

भारतीय प्रबंधन संस्थान मुंबई Indian Institute of Management Mumbai

Ref. No.	
Date:	

ADMINISTRATIVE APPROVAL

From										
(1	Name of the Indenter, D	esignation and Departme	ent)							
The fo	llowing items may requ	ired by the department o	f the Institute:							
Sr. No.	Items with detailed specifications (Features, Quality, Type etc)	Purpose/Justification	Quantity required (in Kg/Ltrs/Unit)	Preferred SKU (if any)	Approx. Unit Price (INR)	Approx. Total Cost (INR)	Remark			
Certif	ied that the specificat	titems, indenter should tion of this Indent are cular source of supply.	Generic and bra	•	•					
1)		Non-Plan/Centre):								
2)	Type of Indent: Equipment/ Capital/ Consumables/Service/Others									
3)	Source : Local/ India/Foreign									
4)	Whether Items are available in Central Stores: Yes/ No									
5)	Quantity already in Stock, if any									
6) 5)	Delivery Period (In No. of Days/Weeks/ Months)									
7)	Installments in which Delivery required									
8)	Installation/Commissioning of the items shall be done by: Indenter / Vendor									
9) 10)	Installation requirements like are, power, civil work etc. are ready: Yes/ No									
11)	If no, expected time by which requirements will be completed Whether training required: Yes/No									
11)		cation/reasons:								
		ns of the item required i					trictive			
You aı	re requested to kindly ac	ecord the approval.			Si	gnature of I	ndenter			
CAO		Signature o	f Dept./Sect. Hea	ad						
-110										
		Approved	/ Not Approved							

DIRECTOR