



भारतीय प्रौद्योगिकी संस्थान इंदौर
Indian Institute of Technology Indore
सिमरोल, खंडवा रोड, इंदौर-453552
Simrol, Khandwa Road, Indore- 453552
Tel.: 0731-6603551,3369, Email: mms@iiti.ac.in



INSTALLATION / COMMISSIONING / SERVICE REPORT

Ref. PO No. _____ **Date:** _____

- 1. Name of Equipment:** _____
- 2. Equipment Model No.:** _____ **MAKE:** _____
- 3. The above equipment has been successfully Installed/Commissioned/Serviced by** _____
(Name of service engineer) of M/s. _____ (Address of
Supplier/Firm/Dealer) on _____ (Date of Installation)
- 4. Contact No.:** _____ **e-mail id:** _____
- 5. In the presence of Dr./Mr.** _____ **of** _____ **Department at IIT Indore.**
- 6. Date of Visit** _____ **Time of visit:** _____

STATUS OF WORK:



COMPLETE



INCOMPLETE



REJECTED

- A.** The Equipment/Instrument was unpacked, Commissioned / Installed and found to function to the satisfaction level of the User/Buyer.
(Tick A or B)

OR

- B.** The Equipment / Instrument was unpacked, Commissioned / Installed but was not working/functioning properly to the satisfaction of the User/Buyer due to the following reasons:
(Tick A or B)

(i)

(ii)

(iii)

(iv)

Signature with seal of the Buyer

Signature with seal

Name & Designation

Name & Designation of the

FORM NO.: MM11

Service Engineer