

(Signature of Head, IWD)

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

**DOIP: 115** 

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Work Details																										
Name of the Work	<u> </u>										-	-									_		_			_
Request number																							L			
Name of the contractor																										
Contract Agreement No							D	,	Т	/				/					/							
Contract Start Date																										
Contract End Date																										
Justification for EOTB																										
*Please provide all the details to ju	stify	cont	ractors	requ	iest f	for a	dditio	nal t	time	to si	ıbmii	t fine	al bi	ll.												
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Timeline requested by contract	ctor							<u> </u>																		
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Details of any previous EOT	B re	ques	sts																							
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For DOIP Office Use Checklist: OK / Not OK No of days passed since the issue of completion certificate Expected Date/Stipulated Date of FA Actual Date of submission of FA Checked Passed Note: In-Charge TABC Cell Officer-In-Charge Comments/Special instructions/Recommendations by ADPI, if any (Signature of ADPI) Comments/Special instructions/Recommendations by DOIP, if any (Signature of DOIP) Comments/Special instructions/Recommendations by DD, if any Date: ( dd / mm / yyyy /) (Signature of DD) Comments/Special instructions/Recommendations by Director, if any

	(Sig	gnature of Direct	or)						
Recorded		Sent for clarifications	yyyy-mm-dd	Clarifications Received	yyyy-mm-dd	Revision Recorded		Sent for further processing	yyyy-mm-dd
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