



कार्यालय, रक्षा लेखा नियंत्रक
उदयान विहार, नारंगी, गुवाहाटी-781171
**OFFICE OF THE CONTROLLER OF DEFENCE
ACCOUNTS**
UDAYAN VIHAR, NARANGI, GUWAHATI-781171
Tel No. 0361-2640394, 2641142 Fax No .0361-2640204
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IMPORTANT NOTICE

No. AN/V/PMT/Vol-V

Dated : 11/ 01/2023

Subject : Demand for maintenance works/services required in Residential Complex of CDA, Guwahati –
Regarding

The occupants of the CDA, Guwahati Residential Complex are requested to place the demand of maintenance services to be required in their Quarters (both E/M & B/R) in the prescribed format attached herewith through MES Complaint Cell latest by 31.01.2023 for necessary action. The demand should be duly signed by the occupant concerned as well as Supervisor of the MES Cell.

This issues with the approval of the GO(AN-V).

Thanks.

Encl: As above.


(Amit Mitra)
SAO

Copy to:

MES Complaint Cell CDA Guwahati Complex	It is requested to work out the maintenance/repair works to be required in the residential quarters thoroughly. Quarters wise maintenance works should be prepared in the attached proforma duly signed by the occupants as well as supervisor of the MES Complaint Cell and intimated to AN-V Section latest by 31.01.2023 positively.
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(Amit Mitra)
SAO

Demand of the maintenance work/services required in the Residential Accommodation (FY 2022-23)

Qtr No. _____ Name of the Occupant _____

Nature of the work (B/R)	Requirement /specific location (in number/ tick v)	Nature of the work (E/M)	Quantity /specific location (in number)
(Please mention in numbers)			
Door Repairs		Ceiling Fan Repair	
Door Replacement		Ceiling Fan Replacement	
Window Repair		Exhaust Fan	
Window Replacement		Electric Meter (Not working)	
Cupboard Repair		Fan Regulator	
Cupboard Replacement		3 Pin socket	
Bathroom Mirror		Electric Wiring	
PVC Door Repair		#	
PVC Door Replacement			
Flush			
WC			
Shower			
Wire Mesh (Net)			
Curtain Rod			
Door handle/locking system			
Water Tap			
Window- Pane			
(Please tick v)			
Wall plaster			
Floor repair			
Roof leakage			
Wall seepage			
Whitewash			
Wash Basin to be replaced			
Towel Rail			
Tiling			
Tiling (Kitchen, Bathroom, Latrine)			
Kitchen Sink			
Kitchen Rack(Bartan Stand)			
#			

- Any other maintenance work, if required, please mention

Signature of the Occupants _____

Signature of the Supervisor (MES Complaint Cell) _____