

Nulm
(Zone-B)

Annexure-IV

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

Name of ULB:	MCL	Name of SUI :	Zone-B, Netti Nagar
Name of Agency through which 3 rd Party Quality Audit is being conducted	Kuldeep Singh Inspection of Nalanda	Address of SUI	Netti Nagar, Juddiana
Date of Audit	29/2/2024	Capacity:	130

A) General												
1		Residential	Commercial	Institute	Hospital		Other					
Type of Building		✓										
2		Description										
		Residential for Urban Homeless										
3		Location			Tehsil	Juddiana	Distt	Juddiana				
					Approximate overall dimensions		length	125'	width	75'	height	
4		General information of building /structure										
Overall details of Building /structure												
		No. of story		1	symmetrical		Yes (✓)		Nonsymmetrical			
5		No. of Rooms		Twelve								
		No. of Bathrooms		four								
		No. of Kitchen		Two								

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	Starting year of construction		2015		Reference		Permission certificate			
	year of completion of construction		2017		Reference		completion certificate			
	structure is completed at one time or in stages				One-Time		under construction		stage	
6	Name of Architect	MCL		address		MCL		Contact No		
7	Name of Engineer	Mr. Anind Appawal (X-En)		address		MCL		Contact No		97800-39452
8	Name of Builder	Capital Construction		address		Iudliana		Contact No		
9	Name of contractor	Atangot		address		Iudliana		Contact No		9988074800
10	Competent Authority									
11	Existing use	yes	No	Fully	partly					
12	Adjoining structure if any		Yes							
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									

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15	History of failure in structure or part of it, if any		No		
16	failure of adjoining structure, if any	structural	N/A		
		Non-structural	N/A		
		water supply /sanitary	N/A		
17		Electrification	N/A		
18	Any other information like use of solar energy		No		
19	Inspection done in presence of				
	Name of person	address	Position	Email	contact No
1	Commissioner, MCL	MCL		Commissioner.MCL@gmail.com	
2	Tarant Commissioner, MCL	MCL		Tarant Comm. ZCH@gmail.com	
3	Tarant Commissioner, MCL	MCL		Tarant Comm. ZB@gmail.com	
4	S.E (B&E), MCL	MCL			

B	Technical record		Reference		
1	Year of construction	2015			
2	Age of structure	80 years			
3	Materials for construction	RCC	Steel	Masonry	plastic/ fiber
	Grade of concrete	M20-30	steel grade Fe500	wall Tk External wall	9"

Edm

4	Documents / records available	Yes	No	
	if yes, describe	plan	Yes	
		elevation	N.A	
		cross section	Yes	
		structural drawings	Yes	
		completion certificate	N.A	
		Test reports of materials	N.A	
		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	Yes	
	if yes, details thereof			Plaster & Shale
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		No	if yes, details thereof
11	change of Engineer	yes/No.	No	if yes

Boof

12	change of contractor	yes/No.	No						
12	stages of construction	complete							

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

Bh

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

Ref

Kuldip Singh

KULDIP SINGH

B.E. (Civil)

Approved Fellow Member

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Annexure-IV

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

Name of ULB:	MCL	Name of SUH:	Zone-C, Near Mangra Linema
Name of Agency through which 3rd Party Quality Audit is being conducted	Kaushik Singh Institute of Technology	Address of SUH	Zone-C, Near Mangra Linema Jodhpur
Date of Audit	29/2/2024	Capacity:	70

A) General

A) General									
1		Residential	Commercial	Institute		Hospital		Other	
Type of Building		✓							
2		Convert Corporation building to SH Building							
3		Location			Tehsil	Juddiana		Distt	Juddiana
4		General information of building /structure		Approximate overall dimensions		length	82'	width	42'
Overall details of Building/structure									
		No. of story		1	symmetrical		Nonsymmetrical		
		No. of Rooms				2			
		No. of Bathrooms				2			
		No. of Kitchen				No			
3									

Non-Nulm
(Zone-C)

