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

Name of ULB:	Dinba	Name of SUH:	Nagar Pancharat Airsa
Name of Agency through which 3 rd Party Quality Audit is being conducted	Universal 171, Padran	Address of SUH	N.P. Slice Maha
Date of Audit	28/3/2004	Capacity:	04

¥				A) Gener	al			n Alaba Lil		
1	Type of Building	Residential	- (Commercial	Institut	e	Hospital	Other		
					-	, - <u>-</u>		1144		
2	Description	Finat	Floo	D NP	office	D.	1	er e e e	Washing De	ř
3	Location	NP	effi	/	CO'ICE	()(1)	ju	ه کل ځید ا		
		0.2			Tehsil			Distt		
1	General inform	nation of bui ucture	lding	Approximate dimensio		length		width	height	
				Overall de	tails of Bu	ilding/s	tructure			_
Γ	No. of stor	гу	01	symmetrical	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Nonsymmetrical	- 1		
Γ	No. of Room	ms	0	2			0			
Γ	No. of Bathro	oms		2			By			
	No. of Kitch	en	0	1						

	14		13	12	Ξ	0	9	8	7	6	y-			
If minor changes done, please		security facility	court matter if any	Adjoining structure if any	Existing use	Competent Authority	Name of contractor	Name of Builder	Name of Engineer	Name of Architect	structure is completed at one time or in stages	year of completion of construction	Starting year of construction	
anges done, pleas	changes done in original structure/plan			ructure if	yes	hority	Howel Waishan	Hewal Unishan		Supplied Sings	ompleted at or in stages			F
36	yes/ No	yes/No	yes/No	1	No		nishan	ishqu	(Single	ne time or	9005	5000	
705		fencing Y	if yes,	100			address	address	address	address	Soos Jine	Reference	Reference	
		Ycs/No	Report /undertaking		Fully					Dinba				
	<u> </u>		ing		partly	4					under construction	completion certificate	Permission certificate	
	if yes, details	NOC from	0 or 184		1									
		from Fire Brigade					Contact No	Contact No	Contact No	Contact No	stage		A.	
		7				**************************************	3947655050	9847655330		90516-33315				

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).).) INTAICI) A	1		4	ယ	2	-			Insp	Any other info		Maintenance details			failure of a	History of
	Grade of concrete	Materials for construction	Age of structure	Year of construction	Technical record				0	July of Sing	Name of person	Inspection done in presence of	Any other information like use of solar energy	Electrification	water supply /sanitary	Non-structural	structural	failure of adjoining structure, if any	History of failure in structure or part of it, if any
		RCC	years							1		f	-						10.
	steel grade	7			2 · · · · · · · · · · · · · · · · · · ·				1	Dinha (Sa	address		0	begylon	Regular (Reck			Ne	Ne
1		Steel		Silver Company					U	Sanzzine	ess			R	Che.			lot	et
	wall Tk	5		7					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1) 5	Control of the contro	*		5	B				
wall	Ē		100	Kererence	6					Sucabo	Position		-						all dates
	<u> </u>	Masonry							# #	nac	1125 5								
2										Urshall									
	Internal wall	plastic/ fiber							0	What amail con	Email							4 UV	
										95924-44 529	contact N					X			

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change of Engineer	Delay in constru	if yes, details thereof	Extension to existing structure	Additional structure constructed alongwith this structure	if yes,	Adjoining structures available before / during construction	Changes made in construction as compared to structural design and drawings available		Mode of construction contract							if yes, describe	Documents / records available
yes/No.	with reason NO	ls thereof	stingstructure	ted alongwith this s	if yes, details thereof	before / during con	struction as compa	tenden	tender Byyel	any other document	Test reports of materials	completion certificate	structural drawings	cross section	elevation	plan	Yes
if yes		5 e	date	tructure yes/No		struction yes/No	red to structural des		negotiation	document	orts of ials	certificate		n			No
	if yes, details	and the second					sign and drawin	pleas specif	27	* 1 1992 * 1 1	13.5						
	ils thereof						gs available	please specify	If any other,						A STATE OF THE STA		

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Action taken then, yes/ No	If, done when	document available	if yes, details	Previous inspections done					. J. P. C.	Maintenance	stages of construction	change of contractor	
000							stre		pla	water I		yes/No.	
	1	yes/No.		yes/No	distance of a	water supply	strengthenin yes/No	coloring	plastering	water proofing	completed	20	
if yes, details	name of authority				yes/No	1. Is	yes/No	yes/No	yes/No	yes/No	M	if yes ,details	,details
				reason	If yes, frequency		If yes, frequency	If yes, frequency	If yes, frequency	If yes, frequency			
					yrs/month		yrs/month	yrs/month	yrs/month	yrs/month			
					h		h	h	h	h h			

Signs of failure at Ground Floor compound wall details Signs of failure in compound wall	majo					wing/flat wing/flat v		Minor repair if any	Major repairs if any	
Fround Floor all details mpound wall	major/minor cracks in plaster		see	lea		wing/flat wing/flat wing/flat settlement	A control defects observed like	Not	Not	
	yes/No	spalling of yes/No	seepagein slab yes No	ab	major/ minor yes/No cracks		Туре	Type of repair with reason	Type of repair with reason	
Red	roof yes/No slab		roof ves/No	roof yes/No slab		Tilting yes/No				The second secon
Junersal OF						38				