GOVERNEMENT COLLEGE OF PHARMACY

Kathora Naka, AMRAVATI 444 604

☎ (0721) 2531690 (O) Fax. No. (0721) 2531242 2531827

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No. GCOPA/Store/Pest control/2026-27/727 Date: 11/06/2026

Subject: Quotation for supply of Pest Control for all furniture, books, office files Of Library, Office, Store and Laboratories.

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. 18/06/2026, Date of Opening Dt. 19/06/2026.**

Sr. No.	Specifications	Qty. Required
1.	i. Provide Anti Termite Treatment at the side of flooring by injecting 0.075% of Imidaclopride 30.5% SC per hole 0f 6mm dia. And drilled at dist.30cm center to center with proper filling material. ii. Provide Anti Termite Treatment to the soil along the external wall by punching holes of 1.2 to 1.5 cm dia meter about 30-60 cm deep at 15 cm center to center with concentration of Imidaclopride 30.5% SC with proper filling material.	25,000 Sq.Ft.
2.	Provide Anti Termite Treatment by the water based chemical spray method. This treatment will be done on all floors for control of termite and other insects.	25,000 Sq.Ft.
3.	Providing Rodent control treatment by use of rodenticide, rodent bite etc..	25,000 Sq.Ft.
4.	Providing General Pest Control Service to the building to control the nuisance of the cockroaches, lizards, bedbugs, and other insects etc.	25,000 Sq.Ft.
5.	Providing wood preservation anti termite treatment at wooden fixtures, door frames etc. by the applying and injecting solvent base chemical.	20 Liter
	• **Note : With your all necessary materials and labor charges.** • **This Pest control will be done 3 Times in a Year.**	

TERMS AND CONDITIONS FOR QUOTATIONS

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

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

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

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).

General Note:-

➢ The supply shall be executed according to instruction by Institute

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- The **technical support shall be provided by the vendor/** supplier **without any additional charge during guarantees/ warranty period**.
- In lieu of any defect in material, the agency shall replace the material.
- For any quoted brand if Authority letter from the company in original stating that he is authorized to participate in the quotation and minimum three quotations are not available it will be rejected.
- Do not quote for the brand for which authority letter is not available.
- Manufacturer / supplier should submit the signed and stamped rate catalogue/ booklet whenever demanded by us so as to enable us to know which make is quoted along with model no / sr. no. of the item / code no etc.
- Rate quoted as per authorized pricelist will be considered. Any change / deviation in the rate of any item should be informed in advance and will be only applicable if approved by purchase committee.
- Proof of permission to manufacture the equipment/ item mentioned in the tender document from competent authorities.
- Proof of permission for sales/trading of the equipment/ item or of similar kind mentioned in the quotation document from competent authorities.
- The Institute reserves the right to reject any or all quotations without assigning reason therefore.
- Warranty and AMC if applicable.
- **The dispatch number of this office should necessarily be superscripted on the Envelope.**
- Supplier also give the details of CMP registration no. for on line payment.

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.	PAN card				
2.	GST				
3.	Professional Tax				
4.	Service Tax				

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

Date: 11/06/26.

Principal
Govt. College of Pharmacy,
Amravati.