



# GOVERNEMENT COLLEGE OF PHARMACY

Kathora Naka, AMRAVATI 444 604

☎ (0721) 2531690 (O)  
www.gcopamravati.ac.in

Fax. No. (0721) 2531242 2531827  
e-mail: gcopamt@gmail.com

No.GCOPA/Store/PLA/CCTV Camera/2024-25/ 101

Date: 15.01.2025

**Subject: Quotation for Supply of CCTV Cameras and Accessories with installation.**

*Dear Sir,*

I have to request you to kindly quote your lowest reasonable rates for the following item and send the quotation in the sealed cover, so as to reach the undersigned **on or before Dt. 22.01.25 , Date of Opening Dt. 23.01.25.**

Sr.No.	Specifications / Item List	Qty. Required
1	IP Outdoor Camera	04 Nos.
2	IP Dome Indoor Camera	04 Nos.
3	8 Port POE Giga Switch	02 Nos.
4	POE Box	01 Nos.
5	LAN Cat 6 Cable	305 Mtr.
6	Surface Box	08 Nos.
7	Electric Box	02 Nos.
8	Electric Cable	100 Ft.
9	Connector	25 Nos.
10	Giga LAN 8 Port Switch	01 No.
11	Outdoor Cat 6 Cable	100 Meter
12	CCTV Camera and Cable Installation	08 Nos.
<b>Note :</b> Please visit the campus and inspect the place and location of installation of cameras. Quantity may be vary at the time of installation. So, please quote your rate as per requirement.		

## TERMS AND CONDITIONS FOR QUOTATIONS

**Validity:** The rates offered should be valid up to 31<sup>st</sup> March of year from the date of opening of Quotations.

**Delivery:** Rates quoted will be considered FOR destination, Installation & training at College Premises unless otherwise stated.

**Payment:** Payment will be made as and when the grant is available after receiving the goods/ Service/ Repairing in satisfactory conditions and satisfactory demonstration/ Installation etc. at the consignee's destination at cost of supplier.



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**Taxes:** Rates quoted will be considered **inclusive of all taxes**, if not stated separately in the quotation. (Statement like taxes extra or as applicable will not be considered).


## Description of Registration to be filled up by Agency

(PAN card, GST, Professional Tax, Service Tax)

Sr. No.	Description of Registration	Registration No.	Validity Period	Copy attached	
				Yes	No
1.	<b>PAN card</b>				
2.	<b>GST</b>				
3.	<b>Professional Tax</b>				
4.	<b>Service Tax</b>				

Signature & Name of the authorized person  
of quoting agency with the seal of the firm

Date: 15.01.2025

  
**Principal**

Govt. College of Pharmacy,  
Amravati.

