

DAV PUBLIC SCHOOL

KALINGA NAGAR, GHATIKIA, BHUBANESWAR - 751029

Affiliated to C.B.S.E., New Delhi, Affiliation No. 1530121, School No.- 15321) U-DISE Code: 21170511377

Ref. No. DAV (KN) 2070 /20 25

Date: 04/09/2025

QUOTATION CALL NOTICE

Sealed quotations are invited by the undersigned from the experienced Agencies for Security Guard/Housekeeping/Daily Wage Earner having valid license, GST Number, PAN Numbers, PF and ESI registration for deployment at D.A.V. Public School, Kalinga Nagar, Bhubaneswar.

The interested agency/quotationer is required to deposit a demand draft of Rs. 200/-(Rupees Two Hundred) only in favour of DAV Public School, Kalinga Nagar, payable at Bhubaneswar (Non-refundable) towards cost of the Quotation Form and obtain the prescribed quotation form from the school office on all working days from 04.09.2025 to 18.09.2025 between 10.00 a.m. to 3.00 p.m.

The last date to submit the sealed quotation is 18.09.2025 upto 4.00 p.m. and will be opened on 19.09.2025 in the presence of quotationer at 4.00 p.m. Incomplete quotation will be treated as invalid and rejected. The successful bidder will deposit Rs. 10,000/-(Rupees Ten thousand) only towards security amount which will be refunded at the end of service

Agencies/Parties submitting rate must note the following conditions.

- 1. DAV Public School, Kalinga Nagar, Bhubaneswar does not bind them to accept the lowest quotation and reserve the right to accept or reject any quotation without assigning any reason whatsoever.
- 2. The school reserves the right to award the work to more than one agency, if necessary.

Memo No. DAV(KNG)/ 2071 /2025

Date: 🖪

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Copy to

- 1. The Notice Board of the school for information of the public/person concerned.
- 2. The Principal, DAV Public School, Chandrasekharpur/Pokhariput/Unit-VIII, Bhubaneswar and the Principal, DAV Public School, CDA, LRDAV, Raja Bagichha Cuttack with a request to kindly take steps to display the quotation call notice on the School Notice Board for information of the public/person concerned.
- 3. The concerned file for record.

PRINCIPAL 4/9/20 D.A.V Public School

MANAGED BY: DAV COLLEGE MANAGING COMMITTEE, CHITRA GUPTA RBAD, DELHI

Address: Kalinga Nagar, Post: Ghatikia, Bhubaneswar - 751029 (Odisha)

Phone No.: 0674-2386185, Fax: 0674 - 2386335, Email: davkng09@gmail.com, Web site: www.davkng.org.in

TENDER FORM FOR DEPLOYMENT OF SECURITY GUARD & MANPOWER AT DAV PUBLIC SCHOOL, KALINGA NAGAR, BHUBANESWAR-751029

FINANCIAL BID

Name of the Agency	//Service Provider	
Complete Address	·	
	Tel No.	Email.

Unskilled	Semi-	Skilled			
Da	skilled	Onlined	Highly Skilled	Guards	Head Guard
Rs.	Rs.	Rs.	Rs.	Rs.	Rs.
	Details of	Taxes if	any		
		1 4,00, 11	ATTY		
				Details of Taxes, if any	

Payment will be made on per day basis as per biometric attendance.

Signature of the authorized signatory of agency/service provider with date and seal

N.B. Payment of bill of a particular month will be released on production of copy of acquaintance roll signed by the staff concerned & countersigned by the Accountant of the school bank statement in support of credit of salary to respective account of the staff members duly acknowledged by the Branch Manager of the concerned Bank, receipt of P.F., E.S.I & Gratuity deposits of the preceding month along with the bill. In case of less supply of staff on any day, wages will be deducted accordingly.

TENDER FORM FOR DEPLOYMENT OF SECURITY GUARD & MAN POWER AT: D.A.V. PUBLIC SCHOOL, KALINA NAGAR, BHUBANESWAR.

TECHNICAL BID

	e Address						
Tel.No:			E-mail:				
License t	o run private Security nclose copy of license	Agency	Valid Labour License No. (Please enclose copy of license)				
	te under shop and con nclose copy of license		shment Act:				
	CH to Agree 19 to		gd.No:				
			Regd.No: ice Tax No				
JDEI COUC	. 110.	Service	1 ax No				
Past Expe	erience, if any:						
Sl.No.	Name of the organization	Period of Contract	No. of Persons Deployed	Contact Person	Mobile No. of Contact Person		
Sl.No.			Persons		Contact		
Sl.No.			Persons		Contact		
Sl.No.			Persons		Contact		
		Contract	Persons		Contact		
(Please er	organization	Contract reements)	Persons		Contact		
(Please er	organization	Contract reements)	Persons		Contact		

nclosed copy of the agreements)

Annual Turnover (Please attach Audit Report/IT return of last three years)

Signature of authorized signatory Of agency/service provider with date and seal