

**EXPERIENCE CERTIFICATE**

(To be issued only in respect of contracts for completed works from concerned department / client.)

1.	Agreement Number & Date	
2.	Name of work	
3.	Name of Agency/Contractor	
4.	Original Agreement Value (Both in Figures & Words)	
5.	Revised Agreement Value, If any (Both in Figures & Words)	
6.	Actual Date of Completion	
7.	Total Payment made to the contractor against this agreement	
8.	Whether Final Bill Passed? (Yes/No)	
9.	If Final Bill is not Passed, whether Final Measurements have been recorded? (Yes/No)	
10.	If Final Measurements are recorded, please indicate status of variation	
	(a) Whether variation is Positive (in excess of original agreement value) or Negative?	
	(b) Whether variation is sanctioned? (Yes/No)	

Certificate No.....

Date.....

(Issuing Authority)

Signature with date:

Name:

Designation:

Address:

Official Seal: