



ಭಾರತೀಯ ಸಾಂಖ್ಯಿಕ ಸಂಸ್ಥೆ
INDIAN STATISTICAL INSTITUTE
Bangalore Centre

No. :

TRANSPORT REQUISITION FORM

1. Name : Roll No..... Dept/Unit :
 2. Required on : Time : From To
 3. Forgoing .From : To :
 4. Number of Passengers :
 5. Purpose
-
-

Date : Signature of Indentor Signature of Head of Unit

FOR OFFICE USE ONLY GATE PASS OFFICIAL / PRIVATE
Received on at hrs. No..... Request Granted / Not Granted
If Granted : Vehicle No.: Driver.....

Transport Supervisor Sanctioning Authority

To be filled in by the Driver :

Name :	Vehicle	No.
Meter reading	Time of	
Final :	(a) Return :	hrs
initial	(b) Starting :	hrs
Distance run : (KM)	Duration of use :	hrs

Comments.....
.....
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Signature of the Driver

User's Certificate

The Vehicle has been used as per the above statement and to my satisfaction. The trip was on official / Private Work.

Comments.....
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Signature of the User