

TO BE RETURNED WITH

UNDERTAKING

WE HEREBY UNDERTAKE THE FOLLOWING:

- 1.** We will not sell the product (s) to other institutions, bodies and also in the market on the rates less than those quoted by us to the University.
- 2.** The goods on which Sales Tax has been charged are not exempted for payment of Sales Tax under C.S.T. Act or U.P.S.T. Act or the rules made there under and the amount mentioned on account of Sales Tax on goods is not more than what is payable under the provisions of the relevant Act or Rules made there under.
- 3.** The rate of Excise Duty mentioned in the quotation is in accordance with the provisions of the rules and the same is payable to the Excise Authorities in respect of the stores.
- 4.** The goods / Stores / articles offered shall be of the best quality and workmanship and their supply will be strictly in accordance with the technical specifications and particulars as detailed in the quotation.
- 5.** The information furnished by us in the quotation is true and correct to the best of our knowledge and belief.
- 6.** We have read and understood the rules, regulations, terms and conditions and agree to abide by them.

Authorised Signatory
(Seal)

BANARAS HINDU UNIVERSITY
VARANASI – 221 005

TO BE RETURNED WITH QUOTATION

Following proforma should be filled in and duly signed by the firm and sent alongwith the quotation. (Please refer to the detailed instructions/notes before filling this proforma).

1. Validity of the offer :
2. Approximate Delivery Period :
3. (a) Whether rates have been quoted F.O.R. site and covers packing forwarding and insurance charges. : YES / NO
(b) If not, please mention the same :
4. (a) Whether the prices are inclusive of Sales Tax and other taxes. : YES / NO
(b) If not, kindly specify the amount / rate :
5. If the Sales Tax is charged extra, declaration for charging Sales Tax correctly attached. : YES / NO
6. (a) Whether supply will be made directly or through any Local / Regional / Authorized Dealer / Stockist :Directly / Stockist / Authorized Dealer
(b) If through a Stockist / Dealer : -
(i) Name and full address of the Party :
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(ii) Whether the order to be placed with the : Principal / Stockist / Dealer
(iii) Who will raise the bill : Principal / Stockist / Dealer
(iv) Cheques will be drawn in favour of : Principal / Stockist / Dealer
(v) Whether any Delivery, Packing and Forwarding YES / NO
Charges will be payable to local Stockist/Dealer : (Please specify the amount/percentage etc, if any)
7. Our terms of payment (Please indicate your preference by a (✓) mark). Please note that no other payment terms are likely to be accepted. .
(a) **For Local Firms or if the bills are raised by the Local Dealers.**
(i) 100% Payment on bill basis :
OR

(ii) 100% payment against Proforma Invoice after receipt of materials in good condition, installation and satisfactory report.

(Only under exceptional cases)

(b) If the bills are raised by outstation Firms

(i) 100% Payment on bill basis :

OR

(ii) 100% payment against Proforma Invoice after receipt of materials in good condition, installation and satisfactory report :

OR

(iii) D.G.S. & D. Terms of Payment for D.G.S. & D Rate Contract items :

OR

(iv) 75% against Proforma Invoice (at site) or documents through Bank and 25% after receipt of materials in good condition, installation and satisfactory report. :

OR

(v) 90% payment against Proforma Invoice (at site) or documents through bank and 10% after receipt of materials in good condition, installation and satisfactory report (Only under special Circumstances). :

8. Whether any Excise Duty is payable on the items. : YES / NO
If yes, indicate the amount / percentage. :%

9. Whether any installation charges are payable extra. : YES / NO
If yes, amount to be specified. :

10. Whether any discount for educational institution offered on the printed price list of the manufacturer. : YES / NO
Please mention the amount / percentage. :

11. Whether the product is on DGS &D/D.I. Rate contract. : YES / NO
If yes, please enclose a photocopy of the same. : YES / NO

12. Whether the product bears I.S.I. Mark. : YES / NO
If yes, please mention the I.S.I. License no. :

13. (a) Whether the firm is Sales Tax payer. : YES / NO
If yes, please mention the Sales Tax Numbers. :

(b) Whether the Local Dealer(s) is / are Sales Tax payer(s) : YES / NO
If yes, please mention the Sales Tax numbers of each :

14. Whether printed / authenticated price list of the Firm's Products and Catalogue etc. enclosed. : YES / NO

Signature of the Authorised Official with Seal