

सूक्ष्मजीव प्रौद्योगिकी संस्थान, चण्डीगढ़/INSTITUTE OF MICROBIAL
TECHNOLOGY, CHANDIGARH

वार्षिक अनुरक्षण संविदा-मांगपत्र/AMC- INDENT FORM

एएमसी मांगपत्र सं0/AMC Indent No. _____ दिनांक/Dated: _____

वैज्ञानिक का नाम/Name of Scientist _____

प्रभाग का नाम/ Name of Division _____

परियोजना बजट शीर्ष/ Project Budget- Head _____

उपस्कर का नाम/ Name of the Equipment _____

पी.ओ सं0/ P.O. No. _____

संस्थापना की तिथि/Date of issue/installation _____

उपस्कर की लागत/Cost of Equipment _____

उपस्कर लगाने का स्थान/Location of equipment _____

क्या नया उपस्कर पहले ही एएमसी के तहत है - हाँ/नहीं.

Whether equipment is already under AMC - Yes/No

यदि हाँ तो क्या एएमसी/ If Yes then whether AMC is

1. व्यापक/अव्यापक है / Comprehensive/Non-Comprehensive _____

2. गत वर्ष की एएमसी की दरें / Rates for previous year AMC _____

3. एएमसी आरंभ होने की तिथि / Period of AMC from _____

4. निवारक जाँचों की संख्या व तिथि _____

No. & date of preventative Call attended

5. खराबी की जाँच की संख्या व तिथि _____

No. & date of Breakdown Call attended

6. क्या सेवाएँ संतोषजनक हैं हाँ/नहीं/

Whether services are satisfactory Yes/No

मुख्य/भारतीय एजेंट आपूर्तिकर्ता का नाम _____

Name of Principal/Indian Agents supplier

फर्म का नाम जो एएमसी करेगी _____

Name of Firm who is to undertake AMC

प्रयोग की अवधि/ Duration of use _____

प्रस्तावित एएमसी की प्रकृति _____ व्यापक/अव्यापक
Nature of AMC proposed Comprehensive/Non-Comprehensive

अपेक्षित जाँचों की संख्या/ (क) निवारक/ _____ (ख) खराबी _____
No. of Calls required (a) Preventive (b) Breakdown

प्रस्तावित एएमसी के लिए अनुमानित मूल्य _____
Approximate cost for proposed AMC

निवारक जाँच के दौरान किए जाने वाले कार्य का विवरण Details of works to be undertaken
during preventive calls _____

मांगकर्ता/ Indenting Officer दिनांक/Dated: विभागाध्यक्ष/परियोजन प्रमुख/HOD/Project
Leader

संस्तुत/असंस्तुत उसी कार्य के लिए व्यापक/अव्यापक एएमसी तथा पृष्ठ सं० _____ पर
क्रम सं० _____ पर दर्ज । बजट शीर्ष _____
टिप्पणियाँ यदि कोई हों _____

Recommended/not recommended the Comprehensive/Non Comprehensive AMC for the same
& entered at Page No. _____ Sr. No. _____ Under budget _____
Comments if any _____

यंत्र प्रभारी दिनांक: यांत्रिकी एवं ईएसडी प्रमुख
Instrument-Incharge Dated Head Instru.. & ESD

भं एवं क्रय अधि./एसपीसी- II/ SPO/SPC II

निदेशक/Director

सूक्ष्मजीव प्रौद्योगिकी संस्थान, चण्डीगढ़
INSTITUTE OF MICROBIAL TECHNOLOGY, CHANDIGARH

अनुलग्नक 'ए'/Annexure 'A'

दरसूचियों के बिना सामान की खरीद/PURCHASE OF GOODS WITHOUT QUOTATIONS

(मात्र रु.15,000/- (मात्र पंद्रह हजार रुपए)/ मात्र रु.1,00,000/- (मात्र एक लाख रुपए)मूल्य के सामान की खरीद हेतु / For purchase of goods upto the value of Rs.15000/- (Rupees Fifteen Thousand only)/Rs.1,00,000/-(Rupees one Lakh only)).

1. “मैं,श्री/सुश्री/डॉ..... व्यक्तिगत तौर पर संतुष्ट हूँ कि खरीदा गया सामान आवश्यक गुणवत्ता तथा विनिर्देशों का है तथा विश्वसनीय आपूर्तिकर्ता से उचित दरों पर खरीदा गया है / I, Sh./Ms./Dr....., am personally satisfied that these goods are purchased are of the requisite quality and specification and have been purchased from a reliable supplier at a reasonable price.”
2. “यह भी प्रमाणित किया जाता है कि वांछित वस्तु अनुसंधान एवं विकास कार्यों हेतु विशिष्ट प्रयोग के लिए खरीदी जा रही है तथा परियोजना शीर्ष (परियोजना सं.....) के लिए प्रयोग में लाई जाएगी ।(यदि यह लागू न हो तो कृपया इसे काट दें)”/ It is further certified that the required item is for specific use of the R&D and will be utilized for the project titled _____ (Project No.)”.
(Strike out if not applicable)
3. “प्रमाणित किया जाता है कि यह वस्तु भण्डार में उपलब्ध नहीं है ।”/It is certified that the item is not available in the store”.

स्वीकृति रुपये/Sanctioned Rs._____ (In figures and Words)

संस्वीकृति प्राधिकारी के हस्ताक्षर
Signature of the Sanctioning Authority
दिनांक/ Date
नाम एवं पदनाम.....
Name & Designation.....

PURCHASE OF GOODS BY LOCAL PURCHASE COMMITTEE

(For Purchase of goods valuing between Rs.1.00 to 5 lakhs only/ 15,001 to 1 Lakh)
(Strike out whichever is not applicable)

- a) "Certified that we, the members of the Purchase Committee are jointly and individually satisfied that the goods recommended for Purchase are of the requisite specification and quality, priced at the prevailing market rate and the supplier recommended is reliable and competent to supply the goods in question. Accordingly we enclose the quotation no. dated.....of M/s. for placing Purchase Order.

Member

Member

Member

Name:

Desig.:

Divn. :

Date :

- b) " It is certified that the required item is for specific use of the R&D and will be utilized for the project titled " _____ (Project No.)" (Strike out if not applicable)

Sanctioned Rs. _____ (In figures and Words)

Signature of the Sanctioning authority

Date _____

Name & Designation _____

EMERGENCY PURCHASE CERTIFICATE

(For Purchase of goods valuing more than Rs. 5 lakhs to be furnished by Sub-Committee)

“Certified that we, members of the Purchase Committee are jointly and individually satisfied that the goods Purchased are of the requisite specification and quality, and have been purchased from a reliable supplier at a reasonable price”.

(Indentor)

(Representative of Purchase)

(Representative of Accounts)

Date:

PROPRIETARY ARTICLE CERTIFICATE (PAC)
(To be submitted by the indenter along with the indent)

Certified that to the best of our knowledge, the items indented vide indent No..... dated.....are manufactured by M/sonly.
There is no other option for the Laboratory except to Purchase this item(s) as it is having unique feature which is essential for R&D job and which is not available in any other similar equipment. I/We shall be held responsible in case the certificate is found to be incorrect.

Signature of Indenting Officer/Project Leader
Designation:

Scientist as project Leader

Date : _____

SINGLE TENDER CERTIFICATE

(For procurement from a single source basis only during emergency)

The items indented are necessarily to be Purchased from M/s.....for the following reasons:.....

.....

Date :

(Signature with date and designation of the Indenting Officer/project Leader)