



भारतीय अन्तर्देशीय जलमार्ग प्राधिकरण
INLAND WATERWAYS AUTHORITY OF INDIA

(पोत परिवहन मंत्रालय, भारत सरकार)
(M/O. Shipping, Govt. of India)

देशीय कार्यालय:
राजघाट, पोस्ट - गुलज़ारबाग,
पटना - 800007
फोन : 0612- 2310017
फैक्स : 0612-2310029

Regional Office:
Gaighat, P. O. - Gulzarbagh,
Patna - 800007
Phone/Tele fax : 0612-2310029
E-mail: iwaipta@rediffmail.com

No12/IWAI/Engg/P (53)/15-16

06.12.2016

NOTICE INVITING QUOTATION

Sub:- NIQ for supply of safety shoes for vessel crew-reg

Sealed quotations are invited from suppliers for supply of safety shoes make tiger. Description of safety shoes is enclosed as Annex-1. The quoted rates must be inclusive of cost of safety shoes, taxes and transportation etc on following terms and condition:-

Terms & conditions

1. The price shall be quoted including all taxes, transportation etc.No other extra charges will be entertained.
2. The supply should be completed within 10 days from the date of receipt of the supply order.
3. The material shall be delivered at the Office of Director, Inland Water Ways Authority of India, Gaighat,P.O Gulzarbagh, Patna - 800 007.
4. 100% payment shall be made by RTGS within 10 days from the date of completion of the supply and certification of the bill by the officer concerned after deduction of the statutory dues, if any.
5. The firm should have submit self certified copy of PAN card, registration number alongwith the quotation.
6. IWAI reserves the right to accept or reject any/all quotations without assigning any reason or any prior notice.

The sealed quotation should reach to this office latest by 14.12.2016 at 13:00 hrs. Any delay in receipt of quotation whatsoever will not be entertained. The received quotation will be opened on same day at 15:00 hrs.


Director

Encl. As stated
Copy to:- 1. IWAI, Website
2. IWAI, Patna office, Notice board

BOQ for supply of safety shoes

S.no	Description	Qty	Rate	Amount
01	Safety shoes (make Tiger)	62		
	Tax @			
	Total			

Signature of Authorized signatory

Name
(IN BLOCK LETTERS)

Designation.....

Name of firm.....

Address

Contact No.....

Seal of the firm.....

Dated.....