 **आई सी एम आर - राष्ट्रीय पोषण संस्थान, हैदराबाद**

**I C M R -National Institute of Nutrition, Hyderabad**

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| अनुरक्षण विभाग कार्य आदेश प्रपत्र **/ Maintenance Work Order Form** | | | | | | | | | | | | |
| कार्य आदेश सांख्य / Work order No. | | | | | |  | | |  |  |  | |
| ध्यानार्थ | | | | मिस्त्री / | नलसाज / | सुतार / | | | वातानुकूलित |  |  | |
| Attention | | | | Mason / | Plumber / | Carpenter / | | | A.C. |  |  | |
| कार्य का प्रकार | | | | विरचना / | निर्माण / | संशोधन / | | | सर्विसिंग |  |  | |
| Type of work | | | | Fabrication / | Manufacture / | Modification / | | | Servicing |  |  | |
| Room No: | | | |  | Building: |  | | |  | Quarter No: |  | |
| कार्य का विवरण / Details of the work: | | | | | |  | | | | | | |
|  | | | | | | | | | | | | |
| Ext No: | | |  | | | हस्ताक्षर / Signature | | | | | | |
| दिनांक / Date: | | |  | | | स्पष्ट अक्षरों में नाम / Name (in BLOCK letter) | | | | | | |
| Work allotted to: | | | | |  | | | | | | | |
| Work completed on: | | | | |  | | | | | | | |
|  | | | | | | कार्यालय प्रभारी अधिकारी / Maintenance Officer | | | | | | |
| उपरोक्त कार्य सफलतापूर्वक पूर्ण कर लिया गया है/ The above work has been completed successfully | | | | | | | | | | | | |
| Date: | |  | | |  | | | | | हस्ताक्षर / Signature | | |
| 1 | जॉब कार्ड / Job Card | | | |  | | | | | | | |
| 2 | क्रय जाने वाली सामग्री के लिए में भंडार मांगपत्र भेजने की तिथि / Date of requisition to stores for items to be purchased | | | | | | | | | | | |
| (a) |  | | | | | (d) |  | | | | | |
| (b) |  | | | | | (e) |  | | | | | |
| (c) |  | | | | | (f) |  | | | | | |
| 3 | सामग्री प्राप्त करने की तिथि / Material received on: | | | | | | | |  | | | |
| 4 | कार्य शुरू करने की तिथि / Date of commencement of work: | | | | | | |  | | | | |
| 5 | उपयोग किया गया सामग्री / Materials used: | | | | | | | |  | | | |
|  |  | | | | | | | | | | | |
| 6 | कार्य शुरू करने की तिथि / Date of commencement of work: | | | | | | | | |  |  | |
| 7 | रद्दी सामग्री को भंडार को वास करने की तिथि / Scrap materials returned to the stores: | | | | | | | | | | | |
|  |  | | | | | | | | | | | |
| 8 | कार्य पूरा करने वाले कर्मचारी के हस्ताक्षर / Signature of the person completing the work: | | | | | | | | | | |  |
| 9 | माँगपत्र भेजने वाले के हस्ताक्षर / Signature of the Indentee: | | | | | | | |  | | | |
| 10 | प्रभारी अधिकारी के हस्ताक्षर / Signature of the Indentee: | | | | | | | |  | | | |