

## **KERALA STATE NIRMITHI KENDRA**

### NIRMITHI TESTING LABORATORY CPT CAMPUS, VATTIYOORKAVU THIRUVANANTHAPURAM-695013 PHONE No. 0471 - 2362229

No. T5/922/2021-22/RNK-TVPM

NO:17329 Date: 13.11.2023

Ref:- Your request letter no.835/SIPK-TVM-GH II/2023dtd.13.11.2023.Testing of: 3 no's of concrete cube supplied for testing compressive strenght.Project:DR.GOVINDAN'S HOSPITAL PHASE II, VANCHIYOOR".Codeno. 2<sup>nd</sup> Floor Column.

Amount:1416/-	Invoice No. 4329	<b>Invoice Date: 13.11.2023</b>

To M/s SI Property (Kerala) Private Limited .

TEST RESULTS					
Identification of the cube	Mix	Date of casting	Maximum load taken (KN)	Compressive strength (N/mm2)	
1	M <sub>25</sub>	16.10.2023	590	26.22	
2	M <sub>25</sub>	16.10.2023	580	25.78	
3	M <sub>25</sub>	16.10.2023	590	26.22	

Test conducted by: Verified by: Signature: Signature:

### COUNTER SIGNED AND ISSUED



**Regional Engineer** 

**Office Seal** 



# **KERALA STATE NIRMITHI KENDRA**

#### NIRMITHI TESTING LABORATORY

CPT CAMPUS, VATTIYOORKAVU

THIRUVANANTHAPURAM-695013 PHONE No. 0471 2362220

PHONE No. 0471 - 2362229

No. T5/922/2021-22/RNK-TVPM

NO:17330

Date: 13.11.2023

Ref:- Your request letter no.QA/SFS/008/110 dtd.13.11.2023.

Testing of: 3 no's of concrete cube supplied for testing compressive strenght.

Project:SFS AMBER Blue Block - 13th floor slab and beam.

Amount:1416/-	Invoice No. 4330	<b>Invoice Date: 13.11.2023</b>

To M/s Skyline Foundation & Structures (P) Ltd.

TEST RESULTS				
Identification of the cube	Mix	Date of casting	Maximum load taken (KN)	Compressive strength (N/mm2)
1	M <sub>30</sub>	04.11.2023	590	26.22
2	M <sub>30</sub>	04.11.2023	500	22.22
3	M <sub>30</sub>	04.11.2023	550	24.44

Test conducted by: Verified by: Signature: Signature:

#### **COUNTER SIGNED AND ISSUED**



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**Regional Engineer** 

**Office Seal** 



# **KERALA STATE NIRMITHI KENDRA**

#### NIRMITHI TESTING LABORATORY

CPT CAMPUS, VATTIYOORKAVU THIRUVANANTHAPURAM-695013

PHONE No. 0471 - 2362229

No. T5/922/2021-22/RNK-TVPM

NO:17331

Date: 13.11.2023

Ref:- Your request letter no.QA/SFS/008/109 dtd.13.11.2023. Testing of: 3 no's of concrete cube supplied for testing compressive strenght. Project:SFS AMBER Green Block - 10th floor column.

Amount:1416/-	Invoice No. 4330	<b>Invoice Date: 13.11.2023</b>

To M/s Skyline Foundation & Structures (P) Ltd.

TEST RESULTS				
Identification of the cube	Mix	Date of casting	Maximum load taken (KN)	Compressive strength (N/mm2)
1	$M_{40}$	14.10.2023	900	40.00
2	M <sub>40</sub>	14.10.2023	900	40.00
3	M <sub>40</sub>	14.10.2023	920	40.88

Test conducted by: Verified by: Signature: Signature:

### **COUNTER SIGNED AND ISSUED**



Attain Charment

**Regional Engineer** 

Office Seal