

GUEST HOUSE

Requisition Slip for Booking of Accommodation

(Please Attach Id Proof of Indenter as well as Guest and Payment Receipt)

Indenter's Name: _____ Mobile No.: _____

Indenter's Designation: _____ Department: _____

Name of the Guest: _____

Relation to the Guest (If applicable): _____

Address & Contact details of the Guest: _____

(Provide a separate list of guests with their contact details if the number of guests are more than one)

Expected Arrival Time: _____ Date: _____

Expected Departure Time: _____ Date: _____

Requirement: - No. of Single Beds: _____ No. of Double Beds: _____

(Allotted subjected to availability; May be allotted in shared Room)

Whether availing Food Services: Yes / No

Purpose of visit: _____

Charges will be paid by: Guest / Indenter

(If the charges are not paid by the guest, then the undersigned (Indenter) agrees to settle the bills. Also, the undersigned assure that the stay of the guests shall not exceed the sanctioned period)

Date:

Signature of the Indenter

Recommended /

Not Recommended

Guest House In-charge

Indenters BT No. / Adhar No. / Id Card No.	
DD/Cheque/ Online Transfer/RTGS/NEFTUTR No.	
Amount Paid including GST	
Room Allowed	
Receipt No.	

For office use only

The Guest House Accommodation for the period of ___ Days from _____ to _____ has been approved as above.

Registrar