

AIIMS RISHIKESH

INDENT FOR PURCHASE OF STORES

(FORM P-2)

1. Please fill a separate form for each item
2. Please fill completely in triplicate. Incomplete forms and those with illegible writing may not be accepted.

Name of items with full specifications & required accessories	Quantity (in figures and words)	Cost per unit (approx) in foreign currency and Rupees	Total cost (approx)
<p>Subscription of Turnitin i-Authenticate 2.0</p> <p>Form P-3 is Attached</p>	<p>One year (online Annual Subscription)</p>	<p>Seven Lakh Fifty thousand + 18% GST = 7,50,000 (Approx)</p>	<p>7,50,000 + 18% GST Approx.</p>

3. For equipment, please provide the following information

Detailed description of the actual use of the equipment **ONLINE SUBSCRIPTION OF TURNITIN i-AUTHENTICATE 2.0**

Is the equipment to be used for patient care of research: **YES**

If both, state % of time to be used for patient care: **50** % of time to be used for research

Is this/ similar equipment already available in the department?

When purchased? *N/A* Cost at that time: *N/A* Present functional status:
Tests/ procedures done on this equipment in last year: *N/A*

Revenue generated by this equipment in last year: *N/A*

If yes, what is the justification for this purchase? *N/A*

Is this/similar equipment available in any other department in the Institute? *N/A*

If yes, what is the justification for this purchase? *N/A*

4. For Consumables, please provide following information:

Description of stocks available

When was it last purchased? *N/A* In what quantity? *N/A* Cost;

Source

Test/ procedures done in this period:

Revenue generated in this period:

Average annual consumption

Shelf life

Period for which this purchase will last Number of tests likely to be done with this quantity:

5. For furniture, please provide the following information:

Exact location and use *NA*

Existing furniture at that place

Justification for this purchase

Possible sources (name all sources you know) from where item may be obtained (name, address, phone no, fax no, email, etc of contact person)

INDENTOR

Signature.....

Name.....

Designation.....

Date.....

Phone/Pager

Sandeep Kumar Singh
12/01/24
Senior Librarian
केंद्रीय पुस्तकालय/Center
Library/A/III
Sr. Librarian
12/01/24

HEAD OF DEPARTMENT/SECTION

Signature.....

Name.....

Designation.....

Stamp.....

M. M. Singh
12/01/24
Chairperson, Library Committee
केंद्रीय पुस्तकालय/Center
Library/A/III
प्रेस, सूचिकिया, All India, Rishikesh

P-3 FORM


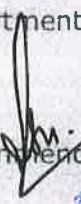
(to be attached with P-2 form for Proprietary items)

AIIMS Rishikesh

PROPRIETARY ARTICLE CERTIFICATE

It is certified that the items (Turnitin i- Thenticate 2.0) required in the P-2 form should be purchased from M/s. Turnitin India Education Pvt. Ltd To the best of my knowledge M/s. Turnitin India Education Pvt. Ltd are the sole manufacturer/agents of the sole manufacturers M/s. Turnitin India Education Pvt. Ltd

Similar items manufactured by other firm(s) shall not be suitable for our purpose for the following reasons:-

(Sign of Indenter) 
Dated 12/01/24
Designation Sr Librarian
Department Library
Recommendation 
अध्यक्ष, पुस्तकालय को समिति
Chairperson, Library Core Committee,
केन्द्रीय पुस्तकालय/ Central Library
एम्स, ऋषिकेश/ AIIMS, Rishikesh

Signature of Head of Department/Section

N.B.: The indenter before recording the above certificate should satisfy himself that the article is genuinely of proprietary nature manufactured under patent laws.

6. For use of Central Store

Details of last purchase of this item:

Date/Reference	Indentor/Deptt	Quantity	Rate (per un t)	Source	Stock in hand

Store Keeper
Date

Store Technical Assistant
Date

Store Purchase Officer
Date

7. For use of Purchase Section

Method of purchase recommended:

Single tender/ limited tender/ open tender/ DI/UP-CMSD/DGS&D Rate Running Contract/ Local Cash Purchase

JD MM

Date

Tender/ Enquiry No.

Date

Supply Order No.

Date