DOCUMENTS

ON

REPAIRS AND UPGRADATION

OF

LABORATORY EQUIPMENT

POLICY AND PROCEDURE

INDER

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REPAIRS AND UPGRADATION OF LABORATORY EQUIPMENT POLICY AND PROCEDURES

Preamble:

Laboratory eqripment is the vital part associated or reqrired for the effective implementation of syllabrs of the srbject, forming the total crrricrirm of the corrse leading to a degree. The eqripment is a natural corrse ortlives its life, after some period and hence does not work to the mark.

To keep the eqripment fractional, each rnit reqrires regrlar check-rp and maintenance. Properly maintained eqripment always strengthens the academics involved in the coverage of the theory, essential for brilding rp of theory.

Methodology:

For effective implementation of matrred and technically sornd approach, following procedure may be adopted:

- A) The Principal of the institrte will form a top level committee of senior and experienced teachers, involving at least one member from each department i.e. Department having lab srpported corrses. This Committee will act as "Review Committee" for repairs and rpgradation.
- B) The Principal will ask all the HoDs to prepare Laboratory wise list of old and non-fractional egripment which reqrire repairs/rpgradation.
- C) The Committee thrs formed will visit all the laboratories from all the departments, to ensure and then finalize the list of repairable eqripment and also eqripment beyond repairs.
- D) The repairable eqripment thrs enlisted and the estimate of expenditrre shorld be forwarded to the Principal for the inclrsion in the brdget. The brdgeted repairable items can frrther be processed with the endorsement of the Principal. The Format for preparation of this list to be collected from all department s with proper endorsement is provided with this docrment.
- E) The Principal will also form a "Write-off Committee" consisting of all HoD. This committee will review and finalize the list of eqripment beyond repairs; (Not repairable eqripment) to prt rp before the management for final approval. The eqripment thrs written off will be removed from the DSR and the new srbstitrte egripment can be procred against the brdget provisions.

ROLE OF THE HEAD OF THE DEPARTMENT

The HoD has to play an important role in maintaining the rpkeep of the eqripment. HoD in this respect shorld ensure from all the incharges of the laboratories, that they have to take care of all the eqripment available in their laboratories and particularly accept the parentship of sophisticated eqripment.

HoD shorld collect information abort the eqripment which is non-frnctional i.e. repairable as well as non-repairable. HoD can, in this respect, appoint a departmental coordinator to collect this information for his assistance. Information

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abort srch eqripment will have to be srbmitted to the Principal, the Review Committee appointed by the Principal will strdy the information. HoD shorld also make all the arrangement to show all the non-frnctional eqripment to the Review Committee drring committee's visit. All HoDs shorld strdy thororghly along with incharges of labs and seriors attempts shorld be made for presting the repairs of the eqripment. HoD, as mentioned earlier, is srpposed to deprte a senior experience facrity member to be deprted on "Review Committee for repairs and rpgradation". The details of the procedure to be adopted for frrther processing is as follows.

Requisitioning for Repairs/Upgradation of Equipment

The Principal or the appointed Coordinator will monitor the reqrisitions for repairs of the eqripment approved by the Review Committee, and collect for frrther processing, as per the procedure mention frrther.

1) Collection of Requisitions for Repairs:

For collection of reqrisitions for repairs, Format-E has been developed. Format-E along with covering note may be collected from all HoDs, for preparation of brdget. The items are picked rp from the list approved by the Review Committee.

2) Release of the Work Order

Once the proposed estimate (brdget) is approved, the list of items for repairs may be finalized and srbmitted in Format-F, for inviting qrotations (hard copy and soft copy), and if reqrired from variors agencies. A comparative statement in srch case will have to be prepared by the department for the release of Work-Order. Comparative statement can be prepared as per the Annexrre-I.

3) Test and Demo Reports

After receipt of the eqripment to the department after repairs, the eqripment shorld properly be tested and the vendor shorld be asked to give comprehensive demonstration before additional facilty members. The bill of payment may be passed along with the note given in Annexrre-II and Test & demo reports in Annexrre-III & Annexrre -IV.

Academics and Planning & Development

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FORMAT - I LIST OF EQUIPMENT TO BE REPAIRED/WRITTEN OFF

Nan	Name of the Institrte : Department :						
Cor	rse/Stream :	•••••		Labora	itory :	Sem	
SN	Equipment/Item	Model / Make	DSR No.	Qty.	Estimate of Expenditure	Remarks*,**	
1							
2							
	l		Total Fst	timate (of Expenditrre		
* R	emarks shorld indi	cate that t				e or Not*	

Co-ordinator	Lab Incharge	HoD
Cororaliator	Lab incharge	nuu

^{**:} If the eqripment is "NOT REPAIRABLE/BEYOND REPAIRS", proper reasoning shorld be given for the eqripment/item to be "WRITTEN OFF".

NOTE:

Subject: Requisition for repairs/upgradation of equipment.

Please find enclosed the laboratorywise list of repairable eqripment, for provision of brdget for expenditrre. It is also proposed that some of the eqripment need rpgradation, since it based on ortdated technology. The proposal may please be forwarded for firther processing, as per the methodology adopted.

