

Jaypee University of Information Technology, Waknaghat Solan H.P

INSTITUTE VEHICLE

(A)

Name of Requisitioner	Designation	Department
Date & Time of Visit	Place of Visit	Purpose
Number of Persons		

Signature of Requisitioner

Signature of Concerned Head

UNDERTAKING BY THE OFFICER / OFFICIAL UTILIZING THE VEHICLE	
I _____, designation _____ Department _____ JUIT undertake the responsibility for utilizing Institute Vehicle for the above purpose and handling over the same on return to Institute in good condition.	
DATE: _____	_____ SIGNATURE

(B) FOR OFFICE USE ONLY

Name/Vehicle Number			Name of the Driver	<u>Verified</u>
Meter Reading				<u>USER</u>
Closing	Starting	Total		

NOTE: (1) Please ensure that the form is complete in all respect.

(2) Please ensure that the user verifies the starting & closing meter reading.

(3) Please send this Perform at least 3 days in advance.