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NAGAR PANCHAYAT LOHIAN KHAS (JALANDHAR)



GREEN
CLEAN

ਦਫਤਰ ਨਗਰ ਪੰਚਾਇਤ ਲੋਹੀਆਂ ਖਾਸ (ਜਲੰਧਰ)



390

ਨੰ: ੨੫੧

ਮਿਤੀ: 1੨-੨-੨੦੨੨

ਸੇਵਾ ਵਿਖੇ

ਸੰਯੁਕਤ ਡਾਇਰੈਕਟਰ
ਪੰਜਾਬ ਸਟੇਟ ਅਰਬਨ ਲਾਈਵਲੀਹੁੱਡਜ਼ ਮਿਸ਼ਨ
ਸਥਾਨਕ ਸਰਕਾਰ ਵਿਭਾਗ ਪੰਜਾਬ
ਚੰਡੀਗੜ੍ਹ।

ਵਿਸ਼ਾ:- ਡੇ-ਨੂਲਮ ਸਕੀਮ ਦੇ ਸ਼ੈਲਟਰ ਫਾਰ ਅਰਬਨ ਹੋਮਲੈਸ ਕੰਪੋਨੈਂਟ ਅਧੀਨ ਰਾਜ ਵਿੱਚ ਬਣੇ ਨੂਲਮ ਅਤੇ ਨਾਨ ਡੇ-ਨੂਲਮ ਸ਼ੈਲਟਰ ਦਾ ਸੋਸ਼ਲ ਆਡਿਟ ਅਤੇ ਤੀਜੀ ਧਿਰ ਦਾ ਕੁਆਲਟੀ ਆਡਿਟ ਕਰਵਾਉਣ ਸਬੰਧੀ।

ਹਵਾਲਾ:- ਆਪ ਜੀ ਦੇ ਦਫਤਰ ਦੇ ਪੱਤਰ ਨੂੰ ਪਸੂਲਮ/SUH/572022/562 ਮਿਤੀ:17.05.2023 ਦੇ ਸਬੰਧ ਵਿੱਚ।

ਉਪਰੋਕਤ ਵਿਸ਼ੇ ਅਤੇ ਹਵਾਲੇ ਅਧੀਨ ਪੱਤਰ ਦੇ ਸਬੰਧ ਵਿੱਚ ਆਪ ਜੀ ਵੱਲੋਂ ਮੰਗੀ ਗਈ ਰਿਪੋਰਟ ਨਾਲ ਨੱਥੀ ਪ੍ਰੋਫਾਰਮੇ ਵਿੱਚ ਆਪ ਜੀ ਨੂੰ ਭੇਜੀ ਜਾਂਦੀ ਹੈ।

ਕਾਰਜ ਸਾਧਕ ਅਫਸਰ
ਨਗਰ ਪੰਚਾਇਤ ਲੋਹੀਆ ਖਾਸ।

ANNEXURE-IV

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

Name of ULB:	Lohian Khass	Name of SUH:	N.P Office, Lohian Khass.
Name of Agency through which 3 rd Party Quality Audit is being conducted	12-03-2024	Address of SUH	N.P Office, Lohian Khass, Jalandhar
Date of Audit	12-3-24	Capacity:	02

A) General									
		Residential	Commercial	Institute	Hospital	Other			
1	Type of Building	—	✓	—	—	—			
2	Description	N.P Office, Lohian Khass, Jalandhar.							
3	Location	N.P Office, Lohian Khass.			Tehsil	Lohian khass	Distt	Jalandhar	
4	General information of building /structure	Approximate overall dimensions		length	14'	width	10'	height	10'
Overall details of Building/structure									
5	No. of story	.	symmetrical	—	Nonsymmetrical	—			
	No. of Rooms	01							
	No. of Bathrooms	01							
	No. of Kitchen	0							

B₃

Starting year of construction		2002		Reference		Permission certificate			
year of completion of construction		2002		Reference		completion certificate			
structure is completed at one time or in stages						under construction		stage	
6	Name of Architect	—		address	—		Contact No	—	
7	Name of Engineer	—		address	—		Contact No	—	
8	Name of Builder	—		address	—		Contact No	—	
9	Name of contractor	—		address	N.P Office Mohiankhass		Contact No	—	
10	Competent Authority		N.P Office Mohian Khass.						
11	Existing use	yes	✓	No		Fully		partly	
12	Adjoining structure if any								
13	court matter if any	yes/No	✓	NO	if yes,	Report /undertaking			
	security facility	yes/No	✓	yes	fencing	Yes/No	✓	YES	NOC from Fire Brigade
14	changes done in original structure/plan		yes/ No	✓	NO		if yes, details		
	If minor changes done, please specify		—						

By

15	History of failure in structure or part of it, if any		Nil			
16	failure of adjoining structure, if any		Nil			
17	Maintenance details	structural	Routine Maintenance done by NP Office, Kohion Khass.			
		Non-structural	— do —			
		water supply /sanitary	— do —			
		Electrification	— do —			
18	Any other information like use of solar energy		N. K.			
19	Inspection done in presence of					
		Name of person	address	Position	Email	contact No
1		Harkreet Singh.	NP Office Kohion Khass.		n.p.kohionkhass@yahoo.com	7347537233
2						
3						
4						

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

By

4	Documents / records available	Yes		No	
	if yes, describe	plan			
		elevation			
		cross section			
		structural drawings			
		completion certificate			
		Test reports of materials			
		any other document			
5	Mode of construction contract	tender	Tender	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			
	if yes, details thereof				
10	Delay in construction if any with reason	N.A.	if yes, details thereof		
11	change of Engineer	yes/No.		if yes	

By

12	change of contractor	yes/No. ☒	no	details			
12	stages of construction	complete					

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

By

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

Bay

Sub. Divisional Engineer
Pb W/S & Sewerage Sub Division
Phillaur