

COMSATS Institute of Information Technology
Defence Rd. Off Raiwind Rd. Lahore. Phone 042-111-001-007 Ext. 909

Request No/Date:

Modified Transport Request Form

Note: The	Request form	must be submitted in duplicat	e to transport office	e two days before departure.	
Place(s) t	o be visite	d:			
Purpose:	Official	Private/on payment	Emergency		
Detail:					
Dated: _		Timing (Fro	om):	То	
Name: _		Designating	/Department:		
Mobile N	Mobile No: Signature:				
Recomm	ended/For	warded by (H.O.D/In	charge):		
Approved	d by Conve	ener/Manager C&L/T	ransport Offic	er (within Lahore):	
Approved	d by Direc	tor (out of Lahore): _			
		Movemo	ent Order		
Driver: Vehicle No:					
Is assigne	ed to perfo	rm duty with:			
Dated: _		Timing (Fro	om):	To	
				Transport Officer	
		Kilomet	er covered		
Meter rea	ding start:		End		
Total kilometer: Driver's Signature					
Traveler's Signature				Transport Officer	
* Note: Sign	ature of trave	ler are compulsory if not don	e than misusage sl	hall be charged to traveler	
	Vehic	ele Gate Pa	ISS	Request No/Date:	
Vehicle/N	Make:	Driver			
Dated: Purpose:	Official	Out Time Private/on payment	: Emergency	In Time:	

Transport Officer