|     |  |             | TCHACT TCVICVV | . 0 |
|-----|--|-------------|----------------|-----|
| For | mat No.:                               |             |                |     |
| Ten | der Review No. :                       |             | Date :         |     |
| 1.  | Tender Notice No. :(Reference:         |             | Date :<br>)    |     |
| 2.  | Item No. :                             | Particular: |                |     |
|     | (For which tender is submitted)        |             |                |     |
| 3.  | Tender Issuing Authority:              |             |                |     |
| 4.  | Date of Pre-Bid Conference :           |             |                |     |
| 5.  | Last Date of Issue Tender :            |             |                |     |
| 6.  | Last Date of receipt of Tender :       |             |                |     |
| 7.  | Tender Fee :                           |             |                |     |
| 8.  | Date / Time of Opening / Submission Te | nder :      |                |     |

9.

EMD :

| VERIFICATION OF TENDER SUBMISSION |            |              |      |                           |                |              |  |
|-----------------------------------|------------|--------------|------|---------------------------|----------------|--------------|--|
|                                   | EMD        |              | а    | Amount                    |                | Amount (\$): |  |
|                                   |            |              | b    | Mode                      | e of Deposit   |              |  |
| 1                                 |            |              |      | I                         | FDR            |              |  |
|                                   |            |              |      | Ш                         | Bank Guarantee |              |  |
|                                   |            |              |      | Ш                         | DD             |              |  |
| 2                                 | Check List |              | Iter | n No. :                   | Description :  |              |  |
|                                   |            |              | Cor  | ompleted with all details |                |              |  |
|                                   | List       | of Enclosure |      |                           |                |              |  |
|                                   | 1          |              |      |                           |                |              |  |
|                                   | 2          |              |      |                           |                |              |  |
|                                   | 3          |              |      |                           |                |              |  |
| 3                                 | 4          |              |      |                           |                |              |  |
|                                   | 5          |              |      |                           |                |              |  |
|                                   | 6          |              |      |                           |                |              |  |
|                                   | 7          |              |      |                           |                |              |  |
|                                   | 2          |              |      |                           |                |              |  |

Format No.:

| 4                       | Page Number on which the information / Data are filled in |   |          | Page No.    |             |        |               |  |  |
|-------------------------|---|---|----------|-------------|-------------|--------|---------------|--|--|
| 5                       | Page Number on which our authorized                       |   |          | Page No.    |             |        |               |  |  |
|                         | person has signed and stamped                             |   |          |             |             |        |               |  |  |
|                         | Verif   | Verification of price Bid                               |          |             |             |        |               |  |  |
| 6                       | Sr.   | Item  |          | Г           | Doccrintion |        | Rate          |  |  |
|                         | No  | Code  | 2        | Description |             |        |               |  |  |
|                         | 1   |   |          |             |             |        |               |  |  |
|                         | 2   |   |          |             |             |        |               |  |  |
|                         | 3   |   |          |             |             |        |               |  |  |
|                         | 4   |   |          |             |             |        |               |  |  |
|                         | 5   |   |          |             |             |        |               |  |  |
|                         | 6   |   |          |             |             |        |               |  |  |
|                         | 7   |   |          |             |             |        |               |  |  |
|                         | 8   |   |          |             |             |        |               |  |  |
|                         |   |   |          |             |             |        |               |  |  |
|                         | Verification of other terms & conditions                  |   |          |             |             |        |               |  |  |
| 7                       |   | echnical Bid envelop, verification on of seal           |          |             |             |        |               |  |  |
| 8                       | Price   | e Bid envelop No. of copies :                           |          |             |             |        |               |  |  |
| 9                       | Chec  | ck list envelop:  |          |             |             |        |               |  |  |
|                         | a   | Verification signature and stamp of authorized person : |          |             |             |        |               |  |  |
|                         | b   | Verification of seal                                    |          |             |             |        |               |  |  |
|                         | Submission mode :   |   |          |             |             |        |               |  |  |
|                         | a   | Hand Delivery:  |          |             |             |        |               |  |  |
|                         | - Receipt Stamp on duplicate la                           |   |          |             | ter         |        |               |  |  |
|                         |   | - Submitted by :  |          |             |             |        |               |  |  |
|                         |   | - Date :  |          |             |             | Time : |               |  |  |
| 10                      | b   |   | r Post : |             |             |        |               |  |  |
| 10                      |   | Register AD Receipt No.                                 |          |             |             | Date : |               |  |  |
|                         | С   | Speed Post  |          |             |             |        |               |  |  |
|                         |   | Receipt No. :   |          |             | Date :      |        |               |  |  |
|                         | d   | Courier :   |          |             |             |        |               |  |  |
|                         |   | Name :  |          |             | Office :    |        |               |  |  |
|                         | Receipt No. :   |   |          |             | Date :      |        |               |  |  |
| Prepared by : Verificat |   |   |          | Verificat   | ion of seal |        | Verified by : |  |  |
| Date :                  |   |   |          |             |             |        |               |  |  |
| No. of co               |   |   |          | No. of co   | pies        |        | Date:         |  |  |