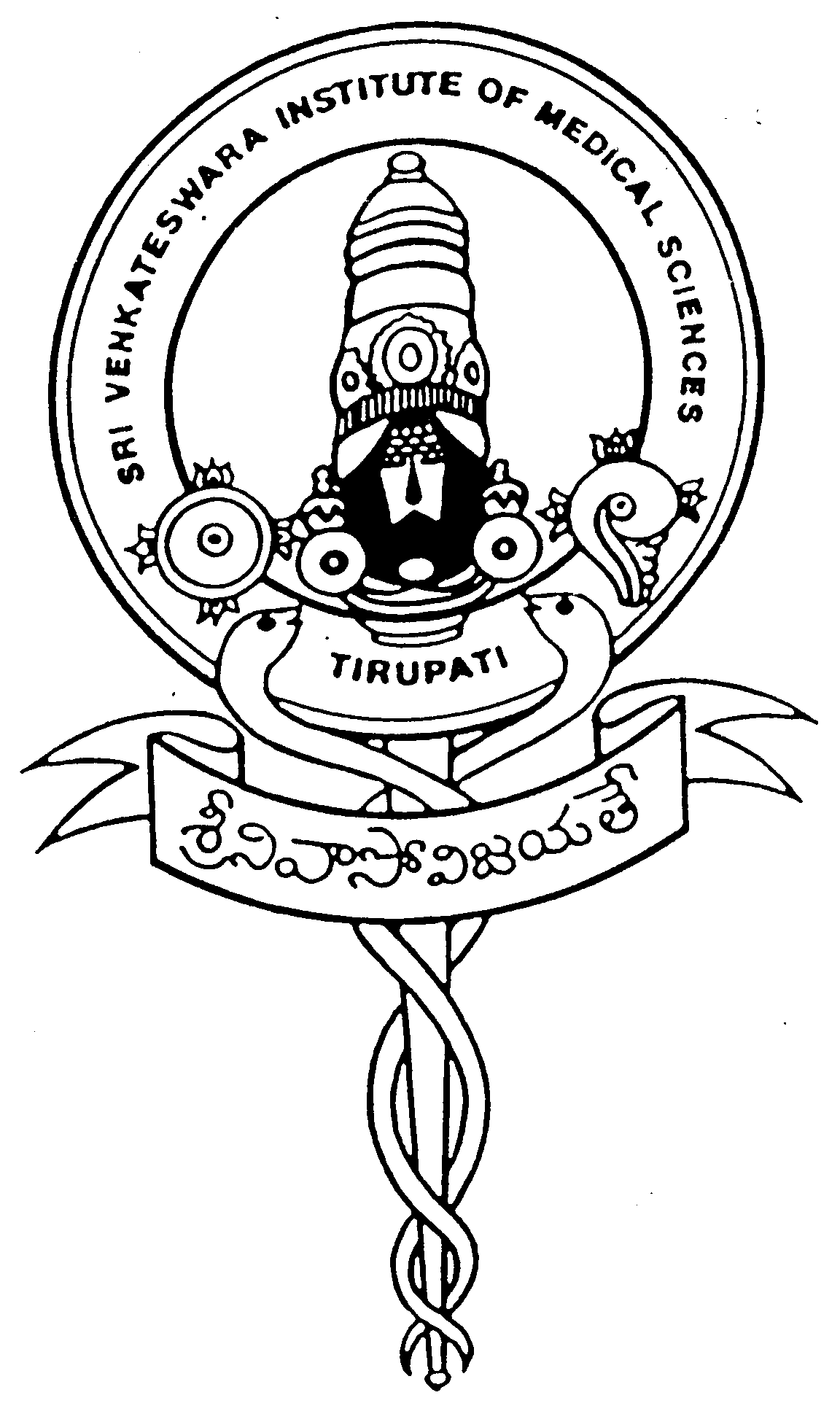
**SRI VENKATESWARA INSTITUTE OF MEDICAL SCIENCES :: TIRUPATI**



(A University established by an act Of A.P. State legislature)

**Request for Spare/ accessory/ Consumable to equipment**

Tirupati

Date:..........................

From

To

The Director-cum-VC,

SVIMS,

Tirupati.

Sir,

Sub: Procurement of Spare & accessory for the dept. of …………………………….

Request- Reg.

\*\*\*\*\*

I submit to your attention that the following spare / accessory / Consumable is required for ……………………………………………….equipment located in the dept. for the purpose of patient

care / academic/ research / administration (*please tick(*✓*) whatever is applicable)*

.

***Details of the spare /***

***accessory/consumable:***

Hence, I request you to advise the concerned for procurement of the above item at the earliest.

Thanking you

Yours sincerely

**Enclosures:** Proposal form for spare / accessory to the equipments

**PURCHASE DEPT. – FORM III**

**SRI VENKATESWARA INSTITUTE OF MEDICAL SCIENCES, TIRUPATI**

**PROPOSAL FORM FOR SPARE / ACCESSORY TO THE EQUIPMENTS**

***(NOTE : ALL THE COLUMNS ARE TO BE FILLED – Both hard copy and soft copy to be submitted)***

**Date:**

|  |  |  |  |
| --- | --- | --- | --- |
| **S.no** | **Particulars** | |  |
| 1. | Name of the proposing department | |  |
| 2. | a) Name of the equipment  b) Make  c) Year of installation | |  |
| 3. | Part category- spare or accessory | |  |
| 4. | Part details: a) Name:  b) Code / Model:  c) part no.: | |  |
| 5. | Make preference:   1. Whether the accessory from same equipment make is needed, if so justify | |  |
|  | 1. Any other make is feasible, if so please suggest the makes | |  |
| 6. | Approx. cost of the spare / accessory | |  |
| 7. | Whether service engineer inspected, if so please attach service report | |  |
| 8. | Justification for need of the spare / accessory | | |
| 9. | When was the earlier spare / accessory requested for the same equipment | Signature of the HOD | |
| 10. | Justification & Recommendations of the Sr. BME regarding the need of the spare / accessory | | |
| 11. | Recommendations of the Medical Superintendent | | |
| 12. | Recommendations of the Professor & In-charge (Purchase & Stores) | | |

**Procurement procedure for spares / accessories**

1. For spare/accessories/consumable to the equipments, the HOD is requested to arrange information in the prescribed form. The prescribed form duly filling all the columns and approved by the concerned authorities to be sent for processing.
2. A request approved by the Director-cum-VC to be attached with the proposal form.
3. The format of the request letter is advisory, if required may be modified.
4. As per the present purchase policy the procurement is made through calling sealed quotations (minimum 03 nos.). If it is monopoly item, the quotation received from authorized dealer / manufacturer will be processed.
5. If the cost of the spare is above Rs. 3lakhs, the proposal will be placed before Purchase Committee for its decision. If the cost of the spare is above Rs. 15 lakhs in addition to the approval of Purchase Committee the approval of Finance Committee is also needed. Later if it is monopoly item, the quotation received from authorized dealer / manufacturer will be processed, otherwise quotations (minimum 03 nos.) are received and processed.
6. The quotations are sent to Sr. BME for his comments with reference to the institute specifications whether matching or not.