

**Part A : To be filled-in by Head/Nodal Officer of the Department/Services**

<b>Sl. No (to be assigned by the Condemnation Committee) : -----</b> <b>Equipment/Goods Condemnation Code (for office use by ICC only) : .....</b>
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**Factsheet of the Equipment/Good Recommended for Condemnation**  
**(Note : include documentary evidence, in support of the data)**

Name of the Department :	
Name of the Equipment :	
Site/Place of Installation :	
Current Location :	
Function of the Equipment :	
Sl. No.	DETAILS OF THE EQUIPMENT
1	Make
2	Model No.
3	Supply Order No.
4	Serial No.
5	Manufacturer / Supplier
6	Indian Agent
7	Purchase Cost (in INR)
8	Date of Purchase
9	Date of Installation
10	Warranty Expired on
11	Non functional/out of use since when ?
12	Source of Funding (encircle whichever is applicable) Grant in Aid: JICA / FRENCH / ANY OTHER (Specify) INSTITUTE FUND RESEARCH FUND ANY OTHER (Specify)
13	Expected Functional Life as laid down by the manufacturer
14	External Expert's Recommendation, if applicable
15	Residual or Depreciated value of the equipment (enclose calculation sheet)
16	Is the equipment proposed to be condemned under Buy back, If yes give details
17	Does the equipment have any Biohazards, if so, necessary permission from appropriate authorities to be enclosed.

18	Stock Book Entry Done (encircle)	YES	NO
	If Yes : Central Store Ledger Entry No		
19	Minutes of the meeting of the Departmental Condemnation Committee (Please enclose copy)		
20	REASON (S) BEHIND RECOMMENDING FOR CONDEMNATION ((Please tick mark all that apply)) <ul style="list-style-type: none"> <li>• Beyond economic repair</li> <li>• Inability to get spares</li> <li>• Clinically obsolete</li> <li>• End of life (as declared by manufacturer)</li> <li>• Running cost of equipment is very high</li> <li>• Any other (specify)</li> </ul>		
21	This is being certified that this equipment has not been condemned earlier.		
	Notes: 1. Fill separate form for each equipment 2. Separate form is required if an equipment has come as an accessory with the main equipment 3. Equipment functioning effectively need not be condemned 4. For additional information, please attach a separate sheet 5. Price conversion in Indian rupees in case of imported equipment		

**(Biomedical or, Concerned Engineer/-Member - DCC)**

**(Member – D C C)**

**(External expert, if any)**

**(Member–D C C-Indenter/User)**

**(Head of the Department/Nodal Officer, Concerned Service)**

**Part B: To be filled-in by SGPGIMS Engineer/Biomedical Engineer/Concerned Engineer of the Agency, SGPGIMS**

1	Technical Inspection Report of Equipment/Good	
2	Justification for condemnation	
3	Alternative uses of the equipment/good and its parts	
4	Proposed method of disposal which may result in maximum benefit to the Institute	
5	Any other remarks	
<b>(Signature of Engineer of the Agency, if applicable)</b>		
<b>(Counter signature of Biomedical/Concerned SGPGIMS Engineer)</b>		

**Part C: Information to be filled-in by Material Management Department**

1	Date of Purchase of Equipment	
2	FOB Value of Equipment (in INR at the time of purchase)	
3	Cost of Spares available in store (If any)	
4	Terms & conditions for its disposal after expiry of Warranty period (If any)	
5	Any other remarks	
<b>Signature of Joint Director (MM)</b>		

**Part D: Recommendation of the Institute Condemnation Committee**

Remarks:

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**Condemnation of the Equipment: Recommended / Not Recommended**

F O or his Nominee	JD (MM) or his Nominee	Member	Member	Member (BME)
External Tech. Expert	<b>Concerned HoD</b>	Member Secretary		<b>Chairman Condemnation Committee</b>
<b>Director, SGPGIMS</b>				