



भारतीय प्रौद्योगिकी संस्थान रोपड़
INDIAN INSTITUTE OF TECHNOLOGY ROPAR

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File No.1709-22/AD-CAF/IITRPR/PS/

Dated: 14.09.2022

CORRIGENDUM

Reference EOI No.1709-22/AD-CAF/IITRPR/PS dated 31.08.2022 for providing the Movable shops for Ironing, Laptop /Mobile Repair and for selling Ice- Cream at IIT Ropar premises” due on 14.09.2022. In addition to this, the applications are also invited for movable Shop for repair of Cycles. The revised format for submission of Application is revised as per Annexure “A”:

Bidders are requested to submit their applications as per revised format who are interested in movable Shop for repair of Cycles. The last date of receipt and opening of Bids is hereby also extended upto 22.09.2022. Those who have already sent/submitted their applications can revise the same clearly indicating "Revised Application" on sealed cover. Timings and all other details and terms & conditions remain the same.

(Registrar)

Annexure "A"

**APPLICATION FOR PROVIDING THE MOVABLE SHOP FOR IRONING, LAPTOP
/MOBILE REPAIR ,FOR SELLING ICE- CREAM AND CYCLE REPAIR AT IIT
ROPAR PREMISES**

(This form must be filled by the applicant)

Sl. No.	Particulars	Details
1.	Type of the Shop Applied [Tick as applicable]	IRONING <input type="checkbox"/> LAPTOP /MOBILE REPAIR <input type="checkbox"/> ICE- CREAM <input type="checkbox"/> CYCLE REPAIR <input type="checkbox"/>
2.	Service Days [Tick as applicable]	Monthly <input type="checkbox"/> Weekly <input type="checkbox"/> (Everyday) (Once in week)
3.	Name of the Applicant/Firm	
4.	Address of the Applicant/Firm	
5.	Phone no.	
6.	E-mail-	
7.	PAN No. (Copy attached)	
8.	Experience Certificate (Copy attached)	
9.	Signed Application Form attached	Yes/No
10.	Any other information current/past in support of your professional capability to be supported with documentary evidence	

1. Name & addresses of existing clients with documentary proof:-

- (i) _____
(ii) _____
(iii) _____

(Signature of the Applicant)

Certified that my/our concern has not been blacklisted by any of the Government Departments/Institutes/Universities/State Government Undertakings etc.

Date:

(Signature of the Applicant)