भारतीय प्रौद्योगिकी संस्थान रोपड़ INDIAN INSTITUTE OF TECHNOLOGY ROPAR

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Indent Cum Recommendation Sheet for Works valuing above 3.00 Lakh A) Inputs from Indenter

Department : Brief Description of the Work :	Indenter's Name	
Site Location: Nature of Work: Civil	Department :	
Nature of Work: Civil Electrical Horticulture HVAC Composite (Civil + Electrical) Others (Please specify)	Brief Description of the Work :	
Nature of Work: Civil Electrical Horticulture HVAC Composite (Civil + Electrical) Others (Please specify)		
Attach Photo/Drawings / Specifications: Any Interface with the third-party agency (If Yes, Enclose Purchase order, Scope, specify details etc.) Coordinator Name and Mobile No. (to be nominated by Indenter): Category: (Tick Appropriate) NOC from Space Allocation Committee / Dean (Planning) for New, Addition and Alteration Work. NOC from Safety Committee for New, Addition and Alteration Work. Is Working Front available: GeM Purchase: If available on the GeM, please attach the specifications of the item as available on the GeM. In case of non-availability of the items on the GeM, please attach the GeMAR&PTS ID. (Please Specify) Minimum three Committee Members (may be nominated by HOD) 1	Site Location :	
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(If Yes, Enclose Purchase order, Scope, specify details etc.) Coordinator Name and Mobile No. (to be nominated by Indenter): Category: (Tick Appropriate) NOC from Space Allocation Committee / Dean (Planning) for New, Addition and Alteration Work. NOC from Safety Committee for New, Addition and Alteration Work. Is Working Front available: GeM Purchase: If available on the GeM, please attach the specifications of the item as available on the GeM. In case of non-availability of the items on the GeM, please attach the GeMAR&PTS ID. (Please Specify) Minimum three Committee Members (may be nominated by HOD) 1. 2. 3. 4. 5	Attach Photo/Drawings / Specifications :	
Category: (Tick Appropriate) Original/New Work [] Addition & Alteration [] Repair [] NOC from Space Allocation Committee / Dean (Planning) for New, Addition and Alteration Work. Yes [] No [] (Approval copy to be enclosed) NOC from Safety Committee for New, Addition and Alteration Work. Yes [] No [] (Approval copy to be enclosed) Is Working Front available: Yes [] No [] GeM Purchase: Yes [] No [] If available on the GeM, please attach the specifications of the item as available on the GeM. In case of non-availability of the items on the GeM, please attach the GeMAR&PTS ID. (Please Specify) I. Minimum three Committee Members (may be nominated by HOD) 1. 2. 3. 4. 5. 5. —	(If Yes, Enclose Purchase order, Scope,	
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Budget Head 1. Department 2 Institute 3 Other Specify		5
	Budget Head	1. Department 2 Institute 3 Other Specify

	B) For	use by Works and Est	<u>tate</u>		
Site Visit date:					
Any MOM with the Indent	er/Committee /				
Relevant information:					
Preliminary Estimated Am					
(Estimate to be enclosed):					
Time Required:					
Methodology:					
JE/AE / AEE		uts on Budget Sanction	Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, which i		EE
	For use b	y Accounts/ Departmo	<u>ent</u>		
				(An	nount in Rs.)
Budget Sanctioned:					
Amount already Spent:					
Budget Available:					
Budget has been noted in the	he relevant budge	t head. Expenditure du	ubitable to:		
Accountant/ JAO/JA		AO		AR Account	s/EE
	Recommen	nded/Not Recommend	ed		
Member 1 Memb		er 2		Member 3	
				Dean / HoE) / Registrar
	Appro	oved/ Not Approved			
					Director
S. No.	Description		Qty.	Rate(Rs.)	Amt(Rs.)
					Amt(Rs.)
01					
	(Tax@	
				Total	
The committee recommends	the week from	M/c			st tender no. /
The committee recommends	the work from	141/5	Quatation		
Quotation no: members. Proposal indicated					
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Expenditure Sanction		xtent of		• • • • • • • • • • • • • • • • • • • •	(Rupees
		only) for the	above worl	ζ.	
Member 1	Membe	er 2		Mei	mber 3

Dean / HoD / Registrar