### Annexure - B

<table>
<thead>
<tr>
<th>SLNo</th>
<th>Description</th>
<th>Location</th>
<th>Qty</th>
<th>Rate</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Refilling and reinstallation of <strong>Clean Agent HFC GAS 2kg</strong>, Squeeze leaver valve, fitted with pressure indication gauge, Discharge nozzle, Suspension bracket. Duly charged with Hydro Floro Carbon gas and pressurized with nitrogen gas pressure equipment directive97/23/EC (CE1128 Certificate) with IS: 15683 &amp; ISO certificate and manufacturer logo should be photo luminescent and shall be fix on the front side of the cylinder</td>
<td>LAB</td>
<td>7 Nos</td>
<td>2 kg</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Refilling and reinstallation of <strong>ABC Dry Powder 6kg</strong> MAP 90 (Mono Ammonium Phosphate) Powder and pressurized with nitrogen gas. Squeeze leaver valve, fitted with pressure indication gauge, Discharge nozzle, Suspension bracket, pressure equipment directive97/23/EC (CE1128 Certificate) with IS: 15683 &amp; ISO certificate and manufacturer logo should be photo luminescent and shall be fix on the front side of the cylinder</td>
<td>LAB</td>
<td>17 Nos</td>
<td>6 Kg</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Refilling and reinstallation of <strong>Clean Agent HFC GAS 4kg</strong>, Squeeze valve, fitted with pressure indication gauge, Discharge nozzle, Suspension bracket. Duly charged with Hydro Floro Carbon gas and pressurized with nitrogen gas pressure equipment directive97/23/EC (CE1128 Certificate) with IS: 15683 &amp; ISO certificate and manufacturer logo should be photo luminescent and shall be fix on the front side of the cylinder</td>
<td>LAB</td>
<td>10 Nos</td>
<td>4 kg</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Refilling and reinstallation of <strong>ABC Dry Powder 2kg</strong> MAP 90 (Mono Ammonium Phosphate) Powder and pressurized with nitrogen gas. Squeeze leaver valve, fitted with pressure indication gauge, Discharge nozzle, Suspension bracket, pressure equipment directive97/23/EC (CE1128 Certificate) with IS: 15683 &amp; ISO certificate and manufacturer logo should be photo luminescent and shall be fix on the front side of the cylinder</td>
<td>Executive wing, Committee room, Library</td>
<td>3 Nos</td>
<td>2 kg</td>
<td></td>
</tr>
</tbody>
</table>

TOTAL (Rupees.................................................................................................................)

Date: Name & Address of the Supplier/Contractor:

Place:

Seal:
THE MARINE PRODUCTS EXPORT DEVELOPMENT AUTHORITY
(Ministry of Commerce & Industry, Govt. of India)

ST-REPR/HO(FIRE)/1/2016/ADMN-PART(1) 14.02.2018

QUOTATION NOTICE

Sealed quotations are invited from dealers/Contractors for Refilling and Re-installation of Fire Extinguishers at MPEDA Head Office building. The quotation form is enclosed here with. The Dealers/Contractors may visit the site and assess the work to be done on any working day 10 AM and 5 PM. You are requested to quote your lowest rate for the above work in the prescribed format. The envelop of quotation should be superscripted as “Quotation for Refilling and Re-installation of Fire Extinguishers” and should be reach the undersigned on or before 10AM, on 2nd April 2018.

The sealed quotations along with an Earnest Money Deposit of Rs 4,700/- in the form of Demand Draft in favour of Secretary, MPEDA, Kochi, shall reach the following address not later than 10 AM on 02 April 2018.

Secretary
The Marine Products Export Development Authority
MPEDA House, Panampilly Avenue,
Kochi — 682 036, Kerala

Thanking you,

Yours faithfully,

S/d
SECRETARY
Scope of Work

Subject to overall supervision and control by MPEDA, The supplier/ contractor shall provide the scope of work mentioned in Annexure B.

Timeline of the project

The timeline is of utmost importance. The work needs to be completed within 20 days from the receipt of work order.

Payment Terms

The EMD shall be kept as security deposit till the completion of defect liability period of 1 year.

Selection of Contractor:

The quotations received by MPEDA will be opened at 10:30 AM on 2nd April 2018 and assessed by a department committee. The work will be awarded to the contractors who submit the lowest quote.
General Instructions

1. The contractor shall submit the sealed Quotation in envelope super scribing super scribing “Quotations For Refilling and Re-installation of Fire Extinguishers” at MPEDA Head Office”.

2. The envelope should contain:
   a. Cover Letter in the Format prescribed in Annexure A
   b. Earnest Money Deposit (EMD) of Rs 4,700/-
   c. Quotation for the Bill of Quantities (BOQ) listed in Annexure B
   d. Signed Copy of This Quotation Notice

3. Quotations that are not submitted complete documents as listed in point no 2 shall be summarily rejected.

4. Quotations should be addressed to The Secretary, The Marine Products Export Development Authority, MPEDA House, Panampilly Avenue, Kochi — 682 036, Kerala, with respective cover details, so as to reach not later than 10:00 AM on 02/04/2018.

5. No quotation will be entertained after 10:00 AM on 02/04/2018 under any circumstances, whatsoever.

6. MPEDA reserves the right to reject any or all applications without assigning any reasons thereof. Mere submission of an application to MPEDA does not entitle an applicant to any benefits / rights / preference. Canvassing in any form is prohibited and will lead to disqualification.

7. The applicant shall keep all the information relating to the work or any other aspect of MPEDA’s business that comes into his possession as a result of or in connection with this work as confidential.

8. In case of any discrepancies/dispute in the performance of any legal agreement regarding the construction/validity/breach/questions shall be dealt within the jurisdiction of offices/court in Ernakulam.

9. MPEDA shall be the sole and exclusive owner of the installations after successful commissioning and the contractor or anybody representing him shall not have any claim whatsoever on the works after commissioning.

10. The contractor shall indemnify MPEDA against any loss/claim that may occur to MPEDA, or against MPEDA whatsoever in respect of the workers employed by the contractor for construction.

11. Any statutory payments/remittances like EPF contribution in respect of the workers shall be the sole responsibility of the contractor.

12. The applicant or the authorized signatory shall sign all the pages of the Quotation notice and the supporting documents as acceptance to have read and understood the EOI.

13. The applicant may also visit the site at MPEDA Head Office to know about the requirements in person on any working day during office hours.

14. In case of any clarification, you may please contact the following official on any working day during office hours (Monday – Friday from 9 Am to 5.30 Pm):- Ivin Alex – 9847260487,
Annexure A

COVERING LETTER

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Description</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Name of the bidder</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Address — Office</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(With Name of the contact person and telephone &amp; fax numbers and email address)</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Local sales tax Registration No., PAN, TAN, and VAT No. or GST No.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(As applicable)</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>EMD details (Bank Guarantee/DD No, Bank’s branch etc)</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Banker and their address, A/c No. with RTGS/NEFT details.</td>
<td></td>
</tr>
</tbody>
</table>

I/We hereby declare that I/We have read and understood the above notice for Quotation invited by MPEDA for setting up of the Signature Stall at its Head Office in Panampilly Nagar, Kochi. I/We are competent to undertake the works to the complete satisfaction of the MPEDA and I/We have the enough experience and resources to complete the work within the prescribed timelines as per the expected quality. The information provided in the Annexure A attached with this quotation is true to the best of my/our knowledge.

Signature of the Applicant/Authorized Signatory

Name:
Date:
Place:
Seal