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| C:\Users\Tiwari\Pictures\33RML-Logo-Hindi.jpg | **Dr. Ram Manohar Lohia Institute of Medical Sciences,** **Vibhuti Khand, Gomti Nagar, Lucknow** |

**Quotation Notice**

 Quotations are invited from reputed packers & movers firms situated in Lucknow for packing and unpacking of furniture and other installations from Saswryu Enclave, Awadh Vihar Yojna, Gomti Nagar, Lucknow to Student Hostel, DR. Ram Manohar Lohiya Institute of Medical Sciences, Saheed Path Gomti Nagar, Lucknow. The bank draft in the name of Director, Dr. RMLIMS for Security money of Rs. 10,000.00 (Rs. Ten Thousand Only) is to be submitted along with quotation.

 Interested firms may submit their quotation on the form available on website www.drrmlims.ac.in, at reception of administrative building of the institute by last date 12.09.2024 upto 05:00pm.

Director

**Quotation form**

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| 1 | Name Of Firm | ……………………………….. |
| 2 | Full Address of the Firm | ……………………………..………………………………….. |
| 3 | Mobile No | ……………………………….. |
| 4 | E-Mail Address | ……………………………….. |
| 5 | GST NO | ……………………………….. |
| 6 | PAN No. | ……………………………….. |
| 7 | Draft No & Date for Rs. 10,000.00 as Security money. | ……………………………….. |
| 8 | Packing of material- transport safely- unpacking and installation work is to be completed within ….. days. Accepted…………………………Not Accepted……………………Your Offered period……………. | ……………………(please **✔**)……………………(please **✔**)……………………………….. |
| 9 | Scope of work:-There are 03 BHK 96 flats having furnitures and other installations. Whatever furnitures and installations are there is to be packed on a particular date, that must be installed on the same date in the Saheed Path hostel room. Damages shall be reimbursable by the packers and movers firm. The whole work must be completed in 20 days from the date of awarding of work order. If delay occurs, a penalty of Rs. 1000.00 per day shall be imposed.  The payment will be made after satisfactory work verified by the competent authority within 15 days.Accepted…………………………Not Accepted…………………….Your terms & conditions………...   | ……………………(please **✔**)……………………(please **✔**) ……………………………….. |
| 10 | Consolidated rate of whole work without GST | Rs………………………(Amount in words)………. |
| 11 | Percentage of GST & amount on above rate. | Rs………………………(Amount in words)………. |
| 12 | Total rate including GST amount. | Rs………………………(Amount in words)………. |

 **Signature & Seal of the firm**