

INDIAN STATISTICAL INSTITUTE

7 S.J.S SANSANWAL MARG NEW DELHI-110016

Serial N	1o	
Date:	/	/

(To be filled in by CPC)

Requisition Form for Purchase of Computer Items

PART I

(Items 5, 6 and 7 of Part-II should also be filled in before forwarding to the Competent Authority. for approval)

1. Name of the Unit/Division

2. Summary of item(s) to be acquired. (Tick the appropriate box in each case.)

Serial no.	Item Description with specifications (in brief)	Quantiy	Estimated total Price (incl. of all taxes and charges as applicable)	Objective
1.				 Fresh purchase Upgradation/ Augmentation Replacement of equipment Purchase under buy-back
2.				 Fresh purchase Upgradation/ Augmentation Replacement of equipment Purchase under buy-back
:	: : : : : : : : :	: :	: : :	: : :

3. Justification for the acquisition¹ (Mandatory. Attach extra sheets if required.)

Item no. 1	
Item no. 2	
: : :	: : : : : : : : : : :

4. Budget

Details

Financial Year:	2017-18	A/c No:		Capital / General
ISI Fund / Externally	Funded by			
Amount allocated:	Rs.		Amount propo the current re	equisition: Rs.
Amount spent/comm including the propose	nitted ed one: Rs.		Balance:	Rs.

Signature of the Head of the Unit/Division / Project Leader:

Date: / /

(Name:______)

Recommendation by Head of the Division:	Approval of the Competent Authority:
(in case approval is to be given by the Director)	(Director/Head of Division/Head of Unit/Project Leader)
¹ In case of replacement/buy-back, mention the details of existing/ to-	be-exchanged capital item(s) including date of purchase, accession number.

	DIAN	STATISTI(CAL INS		ierial No
U प्रिकेषी कारण NITY IN DIVERSITY	7 S.J.S SAI	NSANWAL MARG	NEW DELHI-	110016	Date://
	Requis	ition Form for Purc	hase of Compu	iter Items	
		P	ART II		
		(Use separate	e forms for each iter	n)	
. Name of the	e Unit/Divisior	ı			
5. Type of	-	Hardware-related	Soft	ware-related	
procurement		 Fresh procurement Augmentation Upgradation Replacement Others (Please specify) 	□ F □ N □ A	resh procurement enewal of license letwork License fee cquisition on license	
. Full specific			•		
B. Quotations		e last three columns w		y the CPC. Use extra s	sheet(s) if
Quotations required.)	enclosed (The	e last three columns w	rill be filled in b		
Quotations		e last three columns w		y the CPC. Use extra s Unit Price (all-inclusive	
Quotations required.)	enclosed (The	e last three columns w	rill be filled in b		
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Quotations required.) SI.No.	enclosed (The Name of Bic	e last three columns w Ider t/Division / Project Lead	rill be filled in b Quotation Date der:	Unit Price (all-inclusive) Remarks
Quotations required.) SI.No.	enclosed (The Name of Bic	e last three columns w Ider t/Division / Project Lead Recommendation o	rill be filled in b Quotation Date der:	Unit Price (all-inclusive) Remarks
B. Quotations required.) SI.No.	enclosed (The Name of Bio Head of the Uni	e last three columns w Ider t/Division / Project Lead Recommendation o	rill be filled in b	Unit Price (all-inclusive e Committee st for the) Remarks

Date: / /

Chairperson

Convener