



Form ID: DYP CET: Store/02

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

**PURCHASE INDENT FORM (SOFTWARE AND HARDWARE)**

Name of Staff \_\_\_\_\_ Department \_\_\_\_\_

Sr No	Detail Specifications of the Software/Hardware	Name of Suppliers (if available)	Approx. Rate (Rs)	Quantity	Approx. Cost (Rs)

Purpose \_\_\_\_\_  
\_\_\_\_\_

Forwarded by (Head of Department): \_\_\_\_\_

Remark (Software & Hardware Incharge) \_\_\_\_\_

**Registrar**

**Principal**

**Executive Director**

Note: Submit duly signed form to store section for further process

Approved By AICTE, New Delhi, Recognised by Govt. of Maharashtra & Affiliated to Shivaji University, Kolhapur.