

. ••

. . .

INDIAN INSTITUTE OF TECHNOLOGY KANPUR Office of the Dean of Infrastructure & Planning

Declaration of work completion prior to issue of Completion /Performance Certificate

The form 107C should be generated by ZIC/EIC for necessary approvals on work completion

Requisition details		<u> </u>							I T					
Request number									-	j	-		—	
Work Completion deta	ails													
Name of the work &														
Location														
Name & Address of the														
Executing Agency														
Name of the Associate														
Agency, if any					Δ		A		1					
Agreement No:					Ag	greement	t Amount							
Brief scope of the work														
Name of ZIC		Phone/ Mob No.												
Name of EIC							Phone/ Mob No							
Whether the Agency has e	xecuted 1	the wor	k satisf	actorily a	as per	specifica		tende	r con	dition	s?	Yes	No	
Please provide a short description				-	-	-						ed to a		fwork
(please attach necessary docume.	0 0	0	0	-	0	0	1 0			vaiions	s retui	eu io q	uuuiy oj	WOIK
(please allaci) necessary accume	mis inciuai	ing revise	a as ou	ui arawin	egs ana	interim co	mrecuve acuo	ms lak	sen)					
Has the contractor submit	tod as by	ult dros	-	noration	Imair	topapao	manuala	2110404	atoo /	110000	ata	Yes	No	NA
			0	-			-	_				res	INO	INA
standards on work comple				-	-							X 7	2.7	
Has all the demobilization	work be	een com	pleted :	and all C	&D v	vaste ren	noved befo	ore ha	nding	g over		Yes	No	
the site?		•												
Date of commencement of	f work													
Stipulated date of complete	ion of													
work														
Actual Date of physical														
completion of work record	led by													
the Engineer	ace by													
Tentative Gross Amount of	of													
	51													
Work Completed														
Date of application of														
completion certificate														
Date of physical completion	on													
recorded by the Engineer														
DLP period if any and stip	oulated													
date of commencement														
As per Data, was the work	complet	ted in c	ompliar	nce with	the st	ipulated	time sched	lule in	n cont	tract		Yes	No	
agreement?														
(Also, please select appropriate	option)													
□ On time				ayed by_			_Days		nead b				Days	
Please explain if there was	a resche	duling	of miles	stones an	nd exte	ension of	f time. (Ati	tach up	bdated	schedu	les an	d relev	ant app	roval
documents)														
A reall required quality abo		ndinan	acted a	omplotor	dand	mode do	no to the o	atiafa	ation	of		Vac	No	
Are all required quality che										or		Yes	No	
Engineer In Charge? (Please attach 106QPS / quality checklists / material testing / inspection reports) Is a final punch list prepared and intimated contactor of any defects in building construction? (Please Yes No No										NTA				
				ctor of a	iny def	lects in D	ounding cos	nstru	uon?	Please	5	Yes	No	NA
attach the copy of final inspection					to 1 1.	oform			10 - (V	NT.	
Have all the defects rectific	eu/recor	innend	auons 11	ncorpora	ited D	erore rec	ommendir	1g 15si	ue of			Yes	No	
completion certificate.	aitte a set	infind		acres 1	od -	"I-						V	NL.	
Is the indenter/user comm	nttee sati	istied w	ith the	complet	ed wo	rk.						Yes	No	

Whether Engineer	s were employed as per	r contract cond	ditions t	to supervise the wo	ork		Yes	No
Name of the Engineers				Contact No				
Whether the emplo	oyed Engineer by agen	cy had sufficie	nt expe	rtise to oversee the	work during	5	Yes	No
Remarks								
Whether any penal performance of we	lty is recommended du ork	e to poor		Yes		No		
If Yes, details on the compensation	he period, rate and amo	ount for the le	vy of					
*Suggestion on Per	rformance of Contract	or based on as	sessmer	nt (Please tick as pe	er your assess	sment	of the wo	ork)
Items	Grading Chart			, *	·		Reasons	
Quality of work	Outstanding	Very Good	Good	l Satisfactory	*Poor			
Financial Soundness	Outstanding	Very Good	Good	l Satisfactory	*Poor			
Technical Proficiency	Outstanding	Very Good	Good	l Satisfactory	*Poor			

Very

Very

Good

Very

 Good

Very

Good

Good

Good

Good

Good

Good

Satisfactory

Satisfactory

Satisfactory

Satisfactory

(Signature of the ZIC)

Resourcefulness

Work Ethics

Mobilization of

Adequate T&P

and works

General Behaviour

Outstanding

Outstanding

Outstanding

Outstanding

			/		_ / _		
Date:	(dd	/	mm	/	уууу)

*Poor

*Poor

*Poor

*Poor

Comments by EIC if any

(Signature of the EIC)

Date: (dd / mm / yyyy)

Comments/Special instructions/Recommendations by Head, IWD if any

(Signature of Head, IWD)

For DOIP Internal Use for Issue of Certificate

Check for necessary forms as applicable	DOIP:114 if applicable	DOIP:112 if applicable	DOIP:107U if applicable	106QC	106P	105C
Site visit details and observation				e of Contracto	r (Please tick as per y	our assessment of
the work)						
Remarks on Quality of work b	ased on site condition ar	nd report/documents	3			
Checked			Pass	ed		
JE/JTS			In-Charge,			
Comments/Special in	structions/Recor	mmendations	by Officer-In-	Charge, D	OIP, if any	
(Signature of OIC1)			Date [.]	/	/ /yyyy	<u> </u>
(Signature of CICI)			Date.	(,	111111 / yyyy	J
Commonto /Special in	structions / Recou	mondations	L. ADDI if an			
Comments/Special in	structions/ recor	minendations	DY ADE1, 11 an	y		
				/	/	
(Signature of ADPI)			Date: (dd	/ mm	/ уууу)	
Comments/Special in	structions/Appr	oved by DOIP	ifany			
Comments, opecia m	structions, rippic	<u>/////////////////////////////////////</u>	, ii uiiy			

			/.		_/_		
Date:	(dd	/	mm	/	уууу)