apad lossit

Dated: 23-12-2019

Form of Application for s	eeking ir	nformation under Right to	Informati	on Act 2005 (NW)
				I.D. No
PIO from which information i	s required	1;		
Finance-CFO/Operations Herowert GRID CORPORATIO B-9, Qutab Institutional Area, Katwaria Sarai, New Delhi-11	N OF IND	IA LIMITED		
A) Contact Details 1. Name of the Applicant: -Co	ntinental	Hygiene Concepts		
2. a) Mailing Address: -17 DL	F, Industr	rial Area, Moti Nagar, New De	lhi-11001	5
b) Tel. No.: -011-4702344	5 N	Mob: 9811026407		
c) E- mail: conta@contagr	oup.com			
3. Whether a citizen of India-				
B) Details of Information soug	ht			
1. Type of Information requir				
a) copy of document		Yes	No	No
b) Inspection of records		Yes	No	No
c) sample of material		Yes	No	No
d) Other Information	yes	Yes		No

3. To the best of my knowledge the information sought does not fall within the restrictions contained in Section 8 and 9 of the Act.

2. Information sought form: ----- POWER GRID CORPORATION OF INDIA LIMITED -- -----

CC. FLY WIM 1811 181917

ST491219

4. Particulars of the information sought:

Status of our below Pending Payments:-

S.no	Date	plied at your Sec-43, RECREATION Invoice No.	Amount
1.	11-04-2015	CHC/285/15-16	
2.	12-05-2017	CHC/948/17-18	4,781.00
Total			3,375.00 8,156.00
	Material	Supplied at your Sec-29, Gurgaon	Site 0,130.00
1.	08-04-2015	CHC/173/15-16	4,781.00
2.	20-06-2015	CHC/1954/15-16	4,781.00
3.	11-07-2015	CHC/2479/15-16	1,125.00
4.	24-04-2019	CHC/G/500/19-20	4,928.00
Total			15,615.00
TOTAL OUTSTANDING PAYMENT			23,771.00

- 5. Time period for which information is required: As mentioned above
- 6. Whether applicant belongs to BPL category: -----<u>No</u>-----
- 7. Details of fee paid: Rs 10- (Rupees Ten Only) has been deposited vide receipt no..47F 252121

Signature of Applicant

