**Application form for Purchase of Various Items under CPDA**

(Under Part-B of Guidelines for Utilization of CPDA)

Indent No. NITANP/Dept. Code/202\_-2 / Date:

**SECTION A:**

Name of Faculty Member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Level \_\_\_\_\_\_\_\_

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year of Entry in to Service: \_\_\_\_\_\_\_\_\_\_\_

**1.Consumabe items to be procured with estimated price, specification & purpose:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| S.No. | Item | Brief Specification | No.s | Estimated Price (Rs) | Purpose |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Total estimated price (Rs.)** |

**2.Non-Consumable items to be procured with estimated price, specifications & purpose:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| S.No. | Item | Brief Specification | No.s | Estimated Price (Rs) | Purpose |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Total estimated price (Rs.)** |

**If any of the above Non-Consumable items procured earlier, provide the following:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| S.No. | Item | Nos. | Date of purchase | Present status | Returned **a** | Owned by paying book value **b** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

a If yes attach the duly filled up the following format:

|  |  |  |  |
| --- | --- | --- | --- |
| S.No. | Item | Brief Specification | Received by  |
|  |  |  | Dept./Section  | Name& Designation | Signature |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

 b if yes, attach the duly filled up the following format:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| S.No. | Item | Brief Specification | Amount Paid(in Rs.) | Receipt details |
|  |  |  |  |  |
|  |  |  |  |  |

**3.Membership Fee of Professional bodies:**

|  |  |  |
| --- | --- | --- |
| S.No. | Name of the Professional body | Membership fee (Rs.) |
|  |  |  |
|  |  |  |
| **TOTAL (Rs)** |  |

 Total Fund Sought:

 Declaration by the Applicant

1.Total expenditure approved till date in PDA in the present Block is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ & the balance fund available is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

2.The application satisfies all approved norms of PDA

3. I shall purchase the items as pre institute Purchase Rules.

**Date: Signature of the Applicant**

Forwarded by:

**Signature of the Head of Department**

**SECTION B:**

**FINANCIAL CONCURRENECE** (obtained by the claimant):

|  |  |  |  |
| --- | --- | --- | --- |
| Budget Under Head | Expenditure till date | Balance available | Remarks |
|  |  |  |  |

Unspent balance verified as per books Accounts

 Jt./Dy./Asst. Registrar, SPAC

**Approved / Not approved**

Dean (FA)\*/Director

**Financial Approval No & Date:** ……………………………….……………………………….

*(Will be issued by the office of approval Authority after A/A and E/S)*

**Note:**

1. **\* Up to Rs.25,000/- approval authority is Dean(FA) and above Rs.25,000/- the approval authority is Director.**

2. It is mandatory to submit this (approved/ sanctioned) administrative filled in format at the time of reimbursement.

3. It is essential to fill up the points in all respect before obtaining financial concurrence under SECTION A & B.