STANDARD FORM OF SOP



SF 8.11B: Interim Evaluation letter of SRLM/CTSA for Consolidated Utilization Certificate (for complete project period) submitted by PIA¹

Γο	Letter No.	
Γhe Project Head	Date:	
(PIA)		
(Address)		
Dear Mr/Ms./Mrs		
Sub: Interim evaluation of consolidated Ut	tilization Certificate for the period - <from date<="" td=""><td><u>;</u>></td></from>	<u>;</u> >
to <to date=""> for the project</to>		
This is to inform that, we have conducte	ed a cross verification/review of the Utilization	n
Certificate submitted by you in the fo	ormat prescribed in SF 8.11E. Based o	n
verification/review, the following remarks hav	ve been observed:	
•		
•		
•		
You are requested to take necessary action	to address the remarks mentioned above an	ıd
remarks observed by Annual Auditor in Utili	zation Certificate and submit compliance to th	ıe

undersigned at the earliest.

SRLM/CTSA

(Signature & Seal of Authorized Signatory)

¹ If there are multiple instances of evaluation reports for a given month's observations, the report should be numbered as 1/month/year, 2/month/year, 3/month/year and so on.