

7-B, Korangi Industrial Zone, Korangi, Karachi-74900, (Pakistan) P.O.Box No. 8228 PABX: 5064981-86 Dir. 5060842 Fax No. (92-21) 5054679 & 5054663

NRL-FAF-LRU-001

Rev.:# 00 Dt.:28-07-2003

Request For Quotation

Tel:

Fax:

Vendor No. 102518

PLEASE DROP YOUR QUOTATION IN BOX NO.

Our Ref No. WHL-8560

Dated

No. 6000160753
Dated 12.11.2024
Please return this form duly completed and signed by authorized person in the sealed envelope. The due date for submission of tenders is

Due Date: 21.11.2024

Last hime for Submission 1,30 2m

Please quote your lowest prices for the following items. Your offer should remain valid for 45 DAYS. Please drop your quotation in above mentioned Box No. kept at NRL Reception Office. Please quote your GST No. and mention prices are inclusive or exclusive of GST. If not it will be assumed to be inclusive.

Delivery: Free delivery at our Ware House
Requirement: *Within 7 days of our Purchase Order

* Collect Ex-Your Shop/Premises

Immediate

	Tarina and the same of the sam			J. Immediate					
Item	Material	Description	Unit	Quantity	Unit Pr.	Sales Tax	Total Amount Inclusive GST		
00010	26-027-615K1	SODIUM HYPO CHLORITE MINIMUM 12% FREE CHLORINE DRUMS/CARBOUYS AS PER REQUIREMENT	KG	150,000					
		NOTE: *QUANTITY TO BE SUPPLIED 3000 Kg/CONSIGNMENT							
		NOTE: 1. The above quantity is our estimated requirement for one year period against which supplier will be required in installment by NRL, on as and when required basis. Therefore quotation is invited on rate remaining valid till one year period with effect from issuance of purchase order. 2. PLEASE QUOTE PRICES ACCORDING TO OUR SPECIFICATION PREFERABLY ON OUR REQUEST FOR QUOTATION, HOWEVER OFFER ON THE SUPPLIER'S OWN FORMATE/LETTER HEAD WILL ALSO BE ACCEPTABLE. 3. CUTTING/ALTERATION IN THE RFQ MUST BE AVOIDED AS FAR AS POSSIBLE.HOWEVER IN CASE CUTTING/ALTERATION IS INEVITABLE, THE SAME MAYBE CARRIED OUT WITH PROPER SIGNATURE/STAMP OF THE SUPPLIER. 4. IF YOU DO NOT MENTION G.S.T IN YOUR QUOTATION, IT WILL BE ASSUMED TO BE INCLUSIVE. 5. PLEASE MENTION YOUR NTN & GST NO.AS WELL AS OUR GST AND NTN NO.ON ALL OF YOUR SALES TAX INVOICE AS PER GOVT INSTRUCTION. 6. ENTRY OF CNG / LPG FITTED VEHICLES ARE NOT ALLOWED INSIDE NRL PREMISES DUE TO SAFETY REQUIREMENT.THE SUPPLIERS ARE THEREFORE ADVISED TO DELIVER THE							

YOUR REF. NO.

DATE:

PAGE 1 OF 2

AUTHORIZED SIGNATURE



Tel: Fax:

7-B, Korangi Industrial Zone, Korangi, Karachi-74900, (Pakistan) P.O.Box No. 8228 PABX: 5064981-86 Dir. 5060842 Fax No. (92-21) 5054679 & 5054663

NRL-FAF-LRU-001

Rev.:# 00 Dt.:28-07-2003

Request For Quotation

Our Ref No. WHL-8560

No. 6000160753
Dated 12.11.2024
Please return this form duly completed and signed by authorized person in the sealed envelope. The due date for submission of tenders is

Due Date: 21.11.2024

MANAGER LOCAL PURCHASE

PLEASE DROP YOUR QUOTATION IN BOX NO.

Please quote your lowest prices for the following items. Your offer should remain valid for 45 DAYS. Please drop your quotation in above mentioned Box No. kept at NRL Reception Office. Please quote your GST No. and mention prices are inclusive or exclusive of GST. If not it will be assumed to be inclusive.

Delivery:

Vendor No. 102518

> Free delivery at our Ware House

Requirement: Within 7 days of our Purchase Order

* Collect Ex-Your Shop/Premises

* Immediate

Item	Material	Description	Unit	Quantity	Unit Pr.	Sales Tax	Total Amount Inclusive GST
		FITTED VEHICLE 7.THE VEHICLES DELIVERING GOODS MUST HAVE VALID FITNESS CERTIFICATE(IF APPLICABLE) VALID/ORIGINAL DRIVING LICENCE OF THE DRIVER & VALID/ORIGINAL CNIC OF OTHER STAFF OF THE SUPPLIER.NRL SAFETY & SECURITY PROCEDURES MUST BE STRICTLY FOLLOWED BY DRIVERS & ALL OTHER STAFF OF THE SUPPLIER 8. QUOTATION ARE TO BE SUBMITTED PREFERABLY IS SEALED ENVELOP PROVIDED BY NRL ALONG WITH THIS RFQ HOWEVER IF		9			
		SUPPLIERS ARE SUBMITTING OFFER IN THEIR OWN ENVELOPE, REFERENCE NO WITH DESCRIPTION OF MATERIAL AS MENTIONED IN OUR RFQ MUST BE MENTIONED ON THE ENVELOPE. 9. QUOTATION RECEIVED ON FAX & E-MAIL WILL NOT BE CONSIDERED. 10. QUOTATIONS MUST BE SIGNED BY AN AUTHORIZED REPRESENTATIVE AND MUST BE STAMPED WITH COMPANY STAMP.					
		,					,

YOUR REF. NO.

DATE:

PAGE 2 OF 2

AUTHORIZED SIGNATURE