Indent No:

Date:

**(To be Filled By Purchase Section.)**

**Details of Indenter/ Indenting Department**

|  |  |  |
| --- | --- | --- |
| **Name of Indenter:** | **Designation:** | **Department:** |
| **Email ID:** | **Contact No:** | **Name of HOD.** |

**Requirement: (Please tick**  **)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Fresh** | **Additional** | **Repair/replacement** | **Recurrent****EXISTING RC:** YES/NO | **Any other(Specify)** |

 **CATEGORY OF ITEMS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **A. Consumables** | **Category** | **(Attach separate sheet. Annex.1)** | **Pack size/Unit of measurement**. | **Estimated Cost. (Including GST etc)** |
| 1. Drugs
2. Chemical & Reagents
3. Disposable & Consumables
4. Office Stationary
5. Sanitary
6. Repair
7. Any other (Please Specify)
 |
|  | Approx. Unit price | Approx. Total cost |
|  |  |
| **B. Assets (Non IT)** | **Category** | **(Attach separate sheet. Annex.2.) Note: 1. For high-end equipment 5yr warranty followed by 5yr CMC is desirable.****2. For Medical equipment costing more than 30 Lakhs, Specification need to be vetted by External Experts.** | IAC Approval | **Yes** | **No** |
| 1. Equipment
2. Instrument
3. Electrical items
4. Electronic items
5. Accessories
6. Furniture
7. Replacement
8. Any other
 | **Estimated Cost.****(Including GST, Warranty, CMC/AMC etc.** |
| Approx. Unit price | Approx. Total cost |
|  |  |
| **C. Assets (IT)** | **Category** | **(Attach separate sheet. Annex.2.A)****(In case of IT Items the Departments will fill the ANNEXURE 2 A only, The IT Section will raise an Indent to S&P after examination of the same)** | **Estimated Cost.****(Including GST, Warranty, CMC/AMC etc** |
| 1. Computers.
2. Printers.
3. Computer Accessories.
4. Network devices
5. Network

accessories1. Software
2. Any other (Please specify)
 |
| Approx. Unit price | Approx. Total cost |
|  |  |

|  |  |  |
| --- | --- | --- |
| **GeM Avaiability:** | **Yes** | **NO** |
| Attach signed copy of suitable product leaflet from GeM | Attach signed copy of search result, with reasons and justifications. |
| GeMARPTS to be signed by indenter |
| Availability at central store | YES/NO | Signature of Store Keeper | Signature of ASO |
| Tentative desired delivery period and reasons. |  |
| **If research Project.** The Duration and Name of the Project and PI, Project ID |  |
| Mode of procurement suggested | GeM.149 I, II,III/ E Tender/Limited Tender/ R.C./ GFR 154/GFR 155/GFR 166 I , III (PAC)\*, 166 II Emergency\*.\*PAC/Emergency format to be attached. |

N.B: Only typed indent without any cutting/over writing will be accepted. No specific Make/Brand to be mentioned other than PAC items.

**(CONSUMABLES)**

(Drugs, Chemical & Reagents, Disposable & Consumables, Office Stationary, Sanitary , Repair, Any other (Please Specify)

**Category: ……………………………………Item:……………………………………**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | Quantity (Packs) | Pack size | Total |
|  |  |
| 2. | Composition/formulae/Specification And Desired self-life. |  |
| 3. | Available stock in hand. |  |
| Duration to last. |  |
| 4. | Indented item duration to last. |  |
| 5. | Last 6month to 1year consumption patterna. If chemical/reagents: Per pack or per kit test done to be mentioned.(Attach separate sheet ifrequired) |  |
| 6. | Detail Purpose & Justifications. |  |
| 7. | Last purchase details.P.O Number/Quantity/Per Unit Price. |  |
| 8. | Estimated cost is based on Budgetary quotations, LPR, or Anyother. |  |
| 9. | Details of Distribution details if applicable.(Attach Separate sheet if required) |  |
| 10. | Details of Prospective Vendors/ OEM etc, (**If in RC, mention the details**) Any other remarks |  |

**ANNEXURE-2 (ASSETS)**

(Equipment, Instrument, Electrical items, Electronic items, Accessories, Furniture, Replacement, Any other)

**Category:…………………………………………….Item:………………………………………………**

|  |  |  |
| --- | --- | --- |
| 1. | Quantity |  |
| 2. | Detailed Specification(Attach Separate Sheet if Required) |  |
| 3. | Details about the life of equipment-/instruments etc. |  |
| 4. | Warranty in years. As per requirement |  |
| CMC in years.As per requirement |  |
| 4. | a. Last Procurement Details.(P.O Number/Quantity/Unit Price) |  |
| b. Number of Same/similar items presently in use |  |
| 5. | Detail Purpose & Justifications. (Attach separate sheet if required) |  |
| 6. | Budgetary quotations. (Including CMC, Warranty, accessories/attachments etc) |  |
| 7. | Details of annual requirement of consumable , accessories, spares and cost thereof, if any. |  |
| 8. | Site readiness like area, power, civil works etc. |  |
| 9. | Requirement of installation/training (Operational/maintenance) etc |  |
| 10. | Details of Prospective Vendors/ OEM etc.(Preferably three)Any other remarks |  |

**TO BE SUBMITTED TO IT CELL**

**ANNEXURE-2 A (ASSETS IT)**

(Computers, Printers, Computer Accessories, Network devices, Network accessories, Software, Any other Please specify)

**Category:…………………………………………….Item:…………………………………………………**

|  |  |  |
| --- | --- | --- |
| 1. | Quantity |  |
| 2. | Detailed Specification(Attach Separate Sheet if Required) **(IT Section to examine the same & Suggest**) |  |
| 3. | Details about the life of indented item. **(IT Section to examine the****same & Suggest**) |  |
| 4. | Warranty in years. As per requirement |  |
| CMC in years.As per requirement |  |
| 4. | a. Last Procurement Details.(P.O Number/Quantity/Unit Price) |  |
| b. Number of Same/similar items presently in use |  |
| 5. | Detail Purpose & Justifications. (Attach separate sheet if required) |  |
| 6. | Budgetary quotations. (Including CMC, Warranty, accessories/attachments etc) |  |
| 7. | Details of annual requirement of consumable if any. |  |
| 8. | Site readiness like area, power, civil works etc. |  |
| 9. | Requirement of installation/training (Operational/maintenance)etc |  |
| 10. | Details of Prospective Vendors/ OEM etc.(Preferably three) Any other remarks |  |