



༄༅། དཔལ་ལྷན་འབྲུག་གཞུང་།  
གནམ་གླུ་ལྷེལ་འཛེན་ལས་ཁུངས།  
གཞི་རྒྱུ་མཐོ་ཆས་དང་ ལྷེལ་འཛེན་ལྷན་ཁག།  
Royal Government of Bhutan  
**Department of Air Transport**  
Ministry of Infrastructure & Transport.



Paro International Airport.

Ref. No. \_\_\_\_\_

Date: \_\_\_\_\_

The Account Officer  
Department of Air Transport  
Paro International Airport

**Sub: POL Requisition**

Dear Sir,

Please arrange to issue a cheque for Nu.

.....  
..... in favor of M/s Bhutan Oil Distributor, Paro  
for withdrawal of POL in vehicle No. : .....

The following information is furnished below:

Present Book balance : .....  
Date of issue of last/previous cheque : .....  
Present KM reading : .....  
Previous KM reading : .....  
Total KM reading : .....  
Total Diesel/Petrol consumed : .....  
Avg. KM/Ltr of Diesel/Petrol : .....  
Present Bank Balance : .....

Certified that the Log book is completed in all respects and POL drawn so far has been entered in the Log Book of the above cited vehicle.

Yours Sincerely

**Controlling officer**



ཨ་ཁ་ཁ་ དཔལ་ལྷན་འབྲུག་གཞུང་།  
གནམ་གྲུ་འཕྲུལ་འབྲེན་ལས་ཁུངས།  
གཞི་རྒྱུ་མཁོ་ཆས་དང་ སྐྱེལ་འབྲེན་ལྷན་ཁག།  
Royal Government of Bhutan  
**Department of Air Transport**  
Ministry of Infrastructure & Transport.



Paro International Airport.

| Sl.<br>No. | Date | Supply Memo<br>No. | Fuel Consumption |        |       |       |      |     |        | Amount |     |
|------------|------|--------------------|------------------|--------|-------|-------|------|-----|--------|--------|-----|
|            |      |                    | Diesel           | Petrol | M/Oil | B/Oil | Acid | D/W | Grease | Nu.    | Ch. |
|            |      |                    |                  |        |       |       |      |     |        |        |     |
|            |      |                    |                  |        |       |       |      |     |        |        |     |
|            |      |                    |                  |        |       |       |      |     |        |        |     |
|            |      |                    |                  |        |       |       |      |     |        |        |     |
|            |      |                    |                  |        |       |       |      |     |        |        |     |
|            |      |                    |                  |        |       |       |      |     |        |        |     |
|            |      |                    |                  |        |       |       |      |     |        |        |     |

Signature and Name of Official

Date: