

Indian Institute of Information Technology  
Bhagalpur  
Bhagalpur – 813210, Bihar, INDIA

Establishment Section

INDENT FOR TRANSPORT

Name of the Indentor	Prof./Dr./Mr./Mrs.:	
Designation		
Department/Section/Centre		
Type of Vehicle Required		
Vehicle Required	No. of Vehicles	
	on date	
	at time	
	Reporting place	
	Place to be visited	
For Airport/Railway Station Duty, Please State	Name(s) of the Guest(s) (If Applicable)	
	Flight No. (If Applicable)	
	Arrival/Departure time	
Is it Official (Yes/No) If Yes, Please Specify purpose and attach official documents		
Source of Payment	Fund Code ( For Sections/Departments)	

\_\_\_\_\_  
Signature of the Officer/Faculty

\_\_\_\_\_  
Signature of the Indentor

Date: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

For Office Use Only

Vehicle Allotted	Vehicle No.	
	Vehicle Type	
	Name of Driver	

Office Note:

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\_\_\_\_\_  
Transport In-charge

Date: \_\_\_\_\_

\_\_\_\_\_  
Approval of the Competent Authority