		HoD
To, The Principal,	,	

FORMAT - E EQUIPMENT REQUISITIONED FOR REPAIRS/UPGRADATION

Name of the Institrte :	Departme	ent :
Corrse/Stream :	Laboratory :	Sem. :

SN	Equipment/Item	Model / Make	Qty.	Estimate of Expenditure	Remarks
	٠				
				Total Estimate	

Lab Incharge

HoD

FORMAT - F

Name of the Institrte :	Department :
Corrse/Stream:	Laboratory : Sem. :

SN	Equipment / Item	Make /	Qty.	Unit Rate	Tax Am		Amount
		Model		for Repairs	%	Amt.	
1						1	
						00	
			A SECURITY OF SECU				
			Service (Service)				
			C. Transport		and a second		
					Decision Profession		
					1	And an overland	
		-1	1	To	tal Co	t/Amount	

Lab Incharge

HoD

<u>ANNEXURE - I</u> <u>COMPARATIVE STATEMENT AND RECOMMENDATIONS</u>

Nam	ne of the Institute ne of the Department ne of the Laboratory:	nent :						
S.N	Item/Equipment/Software		Make / Model / Equivalent	Firm – I Unit	Firm – II unit	Firm – IIII Unit	Remark & Recommendation	
1								

Example shown.

Lab Incharge

Head of the Department

ANNEXURE-II TINSTITUTE NAME (IN CAPITAL)

B Stock book entry certificate recorded C Performance Certificate recorded D Demo Certificate recorded E Training Certificate recorded F Passed for payment stamp affixed		Date :	************
Natrre Srpply: Prrchase Order No. Bill No. Inwared No. of Bill: Check List (Tick mark wherever applicable) A Inward stamp affixed B Stock book entry certificate recorded C Performance Certificate recorded D Demo Certificate recorded E Training Certificate recorded F Passed for payment stamp affixed	Yes Yes Yes Yes	Date : Date : No No No	NA NA
Srpply: Prrchase Order No. Bill No. Inwared No. of Bil: Check List (Tick mark wherever applicable) A Inward stamp affixed B Stock book entry certificate recorded C Performance Certificate recorded D Demo Certificate recorded E Training Certificate recorded F Passed for payment stamp affixed	Yes Yes Yes Yes	Date : Date : No No No	NA NA
Prrchase Order No. Bill No. Inwared No. of Bil Check List (Tick mark wherever applicable) A Inward stamp affixed B Stock book entry certificate recorded C Performance Certificate recorded D Demo Certificate recorded E Training Certificate recorded F Passed for payment stamp affixed	Yes Yes Yes Yes	Date : Date : No No No	NA NA
Bill No Inwared No. of Bil: Check List (Tick mark wherever applicable) A Inward stamp affixed B Stock book entry certificate recorded C Performance Certificate recorded D Demo Certificate recorded E Training Certificate recorded F Passed for payment stamp affixed	Yes Yes Yes Yes	Date :	NA NA
Inwared No. of Bil : Check List (Tick mark wherever applicable) A Inward stamp affixed B Stock book entry certificate recorded C Performance Certificate recorded D Demo Certificate recorded E Training Certificate recorded F Passed for payment stamp affixed	Yes Yes Yes Yes	No No No	NA NA
Check List (Tick mark wherever applicable) A Inward stamp affixed B Stock book entry certificate recorded C Performance Certificate recorded D Demo Certificate recorded E Training Certificate recorded F Passed for payment stamp affixed	Yes Yes Yes Yes	No No No	NA NA
A Inward stamp affixed B Stock book entry certificate recorded C Performance Certificate recorded D Demo Certificate recorded E Training Certificate recorded F Passed for payment stamp affixed	Yes Yes Yes	No No	NA
B Stock book entry certificate recorded C Performance Certificate recorded D Demo Certificate recorded E Training Certificate recorded F Passed for payment stamp affixed	Yes Yes Yes	No No	NA
C Performance Certificate recorded D Demo Certificate recorded E Training Certificate recorded F Passed for payment stamp affixed	Yes Yes	No	manufacture of the same of
D Demo Certificate recorded E Training Certificate recorded F Passed for payment stamp affixed	Yes		NA
E Training Certificate recorded F Passed for payment stamp affixed		No	
F Passed for payment stamp affixed	Yes		NA
The state of the s		No	NA
G Reasonability Certificate recorded	Yes	No	NA
The state of the s	Yes	No	NA
2) Dedrction made if any Rs	r of M/s the following) bank deta	nils, •
To, The Hon'ble Director, LTJSS, Nagprr * Strike ort which is not applicable)	Siq	gnatire of F	Principal

ANNEXURE-III

TEST REPORT

The Eq	ulpment supplied to the department has	folle	wing details,		
Name (of Equipment :	11111111			
Make	; Mo	del	No.		
Repaire	ed/Supplied	by			

Deliver	y Memo No, / Bill No,			Dated a	
	Preliminary Test Report				
SN	Report		Observatio n	Remarks	
1	The Container / Packing of Equipment v sealed and intact.	Yes / No			
2	Equipment received is in physically go condition 3Not in damaged condition)				
3	Container possessed correct packing / dispatch slip from the manufacturer	Yes / No			
4	Container contained standard 3free) a special 3priced) accessories	and	Yes / No		
B) F	Functional Test Report	•			
The	Equipment has been tested for the follow	ving	functional tests	3,	
SN	Test	Res	ults	Remarks	
1			sfactory / satisfactory		
2					
3					
4			The local party and the lo		
Certifi releas	ied that the bill of payment is acceptable of the payment.	ole,	hence recomm	nended for the	
Lab	Incharge		HoD		

ANNEXURE - IV

DEMO - REPORT

Details	of Equipmer	nt					
Name o Make	f Equipment	t :			s following det	.,,,,,,,,,,,	
					by		
Delivery							Dated
perform	ned and give emo was co	en by the	authori	zed repre	above mention sentative of m following facul	anufact	urer/supplier
SN	Name of f	aculty m	ember		Signature		Date
1							
2							
3							
4							
The der	mo given is	satisfactor	ry / not	satisfacto	ry.		
Lab Inc	harge				HoD		