

INDIAN INSTITUTE OF TECHNOLOGY KANPUR Office of the Dean of Infrastructure & Planning

Work Requisition Form

(For regular maintenance, do not use this form; instead, use Pingala complaint management service)

Name	Pho No.	ne/Mob	
Dept./Section	PF No:	Email:	@iitk.ac.in
Location Specify the Buildin	g name and Room No (if any)/House Type & No or men	tion the location for required i	vork
Short description along with sketch a	s required highlighting the nature and justific	ration of work require	d (attach separate sheet if needed):
<i>hort description along with sketch a</i>	s required highlighting the nature and justific	cation of work require	d (attach separate sheet if needed):
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Short description along with sketch a	s required highlighting the nature and justific	ration of work require	d (attach separate sheet if needed):
Short description along with sketch a	s required highlighting the nature and justific	ration of work require	d (attach separate sheet if needed):

Zon	e	ZIC_Civ	ZIC_Elect	ZIC_AC	

(Signature of the requisitioner)

	/		/	
Date:	(dd /	mm /	уууу)

2. To be filled by the DOIP#

Specific statements to support the requirements. In case of new space request, certify that the required space is not available within the present department/section allocation and included (or not included) in the projected space requirements (attach separate sheet(s) if needed):

(Signature of the DOIP)

_			_/_	/		
Date:	(dd	/	mm /	уууу)

For DOIP Office Use

1	Requi	Requisition details Nam		e Ph	one	Dep	ot/Sec	PF	Email		Description		n	Sketch		Rec. No
	Verif	fied/Entered													уууу	-mm-dd-slno
2	Will req	uire new foot pr	int		sqm	W	Will create usable space				sqm		sqm	Entered in space database		
3	As p	er Institute Polic	у	Yes	Yes No Remarks:											
4	Sc	ources of funds		Institute			Depa	rtment/	Section		Projects O			Others		
5	Zone	ZIC_C	Ċiv				ZI	C_Elect						ZIC_AC		
		Checked					Passed						Approve	d		
				Note:							Instruct	tions	8			
	Assistant/ Superintendent								OI	С						ADPI/DOIP
Recorded Sent for clarifications ovyy-mm-dd Clarifications Received ovyy-mm-dd Revision									ision F	Recorded		Sent for site	e visit/estimate pr	eparation	yyyy-mm-dd	
	Request number						_							—		
* A	All blank fields in Table 1 are mandatory															