

आई सी एम आर - राष्ट्रीय व्यावसायिक स्वास्थ्य संस्थान (व्यावसायिक स्वास्थ्य के लिए विश्व स्वास्थ्य संगठन का सहयोगी केन्द्र) स्वास्थ्य अनुसंधान विभाग, स्वास्थ्य और परिवार कन्याण मंत्रालय, भाल सरकार

ICMR - National Institute of Occupational Health (WHO Collaborating Centre for Occupational Health) Department of Health Research, Ministry of Health and Family Welfare, Government of India

Date:

INDENT FOR HIRING OF OUTSIDE VEHICLES UNDER RATE CONTERACT

- 7. No. of persons using the vehicle

Please tick ($\sqrt{}$) on type of vehicle required and Duration/Kilometers:-

| | Rates are as per rate contract | | | | | |
|-----------------------|--------------------------------|----------------|-----------|------------|------------|----------|
| Type of Vehicle | No. of | Rate for 10 | Rate for | Rate per | Rate per | GST & |
| | Vehicles | Hrs. & 80 Kms. | 24 Hrs. & | Extra Hrs. | Extra Kms. | Drivers |
| | | (Rs.) | 300 Kms. | beyond | (Rs.) | Charges |
| | | | (Rs.) | 10 Hrs. | | |
| | | | | (Rs.) | | |
| Sedan (Indigo/Dzire | | 1980.00 | 3150.00 | 100.00 | 12.00 | Included |
| or equivalent) (AC)) | | | | | | |
| Permium SUV | | 3280.00 | 5280.00 | 150.00 | 16.00 | Included |
| (Innova Crysta or | | | | | | |
| equivalent)(AC) | | | | | | |

Equipment are to be carried out?

:- YES / NO

If YES -pl. mentioned No. of Equipment pl.:-

Name & Contact No. of Key person using vehicle:-

Date :-

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(Signature of Indenter)