



CDFD

CENTRE FOR DNA FINGERPRINTING AND DIAGNOSTICS

Survey Nos. 584 to 587, 634 & 635, Opp: Metro Rail Pillar No. NUP-9,
Inner Ring Road, Uppal, Hyderabad – 500 039, Telangana State
Ph: +91-40-27216018, www.cdfd.org.in

TRANSPORT REQUISITION SLIP

Serial No. _____

Date _____

Name : Designation : Tel. No. :	Place to be visited :
Purpose :	Official / Personal :
Place at which required :	Time :
Date on which required :	Duration :

Signature of Head of Division

Dealing Clerk

I/C Transport

Controlling Officer

(To be filled up by the driver and countersigned by the Controlling Officer)

	Time	Meter Reading	No. of KMs run	Signature of the Driver
Start				
Return				

Date :

Controlling officer

- Important :**
1. Vehicles should be taken out only after approval.
 2. Log-book entries must be made by the official using the vehicles, on completion of the journey.