Request for project approval **SD IV**

(Individual SD IV form should be submitted for each product)

University of Moratuwa

Approval Form

Assembling & Commissioning of Capital Equipment (Internally)

|  |  |
| --- | --- |
| **Description of Article****Capital Product with Specification** | **Market Price** |
|  |  |

**Prepared by**

Signature : ……………………………………………………………

Name : ………………………………………………………………..

**Officer Incharge of the Project**

Signature : …………………………………………………………..

Name : ………………………………………………………………..

Department : ……………………………………………………...

Date : ……………………….

|  |
| --- |
| **Requesting Departments** |
| **Dept.** | **Nos** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

|  |
| --- |
| **Estimated Expenditure** |
|  **S/No** | **Materials Required** | **Quantity** | **Approx. Value** |
| 1. (a) |  |  |  |
|  (b) |  |  |  |
|  (c) |  |  |  |
|  (d) |  |  |  |
|  (e) |  |  |  |
|  (f) |  |  |  |
|  (g) |  |  |  |
|  |  |  |  |
|  |  |  |  |
| 2. | Workshop Cost  |  |
| 3. | Staff Cost/ Honorarium  |  |
| 4. | Overhead Cost  |  |
| **Total Cost**  |  |
|  |

|  |  |
| --- | --- |
| No of units to be Produced |  |

|  |  |
| --- | --- |
| Recommended Signature : ……………………..HeadDept. of : ……………………….. | Availability of Fundconfirmed/Not confirmed………………………… SAB (Supplies) |

To be Complerted in Triplication

1st copy - Senior Assistant Bursar

2nd copy - Office Incharge of the Project

3rd copy - Depatment/s requsting the product

|  |  |
| --- | --- |
| Recommended…………………………… …………………………… Dean Registrar Faculty of ………………………………………. | Approved ………………………………………………………………. Vice Chancellor |