

NATIONAL HIGHWAY AUTHORITY
Admn Wing (Transport Section)

REQUISITION OF VEHICLE FOR OFFICIAL / PRIVATE PURPOSE ON PAYMENT

Name: _____ **Designation:** _____ **BS:** _____

Place of Posting: _____

Name of Project / Head of Accounts: _____

Purpose of Requisition of Vehicle: _____

Place (s) of Visit: _____

Date for Requisition: From: _____ **To:** _____

Time _____ **From:** _____ **To:** _____

Type of Vehicle required: _____

Signature: _____

Date: _____

Cell No: _____

Assistant

Superintendent

AD (Transport)

Deputy Director (E-I)

Director (Establishment)