

# SALES REPORTING



**SADEE WORLD PVT. LTD.**

**#startupindia**

# DAILY WORK REPORT (T.S.I. / T.S.M.)

Name \_\_\_\_\_ H.Q. \_\_\_\_\_ Town \_\_\_\_\_ Date \_\_\_\_\_ Worked with \_\_\_\_\_

| No.         | Name of Retailer | Address & Phone No. | POB | No.         | Name of Proprietor (Site) | Address & Phone No. | POB |
|-------------|------------------|---------------------|-----|-------------|---------------------------|---------------------|-----|
| 1           |                  |                     |     | 1           |                           |                     |     |
| 2           |                  |                     |     | 2           |                           |                     |     |
| 3           |                  |                     |     | 3           |                           |                     |     |
| 4           |                  |                     |     | 4           |                           |                     |     |
| 5           |                  |                     |     | 5           |                           |                     |     |
| 6           |                  |                     |     | 1           |                           |                     |     |
| 7           |                  |                     |     | 2           |                           |                     |     |
| 8           |                  |                     |     | 3           |                           |                     |     |
| 9           |                  |                     |     | 4           |                           |                     |     |
| 10          |                  |                     |     | 5           |                           |                     |     |
| Total Value |                  |                     |     | Total Value |                           |                     |     |

| Er.   | Cont. | Rel. | Inst. | Site | Mission | Total Call | S.S. | Stock. | P.O.B. | Sales Tgt. | Ach. | Coll. Tgt. | Coll. |
|-------|-------|------|-------|------|---------|------------|------|--------|--------|------------|------|------------|-------|
| Today |       |      |       |      |         |            |      |        |        |            |      |            |       |
| Cum.  |       |      |       |      |         |            |      |        |        |            |      |            |       |

Observation :

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## JOB CONFIRMATION FORM

Date .....

Mr./Mrs./M/s .....

Dear Sir / Madam,

**Re : Water proofing / Heat proofing / Other Application of Construction Chemicals**

Indeed, you have called the number one water proofing / heat proofing consultant of your region. We remain thankful to you for the faith you bestowed upon us. We know your taste, you believe in the best, we too do no compromise with quality & system.

Our Mr. .... has visited your premises for above purpose. As per his information we submit as under :

1. Name of the person contacted : .....
- Phone Nos. : (O) ..... (R) .....
- (M) .....
2. Address of the premises : .....
- for application of our product : .....
3. Approximate Area for the Job : As per enclosed estimate.

### Terms:

- a) Approximate Cost : Rs. .... (as per particulars overleaf)
- b) Payment Conditions : On purchasing Material only : 100% on Delivery
- On Application of our products : Advance 25% of the total estimated cost.
- After completion of 50% of job, 50% of the total cost.
- Remaining 25% immediately after completion of total job.
- c) Labour Charges : Includes mechanical tools, chemicals, supervision, jhoola charges etc.
- Note: If required, other materials like cement, sand, bricks, stone & chips will be provided by you & curing of surface will be done by your side.
- d) Actual Working Area : As per site incharge directions
- d) Taxes : Service tax + VAT as per applicable extra.
- e) Binding : Above rates stands good for 30 days only.
- f) Job execution : Within 2-3 days of your confirm order along with advance.

We assure you all our best services all times.

Thanking you once again.

Customer Confirmation

Yours truly,

Name : .....

Authorised Signatory.

Date : .....

All disputes will be settled at Indore jurisdiction.

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www.sadeeworld.com



Doctor Of Your Home



## INTER OFFICE MEMO

|                             |     |
|-----------------------------|-----|
| From,                       | To, |
| Ref. No. .... Subject ..... |     |
| Signature                   |     |

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Customer Care & Whatsapp No.

92291 82999, 98260 11056, Ph. : 0731 4979467

E-mail : Sadeeworld1@gmail.com, Sadeeworld99@gmail.com,

Also Find at :





**ICU Care®**  
Doctor Of Your Home



## ESTIMATE / ORDER

Goods once sold will not be taken back.  
E. & O. E.

For ICO LTD.

**SADEE WORLD PVT. LTD.**

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**Customer Care & Whatsapp No.**

**92291 82999, 98260 11056, Ph. : 0731 4979467**

E-mail : [Sadeeworld1@gmail.com](mailto:Sadeeworld1@gmail.com), [Sadeeworld99@gmail.com](mailto:Sadeeworld99@gmail.com),

Also Find at :      



Also Find at :      



