

Indian Council of Medical Research Ansari Nagar, New Delhi

(Procurement Indent Form for Non-stock goods) (please send the requisition atleast 10-12 weeks in advance)

1. Name & Designation of the Indenter:
2. Division/Section:
3. The following goods/Items/Equipment/Consumables may be procured:

Sl. No.	Name of goods/ Equipment	General Specificati on (Attach separate sheet if required)*	Qty. Required (packet/Nos. etc	Date of previous purchase/ receipt	Present availabili ty/Stock Position	Estimated Cost (Rs.)	Purpose & Justification of procurement
i.							
ii.							
iii.							

**Note- Please do not mention brand/make/model name. However, In case of goods/items are required to be procured from a single brand/firm or specific make/model without Proprietary certificate, please give detailed technical/scientific justification (enclose documentary proof)*

4. Nature of Indent Items/Store:
 - i. Equipment/Machinery/Furniture/Fixture:.....
 - ii. Stationery Items/consumables:.....
5. In case of Proprietary item, Please enclose PAC certificate by the Indenter and the Firm.....
6. Please indicate whether available on Gem or not:.....
7. Budgetary head (ICMR Hqs/Project Fund, please enclose project sanction letter):.....
8. Possible source(s) of supply (List to be attached, if available):.....

Certificate

It is certified goods/items proposed to be procured are not available that no surplus stock of the indent item(s) is lying in the section/division and are essentially required for official use and division/section has sufficient space for installation/commissioning of items/equipments.

Date:

Signature of the Indenter

Sr AO/AO of Concerned Div

Approved/Not Approved

Head of Division

*Specifications of the items are signed by the indenter as well as by Divisional Head/HOD and enclose copy for reference.

*Separate indents may please be given for different kind of items.