



Ref. CMPDI/RI-1/S&P/Env Lab/116/17-18/315

Date: 13.07.2017

NOTICE INVITING QUOTATIONS (NIQ)

To

.....

.....

.....

Sealed quotations are invited from NABL accredited calibration laboratories for calibration of Respirable Dust Sampler (RDS) and Fine Dust Sampler (FDS) machines as shown in table below:

Sl. No.	Description of work	Total quoted amount (Rs.) Inclusive of GST
1	<p>Calibration of following Sampling machines:</p> <p>(a) Fine Dust Sampler (FDS) machines (Flow & Time), Make/Model No.: Spectro/SLE-FPS-105. Quantity- 8 (eight) nos.</p> <p>(b) Respirable Dust Sampler (RDS) machines (Orifice Flow Meter & Time Totalizer). Make/Model No. Spectro/SLE-RDS-103. Quantity- 4 (four) nos.</p> <p>(c) Gaseous sampling Attachment (Rotameter). Quantity- 4 (four) nos.</p>	

TERMS & CONDITIONS

- PAN & GST:** Copies of PAN no. and GST Registration nos/Certificate must be submitted along with the offer.
- Mode & Method of Submission of Quotations:** Quotations must be in sealed cover superscribing Quotations No. and date and time of opening and sent at the below mentioned address by speed/registration post.
HOD(S&P), CMPDI, RI-1,
G.T Road, West End,
Asansol-713304. Ph. No.-09434790507.
- Due Date:** The sealed Quotations will be opened on 27.07.2017 at 4.00PM.
- Rates:** The quoted rates should be inclusive of GST as applicable.
- Place of calibration:** The machines are to be calibrated at
CMPDI, RI-1, G.T Road, West End,
Asansol, West Bengal-713304.

फोन नम्बर / Phone No. : RD (0341) 225 3504 (Office) , (0341) 225 4133 (Res.)
फैक्स नम्बर / Fax No.: (0341) 225-0935, EPABX: (0341) 225 - 2086/2916/2001
ई-मेल / e-mail: rdir1_cmpdi@coalindia.in ; वेबसाईट / Website Address: www.cmpdi.co.in
Registered Office: Gondwana Place, Kanke Road, Ranchi - 834031 (Jharkhand)





cmpdi
A Mini Ratna Company

सेन्ट्रल माईन प्लानिंग एण्ड डिजाइन इन्स्टीच्यूट लिमिटेड
(कोल इण्डिया लिमिटेड की अनुबंधी कंपनी / भारत सरकार का एक लोक उपकरण)
बोरीया स्टेशन-१, वेस्ट एण्ड, जी. टी. रोड, असन्सोल-७१३३०४
Central Mine Planning & Design Institute Limited
(A Subsidiary of Coal India Limited / Govt. of India Public Sector Undertaking)
Regional Institute-1, G.T. Road West, Asansol-713304
CORPORATE IDENTITY NO. U14292JH1975G01001223

6. Payment: 100% of the billed amount will be paid on successful completion of the work and production of pre-receipted bill in triplicate along with signed challan. The delivery challan must be produced in duplicate. **The payment shall be made by e-payment (RTGS/NEFT).** You are advised to fill up the ECS mandate form, enclosed herewith, for this purpose.

7. Paying Authority: HOD (F), CMPDI, RI-1, Asansol.

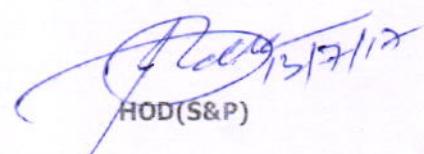
8. Calibration Certificate: Acceptance of work is subject to provision of item-wise calibration certificate(s). The calibration should be valid for a period of 12 months from the date of calibration.

9. NABL Accreditation: The Calibrating laboratory must be NABL accredited for calibration of above mentioned machines. Copy of NABL accreditation certificate should be submitted along with the quotation.

10. Validity: The offer must be valid for minimum 30 days.

CMPDI, RI-1 reserves the right to cancel the NIQ in part or whole without assigning any reason. No correspondences in this regard will be entertained.

This issues with the approval of competent authority.



Distributions:

1. Regional Director, RI-1, Asansol
2. HOD (F), RI-1, Asansol
3. HOD (Env), RI-1, Asansol
4. Committee Members, RI-1, Asansol
5. Notice Board.
6. Office copy



फोन नम्बर / Phone No.: RD (0341) 225 3504 (Office), (0341) 225 4133 (Res.)
फैक्स नम्बर / Fax No.: (0341) 225-0935, EPABX. (0341) 225 - 2086/2916/2001
ई-मेल / e-mail: rdr1_cmpdi@coalindia.in ; वेबसाईट / Website Address: www.cmpdi.co.in
Registered Office: Gondwana Place, Kanke Road, Ranchi - 834031 (Jharkhand)

E-PAYMENT

To,

Central Mine Planning & Design Institute Ltd.
Regional Institute –I, G.T.Road (W),
Asansol- 713304.

Ref:- Authorization of all our payment through electronic fund transfer system /RTGS
/CBS / Intra Bank transfer

We hereby authorize CMPDI Limited to make all our payments against our bills, Refund of earnest Money Deposit and Security Deposit, through Electronic Fund Transfer System /RTGS/CBS/Intra Bank Transfer.

The details for facilitating the payments are given below.

(TO BE FILLED IN CAPITAL LETTERS)

1. Name of the Beneficiary: _____

2. Address: _____

City _____ PIN CODE _____

E-mail ID _____

Telephone No. (With STD Code) _____

Mobile No. _____

3. Bank Particulars

Bank Name	Branch Name		
		Bank Branch Code	
Branch AddressPIN CODE Telephone No. (with STD Code) FAX NO. (With STD Code).....		
9 digit MICR Code of the BANK Branch (Enclosed copy of a cancelled cheque)			
11 digit IFSC Code of beneficiary Branch			
Bank Account Number			
Bank Account Type (Tick One)	1. Saving 2. Current 3. Loan 4. Cash Credit 5. Others (If other ,specify)		

Permanent account number (PAN)	
-----------------------------------	--

6. CMPDI Vendor Code:

I/We hereby declare that the particulars given above are correct and complete .If the transaction is delayed or credit is not effected at all for reasons of incomplete or incorrect information . I/We would not hold the Company responsible. We also agree to bear the bank charges ,If any for enabling such transfer.

SIGNATURE.....

(AUTHORIZED SIGNATORY)

Name.....

Date.....

BANK CERTIFICATION

It is certified that above mentioned beneficiary holds a Bank account No.....

With our branch and the bank particulars mentioned above are correct.

SIGNATURE.....

(AUTHORIZED SIGNATORY)

Name.....

Date...