

WORK COMPLETION & PERFORMANCE CERTIFICATE

Name of Organisation :
 Name of Issuing officer :
 Phone No. of officer :
 Name of Contractor :
 Financial Value of contract :
 E-mail Id of contractor :

| Sl. No. | Name/nature of Work | Agreement/Work Order No. & Date | Agreement Amount (Rs.) | Final Value of Work (Rs.) | Duration of Works Contract | Actual Completion Date | Any Penalty on work | Status of work |
|---------|---------------------|---------------------------------|------------------------|---------------------------|----------------------------|------------------------|---------------------|----------------|
| | | | | | | | | |

Special Remarks by Officer :

1 Behaviour of Contractor : Good / Not good
 2 Speed of Response : Good / Not good
 3 Concern for Customer Satisfaction : Good / Not good

Note : Information given above is correct to the best of my knowledge.

Date :

Place :

(Signature of Contractor)

This is hereby verified that the above work has been completed and found satisfactory.

Signature of Controlling Officer (DGM & above)