

**URBAN DEVELOPMENT DEPARTMENT
GOVT OF NCT OF DELHI
10th LEVEL, DELHI SECRETARAT
I. P. ESTATE, NEW DELHI-110002**

Checklist for MLALAD Scheme Proposal for works

| S. No. | POINTS | Indicate Yes or No |
|--------|---|--------------------|
| 1 | Whether the proposed work is a permissible work as per MLALADs Guidelines. If yes, please specify at which point | |
| 2 | Whether area is under authorized colony. | |
| 3 | Whether it is a new work. | |
| 4 | Whether proposal is for creation of permanent assets. | |
| 5 | Whether estimated cost is below Rs. 2.00 Crore. | |
| 6 | Whether this work was done earlier or recommended earlier by any MLA and date of work executed. | |
| 7 | Whether the proposed work has been funded (wholly or partially) from any other scheme of Government by any agency If yes, please specify | |
| 8 | Whether work is recommended/ consented by the concerned Hon'ble Area MLA. | |
| 9 | Whether No Objection Certificate or permission from land owing agency has been obtained for proposed work. | |
| 10 | Whether Estimate has been prepared in Performa as per CPWD work manual. | |
| 11 | Whether rates are based on DSR 2014 and as per Finance Department, GNCTD order. | |
| 12 | Whether the contingency, third party quality control and labour cess on estimate are charged @ 1% each. | |
| 13 | Whether sketch of proposed work, approved layout plan, measurement sheet, analysis of rates etc. has been provided along with the estimate. | |
| 14 | Whether the estimate is signed by the respective officers as per competency according to cost of work. | |
| 15 | Whether the officer preparing the estimate has certified the durability of the proposed work as per CPWD manuals and durability over twenty years in case of Porta Cabin? If yes, please specify | |

Note: Change of Executing Agency is not allowed.

Signature
(with Seal)

Name:

Executive Engineer

Tel. No.

Signature
(with Seal)

Name:

Assistant Engineer

Tel. No.

Signature
(with Seal)

Name:

Junior Engineer

Tel. No.

MEMBER OF LEGISLATIVE ASSEMBLY LOCAL AREA DEVELOPMENT SCHEME
FORMAT FOR SUBMITTING THE PROPOSAL AND ESTIMATE

| S.No. | Items | Detail |
|--------------|--|---------------|
| 1 | No. and Name of Assembly Constituency | |
| 2 | Name of Executing Agency with full Office Address, Email ID and telephone no.: | |
| 3 | Name of work | |
| 4 | Nature of work | |
| 5 | Name of locality and status of area and whether it is authorized | |
| 6 | Cost of work | |
| 7 | Base Rate taken in estimate | |
| 8 | Time period for completion of work | |
| 9 | Whether new work or reconstruction. If reconstruction, the date of work done earlier | |
| 10 | Whether work is as per approved plan | |
| 11 | Whether it entails any prior clearance from any department and it has taken | |
| 12 | Availability of land and name of Land Owing Agency | |
| 13 | Whether permission from Land Owing Agency has been obtained | |

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Signature
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Name:

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Tel. No.

Signature
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Name:

Junior Engineer

Tel. No.

| | | |
|----|---|--|
| 14 | Name of the agency who will responsible for maintenance of property after construction | |
| 15 | Whether need of project/ work has assessed by department? | |
| 16 | If proposal is for Porta Cabin, whether it is designed for over twenty years. | |
| 17 | Detail of Bank Accounts in which the fund is to be transferred Name of Account: Account Number: Name of Bank & Branch: IFSC Code: MICR Code: | |
| 18 | Other relevant information, if any | |

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