

THAPAR INSTITUTE OF ENGINEERING & TECHNOLOGY, PATIALA

PURCHASE/FUND CLEARANCE INDENT

Nature of Purchase Indent: ARC Proprietary Repeat Order Spot Purchase Other

Deptt./Unit Budget Head Indent No. Date of Indent Material Required by (Date)

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Sr. No.	Item(s) Comprehensive Specification*	Qty.	Estimated Cost (Rs.)	Additional Information
				Any specific information required*
				Test certificate required Yes <input type="checkbox"/> No <input type="checkbox"/>
				Calibration certificate required Yes <input type="checkbox"/> No <input type="checkbox"/>
				(Please score out which is not applicable)

* Please use separate sheet if required and attach vendor and product information, if any available with you

Director Approval is enclosed for purchase of Plant & Machinery, Furniture & Fixture, Office Equipment, Lab. Equipment & other capital items including Building & Works

Purchase Indent enter in Deptt./School/Centre/ Unit Register at Page No. Sr. No. Date

Budget Head	Budget for the year	Funds Cleared	Balance Available

INDENTOR	Head of the Deptt. / School /Centre / Unit
Signature: Name : Contact No.: Email Id:	Signature: Name : Contact No.: Email Id:

For use in Accounts Section

Sufficient funds are available/ not available under the Budget Head of _____ Department _____

Funds Amounting to Rs.may be redeployed from Budget Head of Deptt. _____

Funds Cleared vide

Budget Head	Sr. No	Page No.	Amount Allocated (Rs.)
Finance Officer			

APPROVED**Dean / DIRECTOR**

Note: Please attach this original Purchase Indent with the Adjustment/Payment Bills.

FOR USE IN (CS)

Indent Registration No.

Date

The Indent for the purchase of has been registered in the above indent registration no. Please quote this number for any further inquiry.

2. THE INDENTING OFFICER must furnish here below the names of **at least 5 standard suppliers** with complete **latest addresses, Contact Person, Mob No. & Email Id** from which the above mentioned equipment/Store can be purchased.

S. No.	Name of the Supplier & Address.	Contact Person Details (Name, Mobile No. & Email Id)
1		
2		
3		
4		
5		

CHECK LIST

01. Have you filled in the Purchase Indent No. & Date?
02. Have you indicated the Chargeable Head of Account?
03. Have you given all the essential specifications of the equipment/store indented along with quality?
04. Have you given the addresses of at least 5 prospective suppliers?
05. Have you got the fund cleared from the Account Section?

 Signature of Indenting Official

 Name
 Mobile No.
 Email Id: