

## REGIONAL INSTITUTE OF MEDICAL SCIENCES, IMPHAL

(An autonomous Institute under the Ministry of Health & Family Welfare, Govt. of India)

## RESTRICTED TENDER NOTICE NO - 202 Imphal, the 17<sup>th</sup> Oct. 2012

No. TW/EnggC-Hospt/Ext/RIMS-01/2012:- 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	Extension of Rooms for IHBT Dept. RIMS				
	Hospital.	Rs. 8,46,624/-	Rs. 500/-	Rs. 50,000/-	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 and Name of the work."
  - 4. The last date of purchasing of the Tender form(s) is on ...26<sup>th</sup> Oct.. 2012.
  - 5. The tender(s) shall be received on or before ... 29<sup>th</sup> Oct 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.
- 8. The undersigned reserves the right to accept or reject any of the tender(s) without assigning any reason thereof.

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DIRECTORITION

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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 2<sup>nd</sup> 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.