REQUEST FOR PAYMENT OF CONSULTANCY PROJECTS (SAMPLE) – w.e.f. 01-01-2015

Name of Claimant:			•••••	
Nature of the job/Position of	the consultancy proj	ject:		• • • • • • • • • • • • • • • • • • • •
Name of the Consultancy pro	oject:			
Address:				• • • • • • • • • • • • • • • • • • • •
	D	N C 1	T T •4	
Job description/Details of the work carried	Duration/period From	No. of units worked	Unit rate Rs.	Amount requested
the work curricu	То	(days/hours)		Rs.
Signature of Claimant:			•••••	
-				
Recommendation of Princi	pal Consultant (if d	lifferent from P	roject Leader):	
Payment is recommended/not recommended				
•				
Signature of Project Leader:				
Recommendation of Project Leader				
Payment is recommended/not recommended				
rayment is recommended/i	not recommended			
Signature of Project Leader	r:		•••••	
Approval of Director/PGIS	:			
Payment is approved/not ap	pproved.			
Signature of Director:				