

THE TAMILNADU Dr.M.G.R MEDICAL UNIVERSITY

No.69, Anna Salai, Guindy, Chennai – 600 032.

**Dr. S. GEETHALAKSHMI, M.D., Ph.D.,**

**VICE-CHANCELLOR**

Ref.No.SIII (2) /62649/2016

Date:13.03.2017

NOTIFICATION

It is hereby notified that the following specification of the condemned vehicle of this University bearing Reg. No. TN-09-AM-9443 (Maruthi Esteem) is to be disposed off by calling for sealed Quotation from among the members of staff of this University and Public. The Assessed Value of the said vehicle is Rs.22,000/- (Rupees Twenty two Thousand only).

Details of the vehicle:

- |                            |                                   |
|----------------------------|-----------------------------------|
| 1) Make and Model          | : TN-09-AM-9443– (Maruthi Esteem) |
| 2) Nature of Fuel          | : Petrol                          |
| 3) Seating Capacity        | :5                                |
| 4) Colour                  | : S. White                        |
| 5) Kilometer Run as on     | :115,075 Kms.                     |
| 6) Engine No.              | : G13BBN255778                    |
| 7) Chassis No.             | : MA3EBE41900448984               |
| 8) Insurance               | :Expired on 26.01.17              |
| 9) F.C. period of Validity | :02.02.2021                       |
| 10)Road Tax                | :life time tax                    |
| 11) Permit                 | :Validity up to 26.01.2017        |

Schedule:

- 1) Last Date of Receipt of Quotation : **03.04.2017 up to 2.00 P.M.**

Superscription:

The sealed cover should be superscripted as “Quotation for the purchase of the condemned vehicle Reg.No. TN-09-AM-9443– (Maruthi Esteem) due on **03.04.2017**”. The Quotation , without such superscription and received after the due date will be summarily rejected. The Quotation received in unsealed (Araku seal) cover will not be considered.

Opening of Quotation:

The Quotation received **up to 2.00 p.m. on 03.04.2017** will be opened in the presence of the Registrar , The Tamil Nadu Dr. M.G.R Medical University, or any other Officer authorized by him on behalf of the Registrar , The Tamil Nadu Dr. M.G.R Medical University, Chennai – 600 032 **on 04.04.2017 at 4.00 p.m.**

If there is tie in the highest quoted amount for the said vehicle, the Quotationer will be selected by drawal of lot.

The Registrar reserves his right to reject any or all the Quotation without assigning any reason therefore and his decision shall be final.

**Dr. S. GEETHALAKSHMI**  
**VICE-CHANCELLOR**

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**QUOTATION**

NAME OF THE EMPLOYEE / QUOTATIONER :

ADDRESS OF THE QUOTATIONER :

( for Public only)

DESIGNATION (for University staff only) :

DEPARTMENT (for University staff only) :

QUOTAION SUBMITTED : TN-09-AM-9443

FOR VEHICLE NO. – (Maruthi Esteem)

AMOUNT QUOTED : Rs.

(Rupees:.....)

.....only)

1. I certify that I accept the terms and conditions of the notification issued by the University with regard to the disposal of condemned vehicle.
2. I certify that I have not submitted more than one Quotation .

SIGNATURE

Date:

Time: