OT- NIT_35098	ANNEXURE- A	DT:
NAME OF THE VENDOR (AS PER OFFER)-		

sl	BHEL REQUIREMENT	VENDORS COMMENTS
1-	Pl confirm the offer validity should be 120 days from the date of Technical bid opening(i.e. 14.11.2017).	
2-	pl confirm the BG should be submitted as per BHEL format as per BHEL tender condition.	
3-	confirm the Payment term as :100% shall be made within 60 days after receipt & acceptance of items at BHEL store Trichy/Ranipet.	
4-	Confirm the LD condition as per BHEL tender condition(i.e. "0.5% per week of undelivered portion subject to max up to 10% of total order value")	
5-	confirm the Risk purchase clause as per tender.	
6-	confirm the delvery within 45 days from Purchase order date.	
7-	confirm the execution of agreement in 100 Rs Bond paper as per tender condition .	
8-	confirm the quoted rates (inclusive of packing ,frieght ,insurance and all other charges) are firm for **TWO YEARS** , F.O.R. BHEL Trichy/Ranipet Hospital stores.**GST** extra is applicable.	
9-	Confirm the quoted branded products should be supplied through out the contract period of **TWO YEARS** and the rates are firmed for the same . No escalation will be entertained . (Incase Govt reduces the rate of the specific item, the rate will be reduced as per DPCO rate accordingly)	
10	original/ copy of Lab test report of the supplied items has to be submitted to BHEL along with product of each batch. (This is mandatory. Else payment will not be processed)	
11	As per tender condition Annexure-II clause 1 to 4, PO documents shall be submited with respective PO copies & consolidated list (**Annexure-B attached**) for the same for further consideration of your offer.	

Vendor sign & seal with date

OT- NIT_35098	ANNEXURE- B			DATE:	
VALUE / DATA TO BE FILLED BY VENDORS & SUPPORTING DOCUMENTS TO BE ATTACHED.					
NAME OF THE VENDOR (AS PER OFFER)-			….		
SL NO	PO NO	PO DATE (LAST 3 YEARS)	NAME OF THE CUSTOMER (CPSU / CENTRAL GOVT ONLY)	TOTAL PO VALUE IN RS (INCLUDING GST)	VALUE IN LAKHS
1					-
2					-
3					-
4					-
5					-
6					-
7					-
8					-
9					-
10					-
11					-
12					-
13					-
14					-
15					-
16					-
17					-
18					-
19					-
20					-
21					-
22					-
23					-
24					-
25					-
26					-
27					-
28					-
29					-
30					-
31					-
32					-
33					-
34					-
35					-
TOTAL =				-	-

NOTE: 1

1- STATE GOVT / PRIVATE SECTOR PO NEED NOT BE FILLED IN THE ABOVE LIST.

2- VENDORS SHALL ENCLOSE ALL THE ABOVE PO'S PAGE INDICATING CUSTOMER NAME/ VENDOR NAME, TOTAL PO VALUES SHALL BE HIGHLIGHTED.

3- PL FILL THE POS (CPSU/CENTRAL GOVT) IN THE ABOVE FORMAT DATE WISE CHRONOLGICAL ORDER FOR LAST 3 YEARS.