

## Inquiry Form

IIPHG(U)/2025-26/50

Date: 18.12.2025

<b>To</b> Indian Institute of Public Health Gandhinagar Opp. Air Force Headquarters, Near Lekavada Bus Stop, Gandhinagar, Gujarat	<b>From: (Details of the agency providing quotation)</b>  <b>Organization Name:</b>  <b>Authorized Person Name:</b>  <b>Complete Address:</b>  <b>Contact No.:</b>
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**Sub.: Quotation for supply of Hair Trimmer:**

Sr. No.	Particulars	Qty.	Rate	Amount
1	<b>Hair Trimmer:</b> <b>Power Source:</b> Battery Powered <b>Material:</b> Stainless Steel <b>Blade Material:</b> Stainless Steel <b>Feature:</b> USB Charging, Detachable Head, Charge Indicator Light	40 Nos.		
	Total			
	GST @_____%			
	<b>Total with GST and delivery charges</b>			

1. PAN & GST #:
2. Delivery Period: Within 03 to 04 days after receipt of Purchase order.
3. Validity of the quote:
4. Payment Term: 100% within 10 days of receipt of material and invoice.
5. Delivery to be made at Indian Institute of Public Health Gandhinagar, Opp. Air Force HQ., Near Lekavada Bus Stop, Gandhinagar, Gujarat.
6. Please sign and stamp on each page.
7. All quoted rates must be inclusive of applicable taxes, delivery charges and all associated costs.
8. For any queries regarding inquiry, please feel free to contact us at: +91 7433910705
9. Please submit your quotation in sealed cover at IIPHG Office address mentioned above on or before **21/12/2025**.

Stamp and Signature of Authorized person