अनुबंध|Contract



अनुबंध क्रमांक|Contract No: GEMC-511687788028187 अनुबंध तिथि|Generated Date: 10-Mar-2024

संगठन विवरण|Organisation Details

प्ररूप|Type : Central Government

मंत्रालय|Ministry: Ministry of Health and Family Welfare विभाग|Department: Department of Health and Family Welfare

संगठन का नाम|Organisation Office of the Chief Controller of Accounts Ministry of Health

Name : and Family Welfare कार्यालय क्षेत्र|Office Zone: Head Quarter

खरीदार विवरण|Buyer Details

पद|Designation : AAO3 संपर्क नंबर|Contact No. : 044-24917009-ईमेल आईडी|Email ID : karpagavalli.v@gov.in

जीएसटीआईएन|GSTIN: -

Pay and Accounts Office, M/o Health and Family Welfare, C-2-C, Rajaji Bhawan, 1st Floor, Besant Nagar Chennai -

पता|Address : 2-C, Raja 600090,

CHENNAI, TAMIL NADU-600090, India

वित्तीय स्वीकृति विवरण|Financial Approval Detail

आईएफडी सहमित IFD Concurrence : Yes

प्रशासनिक अनुमोदन का पदनाम| Designation of Administrative Approval:

Designation of Administra

वित्तीय अनुमोदन का पदनाम|

Designation of Financial Approval :

SENIOR ACCOUNTS OFFICER

SENIOR ACCOUNTS OFFICER

भुगतान प्राधिकरण विवरण|Paying Authority Details

Role: DDO भुगतान का तरीका| Payment Mode: PFMS

पद|Designation: AAO

ईमेल आईडी|Email ID : aabdulraheem.17@gov.in

जीएसटीआईएन|GSTIN: -

Pay and Accounts Office, M/o Health and Family Welfare, C-2-C, Rajaji Bhawan, 1st Floor, Besant Nagar Chennai -

पता|Address: 2-C, Raja

Chennai, TAMIL NADU-600090, India

विक्रैता विवरण|Seller Details

जेम विक्रैता आईडी|GeM Seller ID : HP5H230010747659

कंपनी का नाम | Company Name : REKHA ASHOKSINGH RAJPUROHIT

संपर्क नंबर|Contact No.: 09359574592

ईमेल आईडी|Email ID : rekhaashoksinghrajpurohit@gmail.com

पता| Address : Ambewadi,Kolad, Raigad, MAHARASHTRA-402304, -

एमएसएमई पंजीकरण संख्या|MSME Registration number : -जीएसटीआईएन|GSTIN: NA

*जिसके नाम के पक्ष में GST/TAX इनवॉइस पेश किया जाएगा|GST / Tax invoice to be raised in the name of - Consignee

वितरण निर्देश | Delivery Instructions : NA

उत्पाद विवरण|Product Details

#	अाइटम 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	उराद का नाम Product Name : HAUSER Blue Ink Gel Pen ब्रांड Brand : HAUSER ब्रांड प्रकार Brand Type : Registered Brand 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 चतुर्थाश Category Name & Quadrant : Gel Pen (V2) (Q4) मॉडल Model: HAUSER SONIC PEN एचएसएन कोड HSN Code: HSN not specified by seller	30	pieces	8	NA	240
क	ल ऑर्डर मृल्य Total Order Value (in INR)					240

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 : AAO3 ईमेल आईडी Email ID : karpagavalli.v@gov.in संपर्क Contact : 044-24917009-					

C-2-C, Rajaj	ন GSTIN : - ss : Pay and Accounts Office, M/o Health and Family Welfare, i Bhawan, 1st Floor, Besant Nagar Chennai -600090, FAMIL NADU-600090, India	HAUSER Blue Ink Gel Pen	-	30	10-Mar-2024	25-Mar-2024	
Product Specificat	ion for HAUSER Blue Ink Gel Pen						
विनिर्देश Specification	on उप-विनिर्देश Sub-Spec					मूल्य Value	
	Type of Ink					Acid Free	
	Ink Color					Blue	
GENERAL	The refill shall write a continuous line of (Minimum)					1000 meters	
JENERAL REQUIREMENT	Line width/Tip sizes					0.5	
	Agree to provide Advance sample(s) for buyer's approval before commencement of supply (Applicable in case of orders placed against bid and not applicable in case of Direct Buying)					No	
	Any additional requirement					NA	
AATERIAL	Pen Barrel made of					Plastic	
MATERIAL	Material of Tube (Ink Container)					Plastic	
MARKING AND	Marking on pen (Barrel and Cap)					Manufacturer Name/ Initials/ Registered trade-mark	
PACKING	Packing of Pen					Paper poly pouch	
	Availability of Test Report from Designated AHSP / NABL / I conformity of products to the specification	ABL / ILAC accredited or Central Government Lab to prove				No	
TEST REPORT	Test Report Number and Date				NA		

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.

NA

NA

ईपीबीजी विवरण | ePBG Detail

NA

नियम और शर्तें|Terms and Conditions

Name and Address of the Lab

- 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.

Test reports to be furnished to buyer on demand, if claimed to be available

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 प्रिट आउट भुगतान/लेनदेन उद्देश्य के लिए मान्य नहीं है।

 $Note: This is system generated file. \ No signature is required. \ Print out of this document is not valid for payment/ transaction purpose.$