

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

Name of ULB: <i>Nagar Palika Mallanwala</i>	Name of SUH: <i>Mallanwala Khas Night shelter</i>
Name of Agency through which 3 rd Party Quality Audit is being conducted	Address of SUH
Date of Audit	Capacity:

A) General

1	Type of Building	Residential	Commercial	Institute	Hospital	Other
2	Description	NA				
3	Location	<i>Ferozpur Road, Mallanwala khas Tehsil Zira</i>				
4	General information of building /structure	Approximate overall dimensions		length	width	height
Overall details of Building/structure						
No. of story		symmetrical		Nonsymmetrical		
No. of Rooms		<i>single</i>				
No. of Bathrooms		<i>one</i>				
No. of Kitchen		<i>one</i>				

3

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15	History of failure in structure or part of it, if any		NA		
16	failure of adjoining structure, if any		NA		
17	Maintenance details	structural	Regular		
		Non-structural			
		water supply /sanitary	Available		
		Electrification	Available		
18	Any other information like use of solar energy				
19	Inspection done in presence of				

	Name of person	address	Position	Email	contact No
1	NA	NA	NA	NA	NA
2	NA	NA	NA	NA	NA
3	NA	NA	NA	NA	NA
4	NA	NA	NA	NA	NA

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

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

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

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

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