



REGIONAL INSTITUTE OF MEDICAL SCIENCES, IMPHAL
(An autonomous Institute under the Ministry of Health & Family Welfare, Govt. of India)

RESTRICTED TENDER NOTICE NO - 184
Imphal, the 7th Feb. 2012

No. TW/EnggC-College/RIMS-01/2011:- The Director, Regional Institute of Medical Sciences, Imphal invites sealed Restricted Tender(s) in prescribed forms C.P.W.D. FORM - 8 from the registered eligible Contractors of RIMS, Imphal for the work(s) given below :

Sl. No	Name of work(s)	Estimated cost	Cost of Tender form	Rate of Earnest Money (EMD)	Time
1	Expansion of Temporary dental College to accommodate temporary laboratory, RIMS, Imphal.	Rs. 16,67,839	Rs. 500/-	Rs. 1,00,000/-	2-months

The Tender should strictly adhere to the following terms and conditions:-

1. The tender(s) should be addressed to "**The Director, Regional Institute of Medical Sciences, Imphal.**"
2. The EMD should be drawn in the form of either D.D or banker cheque from a nationalised Bank in favour of **the Director, RIMS, Imphal** payable at Imphal.
3. The tender(s) should be sent directly to "**The Director, Regional Institute of Medical Sciences, Imphal**" by registered post and the envelope should be super-scribed with the words "**Tender No, date of the tender, Sl. No. and Name of the work.**"
4. The last date of purchasing of the Tender form(s) is on **24th Feb. 2012.**
5. The tender(s) shall be received on or before **25th Feb. 2012** and shall be opened on the same day or any convenient date in presence of the Tenderer(s) or their authorized representative without any further correspondence.
6. The cost of tender forms shall be paid to the **Cashier, RIMS.**
7. The tender form(s), general instruction to the Contractor & prequalification documents along with the Schedule of Quantity (ies) may be obtained from **the Engineering Cell, RIMS, Imphal** on production of the T.R. issued by the Cashier or can be downloaded from the RIMS web site www.rims.edu.in.

8. The undersigned reserves the right to accept or reject any of the tender(s) without assigning any reason thereof.


DIRECTOR

Regional Institute of Medical Sciences
Imphal

Copy to : -

1. P. S. to the Director for kind information of the Director, RIMS, Imphal.
2. The Medical Superintendent. RIMS, Imphal.
3. The Deputy Director (Admn.) RIMS, Imphal.
4. The CAO/FA, RIMS, Imphal.
5. The Assistant Engineer (Civil), RIMS, Imphal.
6. All 2nd class contractor of RIMS.
7. Cashier RIMS, Imphal
8. Notice board.
9. The System administrator, Net working RIMS : - She/he is requested to publish the NIT in the RIMS web site.
10. The editor, for kind publication in the local news paper.
11. The Guard file.