal
Ludhiana-141416
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ਮਿਤੀ: 26/03/2024

ਸੇਵਾ ਵਿਖੇ,

ਟੈਕਨੀਕਲ ਡਾਇਰੈਕਟਰ,
ਪੰਜਾਬ ਸਟੇਟ ਅਰਬਨ ਲਾਇਵਲੀਹੁੱਡ ਮਿਸ਼ਨ,
ਮਿਊਂਸਪਲ ਭਵਨ, ਪਲਾਟ ਨੰ.03 ਚੌਥੀ ਮੰਜਿਲ,
ਸੈਕਟਰ-35ਏ ਚੰਡੀਗੜ੍ਹ।

ਵਿਸ਼ਾ:-

Social and Third Party Audit of NULM and Non-NULM shelters in the State
in DAY-NULM under Shelter for Urban Homeless Component.

ਹਵਾਲਾ:-

ਆਪ ਜੀ ਦੇ ਦਫਤਰ ਦੇ ਪੱਤਰ ਨੰਬਰ PSULM/SUH-57/2023/1909 ਮਿਤੀ
22.12.2023 ਦੇ ਸਬੰਧ ਵਿੱਚ।

ਉਪਰੋਕਤ ਵਿਸ਼ੇ ਤੇ ਹਵਾਲੇ ਅਧੀਨ ਨਗਰ ਕੌਂਸਲ ਪਾਇਲ ਵੱਲੋਂ ਨਾਇਟ ਸਲਟਰ ਦਾ ਥਰਡ
ਪਾਰਟੀ ਆਡਿਟ ਅਨੈਚਰ-IV ਅਨੁਸਾਰ ਰਿਪੋਰਟ ਨੱਥੀ ਕਰਕੇ ਆਪ ਜੀ ਭੇਜੀ ਜਾਂਦੀ ਹੈ ਜੀ।


ਕਾਰਜ ਸਾਧਕ ਅਫਸਰ,
ਨਗਰ ਕੌਂਸਲ, ਪਾਇਲ।

ਪਿੱਠ ਅੰਕਣ ਨੰਬਰ

/ਪਾਇਲ/2024

ਮਿਤੀ

ਇਸ ਦਾ ਉਤਾਰਾ:-

1. ਮਾਨਯੋਗ ਵਧੀਕ ਡਿਪਟੀ ਕਮਿਸ਼ਨਰ (ਸ਼ਹਿਰੀ ਵਿਕਾਸ) ਲੁਧਿਆਣਾ ਜੀ ਨੂੰ ਸੂਚਨਾ ਹਿੱਤ ਭੇਜਿਆ ਜਾਂਦਾ ਹੈ।


ਕਾਰਜ ਸਾਧਕ ਅਫਸਰ,
ਨਗਰ ਕੌਂਸਲ, ਪਾਇਲ।

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

Name of ULB:	Mc Rayal	Name of SUH:	Night Shelter
Name of Agency through which 3rd Party Quality Audit is being conducted	Gill Associates	Address of SUH	road No-11, Rayal
Date of Audit	13-03-2024	Capacity:	05

A) General									
	Type of Building	Residential	Commercial	Institute	Hospital	Other			
1	Type of Building								
2	Description	Convert Shamankhola Building to SUH Building							
3	Location	road No-11, Night Shelter							
4	General information of building /structure	Approximate overall dimensions		Tehsil	Rayal	Distt	Ludhiana	height	12 FT
Overall details of Building/structure									
No. of story		symmetrical		Yes		Nonsymmetrical			
No. of Rooms									
No. of Bathrooms									
No. of Kitchen									

Starting year of construction		NA		Reference		Permission certificate			
year of completion of construction		NA		Reference		completion certificate			
structure is completed at one time or in stages						under construction		stage	
6	Name of Architect	NA		address				Contact No	
7	Name of Engineer	NA		address				Contact No	
8	Name of Builder	NA		address				Contact No	
9	Name of contractor	NA		address				Contact No	
10	Competent Authority	NA							
11	Existing use	yes	No	N/A	Fully	partly			
12	Adjoining structure if any	NA							
13	court matter if any	yes/No	No	if yes,	Report /undertaking				
security facility		yes/No	Yes	fencing	Yes/No			NOC from Fire Brigade	
14	changes done in original structure/plan	yes/ No	No					if yes, details	
If minor changes done, please specify		NA							

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History of failure in structure or part of it, if any		No			
15	failure of adjoining structure, if any	No			
16	structural	NA			
	Non-structural	NA			
17	Maintenance details	NA			
	water supply /sanitary	NA			
	Electrification	NA			
18	Any other information like use of solar energy	No			
19	Inspection done in presence of	No			

1	Dr. Jasvir Singh	MC Payal	E.O	Mc payal @ gmail.com	98143-58714
2	Dr. Kuldeep Kumar	MC Payal	elect	Mc payal @ gmail.com	97800-39622
3					
4					

B		Technical record		Reference	
1	Year of construction	1992			
2	Age of structure	60 years			
3	Materials for construction	RCC		Steel	
	Grade of concrete	yes	steel grade	Wall Tk	
				External wall	
				Masonry	
				9 inch	
				plastic/ fiber	
				Internal wall	
				9 inch	

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Documents / records available		Yes	No		
if yes,	describe				
	plan	Yes	Yes		
	elevation		NA		
	cross section		NA		
	structural drawings		Yes		
	completion certificate		NA		
	Test reports of materials		NA		
	any other document				
5	Mode of construction contract	tender	Yes	negotiation	If any other, please specify
6	Changes made in construction as compared to structural design and drawings available				
7	Adjoining structures available before / during construction	yes/No	No		
	if yes, details thereof				
8	Additional structure constructed along with this structure	yes/No	No		
9	Extension to existing structure	date	No		
	if yes, details thereof				
10	Delay in construction if any with reason	No		if yes, details thereof	
11	change of Engineer	yes/No.	No	if yes	

2018

2018

12	change of contractor	yes/No.	No	details					
12	stages of construction			if yes, details					

13	Maintenance Type	water proofing	yes/No	Yes	If yes, frequency	yrs/month			
		plastering	yes/No	No	If yes, frequency	yrs/month			
		coloring	yes/No	No	If yes, frequency	yrs/month			
		strengthening	yes/No	No	If yes, frequency	yrs/month			
		water supply		No					
		drainage	yes/No	No	If yes, frequency	yrs/month			
14	Previous inspections done	yes/No	No						
	if yes, details								
	document available	yes/No.	NA						
	If done when			name of authority					
15	Action taken then, yes/ No	No		if yes, details					

Bar

	Major repairs if any	No				Type of repair with reason		No	
	Minor repair if any	No				Type of repair with reason		No	
16	Any structural defects observed like				Type				
	wing/flat	wing/flat	wing/flat	wing/flat	settlement	yes/No	No	Tilting	yes/No
					major/ minor cracks	yes/No	No		
					leakage in slab	yes/No	No	roof slab	yes/No
					seepage in slab	yes/No	No	roof slab	yes/No
					spalling of plaster	yes/No	No	roof slab	yes/No
	major/minor cracks in plaster					yes/No	No	roof slab	No
17	Signs of failure at Ground Floor				No				
18	compound wall details								
19	Signs of failure in compound wall								

Boof

