

Date :

ToThe Director Research, Development & Innovation (RDI) Kathmandu University, Dhulikhel, Kavre

Subject: Request for Vehicle

You are requested for the arrangement of vehicle as per the given date, time, purpose and specified source of payment;

Date (DD/MM/YYYY)	From	To	Time of start	Estimated time of return	Vehicle Type (Encircle the appropriate)			Purpose of travel	Budget	Remarks
					Jeep	Car	Bus			
Total Travelers (specify number)										

Requested by:

Name: _____
 Designation: _____
 Signature: _____
 Department: _____
 Mobile tel. no.: _____

Recommended by:

Name: _____
 Designation: _____
 Signature: _____
 Department: _____
 Mobile tel. no. _____

Approved by:

Name: _____
 Designation: _____
 Signature: _____
 Department: _____
 Mobile tel. no. _____

Vehicle on Pool - Log Sheet**Vehicle Service for Externally Funded Research Projects****Vehicle Number :****Driver's Name and Signature:**

Date (DD/MM/YYYY)	Name of Project Staff	Department Centre	Time of Start	Initial Kilometer reading	Main Places enroute	Final Kilometer Reading	Time of Return	Total distance in Kilometer	Traveler's Signature	Amount (NPR)

Verified by (on behalf of Physical Facilities Section): Information given are correct, forwarded to the RDI for payment and necessary action (if needed).

Name:

Signature: