

ORIGINAL

Tender Form Fee 1000

Form #:PDA/2017/10/150854793922048

TENDER FORM

1. Name of work: Construction of Gas Room at Women and Children Hospital Peshawar.
2. Approximate estimated cost of work: 1.15 Millions
3. Earnest Money. 2% of the Bid amount.
4. Security deposit including earnest money. Rs. 8 + 2 = 10%
5. Percentage to be deducted from bills. (8% of the running Payment)
6. Time allowed for the completion of work from the date of written order to begin work ___.
7. Issued to: _____

DEPUTY DIRECTOR

Peshawar Development Authority

I / We hereby tender for the above work at.

(a) (1) _____ Percent (2) _____ Percent

above / below the the rates entered in Peshawar Development Authority approved rates as amended up to the date of Notice inviting this tender

(b) at the rates started below :-

Name of work of item	Unit of Schedule Rates	Rate of Tender (in words and figures)

The sum of Rs. _____ is herewith forwarded in the shape of call deposit as earnest money, the full value of which it absolutely forfeited to the D.G., P.D.A., Peshawar, or his successor-in-office. Should I/We in any way default on the work tendered for and which shall other wise along with the percentage deductions as specified above be retained to from my/our security deposit for the correct exection of the works as per the conditions of the contract.

I / We have seen and carefully read all schedules of rates, specifications and conditions of the contract concerning the work tendered for before tendering and before agree to abide by the same.

Signature of the Contractor

- (a) (1) in figures
- (b) (2) in words

To:

**DEPUTY DIRECTOR ENG-I (DE-SPL PROJECT)
PDA COMMERCIAL COMPLEX,
BLOCK #1 PHASE V HAYATABAD PESHAWAR.**

From

Firm Name

Address:

Name: _____

Contact Number: _____

Signature: _____

For Office Use

. Work Name: Construction of Gas Room at Women and Children Hospital Peshawar.