



भारतीय प्रौद्योगिकी संस्थान गुवाहाटी
INDIAN INSTITUTE OF TECHNOLOGY GUWAHATI

INDENT FOR TRANSPORT

1. Name, Designation & Dept. /Section/Centre : _____
of the Indentor _____
2. Type of vehicle required : _____
3. Vehicle required (a) on (date) : _____
(b) at (place) : _____
(c) at (time) : _____ up to _____
4. Place(s) to be visited : _____
5. For Airport duty, please state
(a) Name(s) of the guest(s) (if applicable) : _____
(b) Flight No. : _____
(c) Arrival / Departure time : _____
6. Is it official (Yes / No) : _____
(if Yes, please specify the purpose) _____

Signature of the HOD/HOS/HOC

Signature of Indentor
Date : _____

Vehicle Allotment Slip (for office use only)

Vehicle allotted (a) Vehicle No. : _____
(b) Type : _____
(c) Driver : _____

The Driver is requested to report to Dr./Mr./Mrs. _____ on
(date) _____ at (place) _____ at (time) _____ and report back to the undersigned / office
after performing the duty.

Transport In-charge