TENDER TABULATION

Name of institution……………………………….………….

No………………………………..….Purchase of equipments

For…………………….Dept/Section……………..…………

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| Sl.No | Item No. & Name | Tender Specification | Quantity Required | Name of Firms | Rate Quoted | Whether rate is Inclusive of ST/Exci | Whether EMD & agreement Received | Delivery Condition | Payment Condition | Whether the offer confirm to tender specification | Guarantee in respect of goods and whether any local agent | Expiry date of the validity of offer | Remarks |
| 1 |  |  |  | Firm No.1 |  |  |  |  |  |  |  |  |  |
|  |  | Firm No.2 |  |  |  |  |  |  |  |  |  |
|  |  | Firm No.3 |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  | Firm No.1 |  |  |  |  |  |  |  |  |  |
|  |  | Firm No.2 |  |  |  |  |  |  |  |  |  |
|  |  | Firm No.3 |  |  |  |  |  |  |  |  |  |

Tabulated by Recommended by Recommended and

Counter signed by

Staff member in charge Signature of the Head

of the Department/Section Principal