

अनुबंध | Contract



अनुबंध क्रमांक | Contract No: GEMC-511687783575517

अनुबंध तिथि | Generated Date : 02-Feb-2024

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| संगठन विवरण Organisation Details | | खरीदार विवरण Buyer Details | | | | |
| प्ररूप Type : | State Government | पद Designation : | Chief pharmacy Officer | | | |
| मंत्रालय Ministry : | - | संपर्क नंबर Contact No. : | 01667-230424- | | | |
| विभाग Department : | Health Department Haryana | ईमेल आईडी Email ID : | buycon.cso.fatehabad@gembuyer.in | | | |
| संगठन का नाम Organisation Name : | National Health Mission | जीएसटीआईएन GSTIN : | - | | | |
| कार्यालय क्षेत्र Office Zone: | Civil Surgeon Office Fatehabad | | Central drug store,behind bus stand, Civil Hospital Fatehabad,, | | | |
| | | पता Address : | FATEHABAD, HARYANA-125050, India | | | |
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| वित्तीय स्वीकृति विवरण Financial Approval Detail | | भुगतान प्राधिकरण विवरण Paying Authority Details | | | | |
| आईएफडी सहमति IFD Concurrence : | No | Role: | BUYER | | | |
| प्रशासनिक अनुमोदन का पदनाम | Civil Surgeon Fatehabad | भुगतान का तरीका | Offline | | | |
| Designation of Administrative Approval: | | Payment Mode: | | | | |
| वित्तीय अनुमोदन का पदनाम | Civil Surgeon Fatehabad | पद Designation : | Chief pharmacy Officer | | | |
| Designation of Financial Approval : | | ईमेल आईडी Email ID : | buycon.cso.fatehabad@gembuyer.in | | | |
| | | जीएसटीआईएन GSTIN : | - | | | |
| | | | Central drug store,behind bus stand, Civil Hospital Fatehabad,, | | | |
| | | पता Address: | Fatehabad,, | | | |
| | | | Fatehabad, HARYANA-125050, India | | | |
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| विक्रेता विवरण Seller Details | | | | | | |
| जेम विक्रेता आईडी GeM Seller ID : | SWSC230008305155 | | | | | |
| कंपनी का नाम Company Name : | B S Traders | | | | | |
| संपर्क नंबर Contact No. : | 09992114003 | | | | | |
| ईमेल आईडी Email ID : | bstraders2008@gmail.com | | | | | |
| पता Address : | HOUSE NO 25,BHAGWAN SINGH, NEW VINODNAGAR,30 FEET ROAD, MILL GATE, INFRONT OF GURU KRIPYA,HISAR, Hisar, HARYANA-125001, - | | | | | |
| एमएसएमई पंजीकरण संख्या MSME Registration number : | UDYAM-HR-06-0034574 | | | | | |
| एमएसई सामाजिक श्रेणी MSE Social Category : | OBC | | | | | |
| एमएसई लिंग श्रेणी MSE Gender : | Male | | | | | |
| जीएसटीआईएन GSTIN: | 06CAQPS0899R1ZD | | | | | |
| *जिसके नाम के पक्ष में GST/TAX इनवॉइस पेश किया जाएगा GST / Tax invoice to be raised in the name of - Buyer | | | | | | |
| वितरण निर्देश Delivery Instructions : NA | | | | | | |
| उत्पाद विवरण Product Details | | | | | | |
| # | आइटम विवरण Item Description | आइटम विवरण Ordered Quantity | इकाई Unit | इकाई मूल्य (INR) Unit Price (INR) | कर विभाजन (INR) Tax Bifurcation (INR) | मूल्य (INR में सभी शुल्क और कर सहित) Price (Inclusive of all Duties and Taxes in INR) |
| 1 | उत्पाद का नाम Product Name : Unbranded Eraser 1 ब्रांड Brand : NA ब्रांड प्रकार Brand Type : Unbranded कैटलॉग की स्थिति Catalogue Status: Catalogue not verified by OEM कैसे बेचा जा रहा है Selling As : Reseller not verified by OEM श्रेणी का नाम और चतुर्थांश Category Name & Quadrant : Eraser (Q4) मॉडल Model: SVA-8-SCL-Er एचएसएन कोड HSN Code: HSN not specified by seller | 108 | packet | 5 | NA | 540 |
| कुल ऑर्डर मूल्य Total Order Value (in INR) | | | | | | 540 |
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| परेषिती विवरण Consignee Detail | | | | | | |
| क्र.सं. S.No | परेषिती Consignee | वस्तु Item | लॉट नंबर Lot No. | मात्रा Quantity | दिनांक के बाद डिलीवरी शुरू करना है Delivery Start After | वितरण पूरा कब तक करना है Delivery To Be Completed By |
| | पद Designation : Chief pharmacy Officer ईमेल आईडी Email ID : buycon.cso.fatehabad@gembuyer.in संपर्क Contact : 01667-230424- | | | | | |

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| 1 | जीएसटीआईएन GSTIN : - पता Address : Central drug store,behind bus stand, Civil Hospital Fatehabad,, FATEHABAD, HARYANA-125050, India | Unbranded Eraser 1 | - | 108 | 02-Feb-2024 | 17-Feb-2024 |
| Product Specification for Unbranded Eraser 1 | | | | | | |
| विनिर्देश Specification | | उप-विनिर्देश Sub-Spec | | | मूल्य Value | |
| Other Properties | | Erase graphite gently without damaging paper | | | Yes | |
| | | Number of Eraser per pack (nos) | | | 1 | |
| Dimension | | Regular size(LxWxH) (mm) | | | 30*15*17 | |
| टिप्पणी Note:: Seller has given an undertaking that it has made arrangements for getting the stores from an authorized distributor / dealer / channel partner of the OEM of the offered product. At the time of delivery of goods, Seller will provide necessary chain documents (in the form of GST Invoice) to prove that the supplied goods are genuine and are being sourced from an authorized distributor / dealer / channel partner of the OEM. In case of any complaint about genuineness of the supplied products, Seller shall be responsible for providing genuine replacement supplies. | | | | | | |
| ईपीबीजी विवरण ePBG Detail | | | | | | |
| NA | | | | | | |
| नियम और शर्तें Terms and Conditions | | | | | | |
| 1. General Terms and Conditions- | | | | | | |
| 1.1 This contract is governed by the General Terms and Conditions , conditions stipulated to this Product/Service as provided in the Marketplace. | | | | | | |
| 1.2 This Contract between the Seller and the Buyer, is for the supply of the Goods and/ or Services, detailed in the schedule above, in accordance with the General Terms and Conditions (GTC) unless otherwise superseded by Goods / Services specific Special Terms and Conditions (STC) and/ or BID/Reverse Auction Additional Terms and Conditions (ATC), as applicable | | | | | | |
| नोट: यह सिस्टम जनरेटेड फाइल है। कोई हस्ताक्षर की आवश्यकता नहीं है। इस दस्तावेज़ का प्रिंट आउट भुगतान/लेनदेन उद्देश्य के लिए मान्य नहीं है। | | | | | | |
| Note: This is system generated file. No signature is required. Print out of this document is not valid for payment/ transaction purpose. | | | | | | |