



राष्ट्रीय प्रौद्योगिकी संस्थान, राउरकेला  
National Institute of Technology, Rourkela

FORM – PPIM-1D

PURCHASE REQUISITION AND FUND AVAILABILITY FORM

Department/Center -

Head of Account - PE / NE

Requisition No. - NITR/PR/

Date –

(Department/Grant/Lab/Year/Sl. No.)

Responsible Faculty/Officer –

Intercom –

Sl. No.	Firm on which order is to be placed (Name and Address)	Brief description of Stores Details attached in separate sheet(s) Use a separate sheet for each firm	Total value for each firm in INR
1			₹
2			₹
3			₹
<b>Grand Total (₹)</b>			

1. Routine purchase procedure followed : Yes No
2. If no, give justification. (In case of proprietary Item, necessary certificate to be furnished):
3. Validity of quotation up to (the earliest) :
4. Terms of payment recommended : 100% after supply & installation  
Any Other
5. It is certified that the equipments/stores requested above are needed by the institute for use in the

Responsible Faculty/Officer

HOD/HOC/PIC

(Please print page – 2 on the back of page – 1 in the same sheet)

**COMMENTS OF INTERNAL AUDIT UNIT**

- 1. Vetted / Not-vetted : \_\_\_\_\_
- 2. (a) Routine purchase procedure followed : Yes / No
- (b) Special purchase procedure followed (if any): \_\_\_\_\_
- 3. Validity of quotation up to \_\_\_\_\_
- 4. Terms of payment \_\_\_\_\_
- 5. Other Observations \_\_\_\_\_  
\_\_\_\_\_
- 6. The purchase proposal is in order except for observations noted under Item 5.
- 7.  Proposal recommended subject to availability of funds
- Not recommended due to \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Asst. Registrar (IA)**

**Fund Booking**

Account/Budget Head	PE / NE _____
Total Grant allotted under the Head	Rs. _____
Fund booked for this purchase	Rs. _____
Total Expenditure including this purchase	Rs. _____
Balance available after Fund Booking	Rs. _____
Fund Booking entered in the relevant Register	Page No. _____
	Sl. No. _____

\_\_\_\_\_  
**Asst./Dy. Registrar (F&A)**

Advance Payment approved. Above purchase requisition is approved.  
Purchase Order may please be issued to the firm(s).

\_\_\_\_\_  
**Dean ( ) / Director**

To - **Asst. Registrar (PW)**