# DAILY WORK REPORT (A.S.M. / A.S.I. / T.S.I. / T.S.M)

Name \_\_\_\_\_ H.Q. \_\_\_\_\_ Town \_\_\_\_\_ Date \_\_\_\_\_ Worked with \_\_\_\_\_

| No.         | Name of Retailer | Address & Phone No. | POB | No.         | Name of Proprietor | Address & Phone No. | POB |
|-------------|------------------|---------------------|-----|-------------|--------------------|---------------------|-----|
| 1           |                  |                     |     | 1           |                    |                     |     |
| 2           |                  |                     |     | 2           |                    |                     |     |
| 3           |                  |                     |     | 3           |                    |                     |     |
| 4           |                  |                     |     | 4           |                    |                     |     |
| 5           |                  |                     |     | 5           |                    |                     |     |
| 6           |                  |                     |     | 1           |                    |                     |     |
| 7           |                  |                     |     | 2           |                    |                     |     |
| 8           |                  |                     |     | 3           |                    |                     |     |
| 9           |                  |                     |     | 4           |                    |                     |     |
| 10          |                  |                     |     | 5           |                    |                     |     |
| Total Value |                  |                     |     | Total Value |                    |                     |     |

| Er.   | Cont. | Ref. | Inst. | Site | Mession | Total Call | S.S. | Stock | P.O.B. | Sales Tgt | Ach. | Coll. Tgt | Coll. |
|-------|-------|------|-------|------|---------|------------|------|-------|--------|-----------|------|-----------|-------|
| Today |       |      |       |      |         |            |      |       |        |           |      |           |       |
| Cumm. |       |      |       |      |         |            |      |       |        |           |      |           |       |

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## PROJECT COMPLETION FORM

### PROJECT DETAILS

|   |          |                  |                 |           |        |
|---|----------|------------------|-----------------|-----------|--------|
| Project Number (For Office Use only)              |          |                  |                 |           |        |
| Project Start Date                                |          | Project End Date |                 |           |        |
| Project Category<br>(Kindly Tick the appropriate) | Building | House / Villa    | Comm. Structure | Warehouse | Others |
| Project Address                                   |          |                  |                 |           |        |
| City  |          | Pin Code         |                 |           |        |

### WORKING PARTNERS DETAILS

|                               |  |
|-------------------------------|--|
| <b>CONTACT PERSON</b>         |  |
| Name                          |  |
| Mobile                        |  |
| Company Name (If Any)         |  |
| Constitution of the Company   |  |
| GST No.                       |  |
| PAN No.                       |  |
| ESIC Code (If Any)            |  |
| WORKING PARTNER CODE NUMBER   |  |
| No. of Workers during Project |  |

### Financial Details

|                            |  |
|----------------------------|--|
| INVOICE NUMBER             |  |
| INVOICE DATE               |  |
| PAYMENT STATUS             |  |
| PENDING PAYMENT IF ANY     |  |
| REASON FOR PENDING PAYMENT |  |

### APPROVED BY

|                       |  |
|-----------------------|--|
| Name of Person        |  |
| Designation of Person |  |
| Mobile Number         |  |
| Location              |  |

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## PROJECT ENQUIRY FORM

### PROJECT DETAILS

|   |  |                  |               |                 |           |        |
|---|--|------------------|---------------|-----------------|-----------|--------|
| Project Visit Date                                |  |                  |               |                 |           |        |
| Project Concerned Person Details                  |  | Name             |               | Mobile No.      |           |        |
| Proposed Project Start Date                       |  | Working Duration |               |                 |           |        |
| Project Category<br>(Kindly Tick the appropriate) |  | Building         | House / Villa | Comm. Structure | Warehouse | Others |
| Project Address                                   |  |                  |               |                 |           |        |
| City  |  | Pin Code         |               |                 |           |        |

### WORKING PARTNERS DETAILS

|  |  |
|--|--|
| <b>CONTACT PERSON</b>                  |  |
| Name                                   |  |
| Mobile                                 |  |
| Working partner CODE No.               |  |
| No. of Workers required during Project |  |

### APPLICATION DETAILS TO BE CARRIED OUT

| S.No. | Nature of Work to be Carried Out | OTHER Technical Specifications | Units (Sqft / R. Ft) | Sizes | Remarks |
|-------|----------------------------------|--------------------------------|----------------------|-------|---------|
| 1     |                                  |                                |                      |       |         |
| 2     |                                  |                                |                      |       |         |
| 3     |                                  |                                |                      |       |         |
| 4     |                                  |                                |                      |       |         |
| 5     |                                  |                                |                      |       |         |
| 6     |                                  |                                |                      |       |         |
| 7     |                                  |                                |                      |       |         |
| 8     |                                  |                                |                      |       |         |
| 9     |                                  |                                |                      |       |         |
| 10    |                                  |                                |                      |       |         |
| 11    |                                  |                                |                      |       |         |
| 12    |                                  |                                |                      |       |         |
| 13    |                                  |                                |                      |       |         |
| 14    |                                  |                                |                      |       |         |
| 15    |                                  |                                |                      |       |         |
| 16    |                                  |                                |                      |       |         |
| 17    |                                  |                                |                      |       |         |
| 18    |                                  |                                |                      |       |         |
| 19    |                                  |                                |                      |       |         |
| 20    |                                  |                                |                      |       |         |

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