DATA REQUISTION FORM

1. Name of Party : _____

2. Address of Party : _____

   _____

   _____

3. Particulars of party : _____
   (Govt./Private/Educational Institution/
   Research Scholars etc.) _____

4. Purpose of Requisition(Insurance/ _____
   Research (Educational /
   Funded Projects/Others-specify) : _____

5. Data Elements _____
   (Rainfall, Temp. Max & Min, Pressure,
   Wind, RH, Vapour Pressure) : _____

6. Type of Data / Averaging : _____

   (Hourly, Daily, Weekly, Monthly _____

   Yearly, Extreme Values, Normals) _____

7. Details of the Stations : _____

   Name of Station (s) _____

8. Period of Data : _____

   From ……………. to ……………. _____

9. Contact Number (Phone/Mobile No.) : _____

10. Email ID : _____

11. List of Enclosures (if any) : _____

Dated: **Signature of the applicant** _____

Place: **Designation & Seal**