

**BEML LIMITED**

(A Government of India Undertaking)

Bangalore Complex, New Thippasandra Post, Bangalore-560 075

(Purchase Department)

Sub: Request for quotation for Supply of Welding consumables (Ador Make)- BEML Bangalore.

## Annexure - A

Sl. No	BEML Part No	Material Description	Qty (Nos)	Vendor remarks (Complied / Not complied)
01	8691200407	Contact Tip 1.6 mm CONTACT TIP TO ADOR WL PART NO 0150102563 (S15.01.002.0563) SIZE: 1.6MM {H.D}	200	
02	8691200400	Contact Tip 1.2 mm TO ADOR WL PART NO.0150102558 (S15.01.002.0558)	500	
03	8691205700	Gas Nozzle TO ADOR WL PART NO 150102542 (S15.01.002.0542)	100	

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04	8691205600	Insulator SET Gas Nozzle ADOR WL PART NO.0150102594 (S15.01.002.0594)	100	
05	8691206101	Socket UMG Part SOCKET WITH M8 THREADS TO ADOR W L PART NO.A150102598 (S15.01.002.0598)	100	
06	2418050502	Regulator acetylene two stage ACETYLENE REGULATOR TWO STAGE TO IS : 6901 OF 1988 WITH ISI MARKING. SUPPLY TO BE ACCOMPANIED WITH CERTIFICATE AS PER IS. MAKE : ADOR (S10.64.510.0057)	20	

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07	2418050702	<p>Regulator for Oxygen IOX 63B</p> <p>TWO STAGE OXYGEN REGULATORS TO IS: 6901 OF 1988 WITH ISI MARKING</p> <p>(Inlet pressure 200 bar and outlet pressure 10 bar).</p> <p>MAKE: ADOR (S10.64.510.0058)</p>	20	
08	8692904054	<p>Argon pressure Regulator</p> <p>2 STAGE ARGON PRESSURE REGULATOR WITH FLOW METER</p> <p>MAKE : ADOR/MISATU</p> <p>Ador P/N: 0120801007 / MISATU :DAR :035 CDSF</p>	20	

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Note:

1. Bidder should comply in vendor remark's column for above requirement.
2. For other than OEM, vendors to submit authorized Valid dealer Certificate along with offer and BEML may be verify authorization letter with OEM for confirmation.
3. The above items make only ADOR, other any reputed brands are not acceptable and offer will be not considered.
4. Offer Accept or Reject, buyer decision will be final

Sl. No	Other Terms and Conditions	Vendor Remarks
1	Delivery Period shall be within 30-45 days from the date of releasing of Purchase Order. Early supply also acceptable.	
2	The firm shall provide warranty for a period of minimum <b>ONE year</b> for non-consumables items as above.	

I / we hereby certify that all the information given above is factual.

Signature with date of Authorized signatory

Name:\_\_\_\_\_

Designation:\_\_\_\_\_

Firm's Seal:\_\_\_\_\_