



**UNIVERSITY OF NAIROBI
PROCUREMENT DEPARTMENT
INSPECTION AND ACCEPTANCE FORM**

PART A

Supplier's Name	
Postal Address	
Telephone Contact	
Date/Time Of Delivery	
Name of Person Delivering the Goods. Vehicle Reg. No	

PART B

Description Of Goods/Services/ works & Amount

PART C

LPO No:	Date of LPO:
Delivery Note No:	Date of Delivery:
Invoice No:	Date of Invoice:
Credit Note No:	Date of Credit:

PART D

Item	Yes (✓) or No (✗)	Comments
Accept		
Reject		
Duration of Delivery		

NB: ✓ FOR ACCEPTANCE

✗ FOR REJECT

PART E

INSPECTION AND ACCEPTANCE COMMITTEE MEMBERS

NO	NAME	SIGNATURE	DATE
1			
2			
3			
4			
5			
6			
7			

PART F

REMARKS BY CHAIR

*NB: This form must be completed at all times during the receiving of goods/services.
This form must be signed by members of the inspection and acceptance committee and the user.
The completed form will constitute part of the documents in processing payment.*