

**PROFORMA FOR CONDEMNATION****(To be filled by the Department)****Name of the Department: - \_\_\_\_\_**

List of the Equipment proposed for condemnation available in our department:-

1	2	3	4	5	6	7	8	9	10	11	12
S.No.	Description	Make & Model	Supplied By	Source of purchase(CF) / Dept. Fund or other	Qty	Year of Purchase	Year of Installation	Original cost of each items	Total cost	Reason of condemnation	F.I.R. No. if under AMC

**Signature with stamp of :-**

Three faculty members and Head of the department in case of Deptt./ Centres

OR

Three officers and Head / officer In-charge (In case of Non faculty Deptt./ Unit/ Section etc.)

**Recommendation of Sub Committee with Signature, Name & Designation**

**COMPUTER FACILITY**  
**ALL INDIA INSTITUTE OF MEDICAL SCIENCES**

FORM 3

**To be filled by Service Engineer**

**SUB:** Inspection for condemnation for non –functional person computers and peripherals at AIIMS.

Name of the Department:- \_\_\_\_\_

S. No.	Name of Equipment	Make & model	S. No. of Equipment	Year of purchase	Date of inspection	F.I.R No./ tag No(if under AMC)

- a) All listed items are beyond economic repair/obsolete/unserviceable and are recommended for disposal.  
 b) It is certified that there is no Biological /Chemical/Radiation hazardous material in any of the items listed  
 From condemnation

Name of the Engg. & Signature

Officer I/c Store, Computer Facility

Prof In-charge, Computer Facility

<b><u>Computers</u></b>	<b><u>Printer</u></b>	<b><u>UPS Rating</u></b>	<b><u>Scanner</u></b>	<b><u>Multifunctional Printer</u></b>
A) Thin client/PC/Server (each items separately – CPU, Monitor, Mouse, Keyboard etc)	Desktop Inkjet DMP	500VA 625 VA 800 VA	Barcode Flat Bed	Printer/ Fax/ Photocopier/ Scanner
B) Laptop	Line Barcode	1 KVA 2 KVA		