



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

Approval form for Additional Expenditure Sanction

(This form should be **filled by IWD** in case additional sanction is required)

DOIP 101 REQUEST	NO:				
Additional Estimate	Details				
Name of the work					
	IWD □ Architect □ Cor	nsultant □ Otl	ners (<i>Please specify</i>)		
Name of the ZIC			Phone/		
			Mob No.		
Designation			Email:		@iitk.ac.in
Name of the Executive			Phone		
Engineer			/Mob		
* · · · · · · · · · · · · · · · · · · ·		OOT 60	No.		
Initial Sanctioned		GST (%)	Total estima	te	
Amount		CCT (0/)	Amount		
Additional		GST (%)	Total estima	te	
Estimated Amount			Amount		
Requested	Data of applicable		Est. duration	Dlinth	on (for
Applicable DSR	Date of applicable market survey		of work	Plinth an	ea (for
	luded in estimate with brief desc	mittions and th		ditional caration	(Attach set anato note
	cifications as per the Institu	ite polices and	l guidelines for	Yes	No
preparation of estimates					
the approval form as per required for approval)	elevation/section/layouts institute polices and guide	elines? (All nec	essary drawings are	Yes	No
Is there a change in time schedule is required for appre	schedule due to the additional if yes)	onal sanction	Revised time	Yes	No
Current stage of the wor		Tenderin	ng 🗆 Exe	cution \square	Completion
	umber and all details of expend				
(Signature of Pre	parer		dato	e:	/

Review and Comments/Special instructions/Recommendations							
				, ,			
(Signature of Executive	Engineer	<u> </u>	Da	te: (dd / mm / yyyy)			
		cial instructions/Rec	ommendations	(dd / / , ,,,,, ,			
				, , ,			
(Signature of Hea	d IWD)	<u></u>	1	Date: (dd / mm / yyyy)			
(Signature of Frea	.u, 1 w D)	For DO	OIP Office Use	Date. (dd / IIIII / yyyy)			
Charlier OV / Net OV		For DO	or Omce Use				
Checklist: OK / Not OK		Estimates	s of Received for				
Civil			Elect	AC			
Date received		Date received		Date received			
Expected Date Checked	<u> </u>	Expected Date	Passed	Expected Date			
Checked	<u> </u>	Note:	1 45500				
		Note:	OIC				
Assistant/ Superintende	ent			Oic			
Comments/Special in	struction	ns/Recommendations b	y ADPI, if any				
(0)	A D.DI)		D	dd / mm / yyyy)			
Comments/Special in	struction	ns/Recommendations b	y DOIP, if any				
			/	/			
(Signature of	DOIP)		Date: (dd / mr	m / yyyy)			
Comments/Special in	struction	ns/Recommendations b	y DD, if any				
 			dd / mm / yyyy	_/			
(Signature of DD)	Date: (dd / mm / yyyy	7)			
Comments/Special in	struction	ns/Recommendations b	y Director, if any				
			/	_/			
(Signature of Dire	ector)						
Recorded Sent for clarifications	www_mr	Clarifications Received	Revision Recorded	Sent for further processing			