



INDIAN INSTITUTE OF TECHNOLOGY KANPUR
Office of the Dean of Infrastructure & Planning

DOIP: 104 TO

Memo Forwarding to Accepting Authority for all call of quotations

1. Work Details

Request Number*																				
-----------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

2. Ref. to Administrative Approval

Authority	
No & date	
Amount	

3. Ref. to approval of NIT

Authority	
No & date	
Estimate Amount for which quotation is called	

4. Ref. to Publicity of Quotation

Date was placed on notice board in Divisional office/ on website	
Date circulated to other offices, if so	
Name of website (with date) in which it was advertised/published and the details of NIT identification number. <i>(Attach copies of webpages with date)</i>	

5. Due date for receiving Quotation

The date and time when quotation where due to be received in Divisional office/uploaded on website	
Postponed date and time if any	
Reasons for postponement	
Details of publicity regarding postponement of quotation:	

6. Date of sale of quotation

The date from which available for sale to contractors/website	
---	--

7. Particulars of contractors to whom quotations were sold.

S. No	Name of the contractor
1.	
2.	
3.	
4.	

8. Opening of Quotation

Date and time at which quotation was due to be opened	
Date and time at which quotation was actually opened	
Name & Designation of officers who actually opened the quotation	
Names of contractors present at the time of opening of quotation:	
Name and designation of any other person present	

9. Comparative Position of Quotes

Estimated Cost on DSR _____put to tender					
Sl. No:	Name of the Contractors	Quoted Amount	Quoted amount (Percentage above or below)	Quoted amount after negotiations, if any	Quoted amount (Percentage above or below)

Quotation Cell

Checked	Passed	
In-Charge Quotation Cell	OIC3	OIC2

Comments/Special instructions/Recommendations by Officer-In-Charge, if any

(Signature of OIC1 and Executive Engineer)

Date: ____/____/____
(dd / mm / yyyy)

Comments/Special instructions/Recommendations by ADPI, if any

(Signature of ADPI)

Date: ____/____/____
(dd / mm / yyyy)

Comments/Special instructions/Recommendations by DOIP, if any

(Signature of DOIP)

Date: ____/____/____
(dd / mm / yyyy)

Comments/Special instructions/Recommendations by DD, if any

(Signature of DD)

Date: ____/____/____
(dd / mm / yyyy)

Comments/Special instructions/Recommendations by Director, if any

(Signature of Director)

Date: ____/____/____
(dd / mm / yyyy)

Recorded		Sent for clarifications	____-__-__	Clarifications Received	____-__-__	Revision Recorded		Sent for further processing	____-__-__
----------	--	-------------------------	------------	-------------------------	------------	-------------------	--	-----------------------------	------------