

DOIP: 103

Site Visit Form

(This form should be filled	by ZIC/D	OIP office re	epresentatii	ve and attached n	vith FORM: 10	04 for sa	nctioning	of plan	ns/es	timates	/QTO	sheets fo	r MWC	
Basic information		DOIP 101 Rec. No												
Type of work				iš.										
Vame					Phone/ Mob No.				T					
Dept./Section				PF No:			Ema	il:				a	iitk.ac.	
Is the space/work in	denter no	tified for	the site	visit?						Ye	:s		No	
Site visit team mem	bers													
Requisitioner or					DOIP Office									
representative(s)	presentative(s)				Representative(s)									
ZIC, Civ		- 2	ZIC, El	ZIO			ZIC, AC							
Place/Location/Roc	oms visite	:d												
Date of site visit														
Requested start date	nour preferen	eference Funding					rce							
Time period for work	20 No. 10							nstitu	ite 🗆 Dept/Section 🗆 Project					
Urgency/Reason for the work (if any)	prioritizii	ng												
Is there any relevant drawing /layout available for the reques					eted work?					Yes No				
					+				No					
Do the requested work items conform to the Institute policy If above answer is no, please explain if any additional /special pro-						harra h	2000 #0	quest	od o					
Mode of Execution	up throu	igh the Al		ne	Yes				ı	No				
respective Zone as per the Scope of Services? Can the work be taken up through MWCC contract in your					Yes				1	No				
respective zone as per the Clauses of Contract? If above answer is Yes , Have you attached a QTO sheet for					Yes				+	No				
approval?	, 114, 0)	ou accuerc		oneer ror						, ,				
Primary details of v	ork to b	e done	Based on o	bservations dis	scussions at sit	e)								
Select appropriate op	tion and	or provid	de a shor	t description	of proposed	d const	ruction	ı/imp	rov	emen	ts			
		□ False o	ceiling	□ Interior finishes					□ Electrical					
			Painting works			□ Metal works				☐ Air Conditioning				
□ Partitions □ V			lwork	□ Road works					□ Others (Please specify below)					
Provide a short descr	iption of	existing c	condition	ns and details	of required	work (Attach	separa	ite sk	neets an	id sketi	ches if n	eeded):	
Signatures					Domesia									
Requisitioner or					DOIP Office Representative(s)									
representative(s) ZIC, Civ			ZIC, EI	Represent		ZIC, AC								
210, 01			210, 11		0.00			o, 110				==		
** * * * * * * * * * * * * * * * * * * *	Τ -	7 /27 /2		Usable space	Office Use	-						× 7	/ST /ST:	
		es/No/NA	1		sqm Update in space									
Checked Assistant/ Superintendent				OIC	Approved Instructions OIC					DPI/DC				
lacordad C			Clarification	Received	D*.1-	n Page of		Cont for	ent'-		ention	A	DITIDO	
ecorded Sent for clarification	nis .		Clarifications	Received	Revisio	n Recorded		sent for	estima	ate prepar	ation	LOSS A		