

**PROFORMA OF CLIENT'S CERTIFICATE REGARDING PERFORMANCE**  
**(can be filled and printed separately)**

Name and address of the client:

Details of works executed by Shri./ M/s.  
(name of the chemist)

1. Name of work with brief particulars:

2. Agreement No. and date:

3. Agreement amount  
(Approximates are also acceptable)

4. Details of penalties levied (indicate amount) if any for non performance or non adherence to terms:

5. Name, address, telephone number and e-mail ID of the authority under whom supply executed

Name & Designation:

Telephone No.:

E-mail :

6. Comments on the capabilities of the chemist:

- a) Technical proficiency
- b) Financial soundness
- c) Adherence to timeliness
- d) Quality of work
- e) General behaviour

The undersigned is competent to issue this certificate.

“Countersigned”

Signature of the Reporting Officer  
with office seal

Name and designation

Contact Number