

### NIRMITHI TESTING LABORATORY

CPT CAMPUS, VATTIYOORKAVU THIRUVANANTHAPURAM-695013

PHONE No. 0471 - 2362229

NO:17414

Date: 11.12.2023

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

**Ref:- Your request letter** 

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

Project: Stories inf the Sky, Akkulam.

Code no: Shear wall and column(Readymix - Poabs)

ı			
ĺ	Amount:1416/-	Invoice No. 4434	<b>Invoice Date: 11.12.2023</b>

#### To M/s iCloud Homes Pvt.Ltd.

Identification of the cube	Mix	Date of casting	Maximum load taken (KN)	Compressive strength (N/mm2)
Cube - 1	$M_{35}$	02.12.2023	560	24.89
Cube - 2	$M_{35}$	02.12.2023	530	23.56
Cube - 3	$M_{35}$	02.12.2023	580	25.78

Test conducted by:
Verified by:

Signature: Signature:

**COUNTER SIGNED AND ISSUED** 

THE PARTY OF THE P



#### NIRMITHI TESTING LABORATORY

CPT CAMPUS, VATTIYOORKAVU THIRUVANANTHAPURAM-695013 PHONE No. 0471 - 2362229

NO:17415

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

Date: 11.12.2023

Ref:- Your request letter 11.12.2023

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

<b>Amount:1416/-</b>	Invoice No. 4435	<b>Invoice Date: 11.12.2023</b>

#### To M/s Cordial Homes Private Limited.

#### Cordial Paradise.

Identification of the cube	Mix	Date of casting	Maximum load taken (KN)	Compressive strength (N/mm2)
1	$M_{25}$	10.11.2023	730	32.44
2	$M_{25}$	10.11.2023	650	28.89
3	M <sub>25</sub>	10.11.2023	710	31.56

Test conducted by:

Verified by:

Signature:

Signature:

**COUNTER SIGNED AND ISSUED** 



#### NIRMITHI TESTING LABORATORY

CPT CAMPUS, VATTIYOORKAVU THIRUVANANTHAPURAM-695013

PHONE No. 0471 - 2362229

NO:17416

No. T5/922/2021-22/RNK-TVPM Date: 11.12.2023

Ref:- Your request letter No.07/AE/LID&EW/NYD/23-24 dtd.08.12.2023

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

Project: VAZHAPPARA GANAPATHI TEMPLE ROAD RE - CONCRETING

Pro.No. 108/24

Amount:1416/-	Invoice No. 4431	<b>Invoice Date: 11.12.2023</b>

### To The Assistant Engineer

LID

Home Charm

& EW Nanniyode Grama Panchayath.

Identification of the cube	Mix	Date of casting	Maximum load taken (KN)	Compressive strength (N/mm2)
1	$M_{20}$	04.12.2023	540	24.00
2	$M_{20}$	04.12.2023	580	25.78
3	$M_{20}$	04.12.2023	550	24.44

Test conducted by:

Verified by:

Signature:

Signature:

**COUNTER SIGNED AND ISSUED** 

THE TRANSPORT RESIDENCE OF THE PROPERTY OF THE



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

NO:17417

The Carmy

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

Date: 11.12.2023

Ref:- Your request letter no.QA/SFS/008/124 dtd.11.12.2023

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

Project:SFS AMBER Green Block - 12<sup>th</sup> floor slab and beam.

<b>Amount:1416/-</b>	Invoice No. 4436	<b>Invoice Date: 11.12.2023</b>

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

Identification of the cube	Mix	Date of casting	Maximum load taken (KN)	Compressive strength (N/mm2)
1	$M_{30}$	10.11.2023	750	33.33
2	$M_{30}$	10.11.2023	1160	51.55
3	$M_{30}$	10.11.2023	1050	46.67

Test conducted by: Signature: Verified by: Signature:

**COUNTER SIGNED AND ISSUED** 

THE THE PARTY AND THE PARTY AN



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

NO:17418

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

Date: 11.12.2023

Ref:- Your request letter no.QA/SFS/008/125 dtd.11.12.2023

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

Project:SFS AMBER Green Block - 13<sup>th</sup> floor slab and beam.

Amount:1416/-	Invoice No. 4436	<b>Invoice Date: 11.12.2023</b>

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

Identification of the cube	Mix	Date of casting	Maximum load taken (KN)	Compressive strength (N/mm2)
1	$M_{30}$	02.12.2023	680	30.22
2	$M_{30}$	02.12.2023	600	26.67
3	$M_{30}$	02.12.2023	600	26.67

Test conducted by:

Signature:

Ithm James

Verified by: Signature:

**COUNTER SIGNED AND ISSUED** 

THE THE PARTY AND THE PARTY AN



#### NIRMITHI TESTING LABORATORY

CPT CAMPUS, VATTIYOORKAVU THIRUVANANTHAPURAM-695013 PHONE No. 0471 - 2362229

NO:17419

How James

No. T5/922/2021-22/RNK-TVPM Date: 11.12.2023

**Ref:- Your request letter** 

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

Code no: Shear wall and column.

<b>Amount:2832/-</b>	Invoice No. 4433	<b>Invoice Date: 11.12.2023</b>

# To The General Manager - Projects iCloud Homes Pvt.Ltd.

Identification of the cube	Mix	Date of casting	Maximum load taken (KN)	Compressive strength (N/mm2)
Cube - 1	$M_{35}$	07.11.2023	800	35.56
Cube - 1	$M_{35}$	07.11.2023	820	36.44
Cube - 1	$M_{35}$	07.11.2023	960	42.67
Cube - 2	$M_{35}$	08.11.2023	1000	44.44
Cube - 2	$M_{35}$	08.11.2023	960	42.67
Cube - 2	$M_{35}$	08.11.2023	900	40.00

Test conducted by:

Verified by:

Signature:

Signature:

**COUNTER SIGNED AND ISSUED** 

SANTIAN PROPERTY OF THE PROPER