**Jaypee Univeristy of Information Technology, Waknaghat Solan H.P**

REQUISTION PERFORMA FOR REPAIR OF EQUIPMENT

Sr. No.:\_\_\_\_\_\_\_\_\_\_\_(To be filled by Lab Incharge) Received on dated:\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Designation** | **Department** | **Mobile No** | **Signature with date** |
|  |  |  |  |  |
| **Sr. No.** | **Equipment** | **Qty** | **Remarks / Problem** |
|  |  |  |  |  |
|  |  |  |  |  |

***Note: Please fill all the above fields***

**Budget Head:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNATURE OF HEAD**

**Head of Department**

To be filled by Lab Incharge

 Estimated repair cost of the above mentioned equipment is Rs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_only.

**Signature of Head**

**CERTIFICATE**

Certified that the budget provision exists for the repair of above item(s) and that the funds are available. Recommended for approval.

Dated:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature Dean of Academic & Research**

 **(Head of Department)**

FOR USE IN ACCOUNTS SECTION

Sufficient funds are available /not available under budget Head \_\_\_\_\_\_\_\_\_\_\_\_of (Department)\_\_\_\_\_\_\_Funds amounting to Rs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_may be redeployed from Head \_\_\_\_\_\_\_\_\_\_\_\_\_of Department \_\_\_\_\_\_\_\_\_\_\_\_\_Funds cleared vide Sr. No. \_\_\_\_\_on\_\_\_\_\_\_\_\_\_for Rs.\_\_\_\_\_\_\_\_\_\_.

**Approved Redeployment of Funds**

**ACCOUNTS SECTION VC**

**APPROVED / NOT APPROVED**

**VC**