

IRE Technology Co., Ltd

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ADDITIONAL WORK REPORT

Name of Project:			Reference N°:Date:				
1		<u> </u>	1				
No.	Description of Activities		Section	Floor Level	Location	N° of Drawing	Remarks
Prepared By: Checked & Approved		d & Approved B	By:			Approved By:	
Team Leader Site		te Supervisor				Consultant/Owner	
Full Name:	Full Naı					Full Name:	
Date:	Date:	Date:				Date:	