

जवाहर नवोदया विद्यालय , गांधीनगर (गुजरात)

JAWAHAR NAVODAYA VIDYALAYA,SAMETRI DIST: GANDHINAGAR(GUJARAT)

**TENDER FORM FOR ANNUAL MAINTENANCE CONTRACT FOR COMPUTERS ,
ZEROX, FAX & Toner Refilling (YEAR 2018-19) UP TO 30.04.2019**

SR.No.	ITEMS	Quantity
A.	Computers	
1	Nodes- DELL	50 Nos.
2	Nodes-Acer	09 Nos
3	LAPTOPS-SAMSUNG	41 Nos.
4	LBP7018C(color),LBP 29000B, SAMSUNG ML2161)	13 Nos.
5	Scanner	02 Nos.
6	Modem-Dlink	03 Nos.
7	Router-Dlink	02Nos.
8	Tablets-Samsung	10 Nos.
9	UPS ONLINE 1KVA	30Nos.
10	UPS ONLINE 6KVA(EMERSON)	01 No.
11	Networking	As per site

A. Rates for annual maintenance of the above items are as follows.

SR.No.	A.M.C. for 01/07/18 to 30/04/2019	RATE(Rs.)
1	With Parts	
2	Without Parts	

B Photo Copier Machine Canon(ir2016j)

Rates for annual maintenance of the above items are as follows.

B	A.M.C. for 01/07/2018 to 30/04/2019	RATE(Rs.)
1	With Parts	
2	Without Parts	

C Fax Machine Panasonic(Facsimile) Mo. NO KX-FM89CX

Rates for annual maintenance of the above items are as follows.

C	A.M.C. for 01/07/2018 to 30/04/2019	RATE(Rs.)
1	With Parts	
2	Without Parts	

Toner Refilling		Rate per 01 Nos. Refilling
1	HP Laser Jet 1020+	
2	HP Laser Jet 1015	
3	Hp Laser Jet P1007	
4	Canon Laser Jet LBP 2900B	
5	Canon Laser Jet LBP 7018C(Colour Printer)	
6	Samsung ML-2161	
4	Zerox Machine Toner Refilling (Canon -IR2016J)	
5	Zerox Machine Toner Refilling (Canon iR-ADV 4545 with DADF-AV1 Model)	
		Rate per 01 Nos.
1	Toner Blades (All types blades for Above printer Toner cartidgeges)	
2	Toner Drum (Above printer Toner cartidgeges)	

Note; Please attach signed terms & condition of the vidyalaya with the filled in tender form and send it in sealed envelop alongwith the tender before the prescribed time limit)

A Demand Draft/Banker Cheque No. _____ Dated _____ of Rs. _____ In favour of Principal, Jawahar Navodaya Vidyalaya, Dehgam is being attached herewith against EMD for the above paints Items during the financial Year 2018-19 up to 30/04/2019

- NOTE :** 1. Rate should be applicable up to 30/04/2019
2. At least three visit per month required

Place :-
Dated :-
Mobile No.
Land line No.
Fax No.

Sign.of party
Name of Party
Address