	Starting year of construction		N/A		Reference		Permission certificate			
	year of completion of construction		N/A		Reference		completion certificate			
	structure is completed at one time or in stages						under construction		stage	
6	Name of Architect	N/A		address				Contact No		
7	Name of Engineer	N/A		address				Contact No		
8	Name of Builder	N/A		address				Contact No		
9	Name of contractor	N/A		address				Contact No		
10	Competent Authority									
11	Existing use	yes	No	Fully	part y					
12	Adjoining structure if any		N/A							
13	court matter if any	yes/No	N/A	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	N/A						
	If minor changes done, please specify		Bt							

15	History of failure in structure or part of it if any	No	
16	failure of adjoining structure, if any	No	
17	structural	N.A	
	Non-structural	N.A	
	Water supply /sanitary	N.A	
	Electrification	N.A	
18	Any other information like use of solar energy	No	
19	Inspection done in presence of		
	Name of person	address	Position
1	Mrs. Shona Appawal	MCL	Commissioner
2	Mrs. Kulpreet Singh	MCL	Joint Commissioner
3			
4			

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

By

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

Boj

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

Ref.

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Non-Nulu
(Zone-D)

ANNEXURE-IV

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

Name of ULB:	ML	Name of SUH:	Zone-D, Near Daring Complex, Haliboral
Name of Agency through which 3rd Party Quality Audit is being conducted	Indresh Singh Institution of Values	Address of SUH	Zone-D, Near Daring Complex, Haliboral Judeiana
Date of Audit	29/2/2024	Capacity:	60

A) General

Type of Building		Residential	Commercial	Institute	Hospital	Other			
1	Type of Building	✓							
2	Description	Lowest Corporation Building to SUH Building							
3	Location	Zone-D Near Daring Complex, Haliboral Judeiana							
4	General information of building /structure	Approximate overall dimensions		length	70'	width	28'	height	
		Overall details of Building/structure							
5	No. of story	1	symmetrical	✓	Nonsymmetrical				
	No. of Rooms	Twe							
	No. of Bathrooms	Twe							
	No. of Kitchen	No							

B,

Starting year of construction		N.A		Reference		Permission certificate			
year of completion of construction		N.A		Reference		completion certificate			
structure is completed at one time or in stages						under construction		stage	
6	Name of Architect	N.A		address		N.A		Contact No	
7	Name of Engineer	N.A		address		N.A		Contact No	
8	Name of Builder	N.A		address		N.A		Contact No	
9	Name of contractor	N.A		address		N.A		Contact No	
10	Competent Authority								
11	Existing use	yes	No	Fully	partly				
12	Adjoining structure if any		No						
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 minor changes done, please specify		if yes, details							

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15	History of failure in structure or part of it, if any	No							
16	failure of adjoining structure, if any	No							
17	Maintenance details	structural	N/A						
		Non-structural	N/A						
		water supply /sanitary	N/A						
		Electrification	N/A						
18	Any other information like use of solar energy	No							
19	Inspection done in presence of								
	Name of person	address	Position	Email	contact no				
1	Mrs. Sona Aggarwal	MCL	Joint, corner	Joint, corner. MCL @ mail. com					
2	Mrs. Kishore Singh	MCL	Joint, corner	Joint, corner. 2C MCL @ mail. com					
3	Mrs. Sonam Chaudhary	MCL	Joint, corner	Joint, corner. 2B @ mail. com					
4	Mrs. Jasdeep Singh	MCL	Joint, corner	Joint, corner. 2B @ mail. com					
	Sehron								

B		Technical record		N.A		Reference			
1	Year of construction	years							
2	Age of structure								
3	Materials for construction	RCC							
	Grade of concrete		steel grade						

By

4	Documents / records available	Yes	No		
	if yes, describe	plan		N.A	
		elevation		N.A	
		cross section		N.A	
		structural drawings		N.A	
		completion certificate		N.A	
		Test reports of materials		N.A	
		any other document			
5	Mole of construction contract	tender	N.A	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	N.A		
	if yes, details thereof				
8	Additional structure constructed along with this structure	yes/No	N.A		
9	Extension to existing structure	date	N.A		
	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		

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

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