

Indian Institute of Technology Palakkad भारतीय प्रौद्योगिकी संस्थान पालक्काड

Nurturing Minds For a Better World

PURCHASE PROPOSAL

Purchase Proposed for		[] Below 10 Lakhs [] Above 10 lakhs					
Date							
Single Point of Contact (SPoC) (Name, Contact No., Email address of the Technical Staff)							
Indenter (Name, Designation, Dept/ Centre/ Section/ Lab/ Facility/ Office)							
Campus		NILA / SAHYADRI					
Proposed Location/Lab/Facility/Room No.							
Is space readily available for the installation of the equipment/furniture?		Yes/No					
If YES, is the site also ready for installation including civil/electrical readiness?		(If you are not sure, please consult the Engineering Works Division)					
If NO, what is the likely date by which space is likely to be available including civil/electrical work?		(Please enter a date after consulting the Engineering Works Division if Civil/Electrical support is required)					
Type of indented Item		1	Consumables/Contingencies/Equipment/Furniture/Components/ Non-Consumables/Others (Please Specify)				
Debitable Head		Departmental Budget/ Centre / Hostel Accounts/Project Fund/ Seed grant/ CPDA/ Consumables (HTRA)/ Institute grant/Others (Please specify)					
Whether the indented item is Proprietary? If YES, please attach the relevant certificate as per the GFR 166		Yes / No	Yes / No				
Whether the indented item is available in GeM? If YES, specify the product ID. If not, attach the GeM Availability Report		Yes / No	Yes / No Product ID (If YES):				
Purpose of Purchase		Research / Others (Please specify)					
Details of LPC/EPC Members (3 Members)							
S. No.	Main Item Description (Detailed List with Technical Specification may be attached with Signature of Indenter and Approval Authority)	Qty.	Unit Rate (Approx.) (INR)	Total Amount (Approx.) (INR)			
			GST @ (INR)				
	(Grand Total (rand Total (Approx.) (INR)				
Rupees in Words (Approx. including GST)			I.				
Budget De	tails (Please attach a copy of the Budget App	oroval)					
S. No.	Department / Lab Project Details / Others (Please Specify)	Date of Budget Approval	Budget Head	Budget Amount (INR)	Qty Approved	Qty Already Purchased (if any)	
Brief Justification (for items not having prior approval)							