

## CONSULTATION FOR ICT ITEMS PURCHASE

SL No.:-

UNIT:-

(Tick the box)

PKL	PCL1	PCL2					
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Date:- dd/mm/yyyy

Department:-

(Print the form both side of a single page)

Particulars		Quantity	Approx. Cost (BDT) <small>[To be filled up by SCM]</small>	Remarks (if any) <small>[To be filled up by ICT]</small>
Asset Name:-				
Asset Type:- <small>(Tick the relevant box)</small>	New <input type="checkbox"/> Replacement <input type="checkbox"/>			
Full Specification:-				
Origin:-		Brand:-		
Purpose:-				
Suggested vendor (if any):-				

Initiated By

(Sign with seal &amp; date)

Head of Dept.

(Sign with seal &amp; date)

HR Dept.

(Sign with seal &amp; date)

Unit ICT Incharge

(Sign with seal &amp; date)

Head of ICT Dept.

(Sign with seal &amp; date)

**To be filled up by the Fixed Assets Team:**

Expenditure Type: <small>(Tick the relevant box)</small>	Capital <input type="checkbox"/>	Revenue <input type="checkbox"/>	Account Name:-
	Budgeted <input type="checkbox"/>	Non-budgeted <input type="checkbox"/>	Account Code:-
Head of Fixed Assets Team			
	Comments (if any)		Signature with Date

Audit Recommendations		
	Comments (if any)	Signature with Date

Head of SCM		
	Comments (if any)	Signature with Date

**Final Approvers:**

Managing Director /Director		
	Comments (if any)	Signature with Date

<b>Asset Type</b>	Desktop/ Laptop/ Printer/ Document Scanner/ RFID Scanner/ Digital Camera/ Tabs/ Plotter/ Software/ Others_____
<b>User Details</b>	Name (s):
	Emp ID (s):
	Designation (s):
<b>Justification of the asset requirements</b>	
<b>Replacement Action</b>	If this assest is a replacement, what will be the status of old asset (Reuse as backup/ Disposal / Other)? Also Please mention reason of replacement.

<b>Desktop/ Laptop</b>	Total Management member (s) of the department :
	Number of Desktop and Laptops in the Department/ Sub Department ?:
	How much time (in Hour) user will usage this asset (approximately Per day) ?:

<b>Printer</b>	Number of Printer(s) / Plotter(s) do you have in your Department?
	Is there any printer at nearby department thet can be shared ? If yes, mention the department name:
	How many pages (approximate) perday you will print?:
	In case of color printer, Which type of document you will print (Simple documents, wash image, design, tech pack, Engr. Drawings etc)?

<b>Scanner</b>	Number of existing Scanners at your department ?
	What size (A3/A4 etc) of scanner you need ?
	What is the daily scan volume ?

<b>Digital Camera</b>	Number of existing Digital Cameras at your department ?
	Purpose of the camera (Still Photo/Video) ?
	How frequently camera will be used (daily/weekly/Montly/occasaionally)?

<b>IP Phone</b>	Number of existing Phone(s) at your department ?
	Total Management member (s) of the department :
	Will it be shared with other or an individually used ?:


\_\_\_\_\_  
**Requisitor**  
*(Sign with seal & date)*

\_\_\_\_\_  
**Head of Dept.**  
*(Sign with seal & date)*

\_\_\_\_\_  
**HR Dept.**  
*(Sign with seal & date)*

\_\_\_\_\_  
**Unit ICT In-Charge**  
*(Sign with seal & date)*

\_\_\_\_\_  
**Head of ICT Dept**  
*(Sign with seal & date)*