



Pon Pure Chemicals Group
catalyzing your growth

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Employee Asset Purchase Requisition Form

Name of the Employee		Date of Application	
Employee ID		Department	
Designation		Location	
Bank Name:	Account Number:	IFSC Code:	

Please tick (✓) Mark the applicable column for Assets

	TAB	Mobile Handset	Laptop	Data Card	Others (Specify)
Asset to be Purchased (✓) Now	<input type="checkbox"/>				
Purchasing for (✓)	First Time	Reason: _____			
	Replacement	Reason: _____			

Maximum eligible amount as per the Prevailing Policy (Only for Mobile Handset) :	Rs. _____			
TAB	Mobile Handset	Laptop	Data Card	Others

If Replacement, Last Purchase Date :	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Employee's Signature	Commercial In-Charge / Reporting Authority's Verification		
	Name:		
	Signature:		
Branch Manager / Regional Manager / DGM / GM / HOD / Reporting Authority Comments for Providing the above said Asset	Branch Manager / Regional Manager / DGM / GM / HOD Approval		
Comments:	Name:		
	Signature:		

For Head-Office Use Only

For Mobile Handset Purchase:			
EXISTING EMPLOYEES: Verification and Approval by Accounts Department		NEW EMPLOYEES: Verification and Approval by HR Department	
Mobile Handset Request ID		Date of Verification	
Amount Approved		Amount Approved	
Other Remarks		Other Remarks	
Accounts Manager's approval with date		HR's Approval	

Remarks for other assets purchase: