

**STANDARD FORMAT OF PURCHASE ORDER**

File No. \_\_\_\_\_

Address of the State \_\_\_\_\_

Dated, the \_\_\_\_\_, 2017

M/s \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SUPPLY ORDER FOR SUPPLY OF ICP-MS/ LC-MSMS/GC-MSMS**

1. Reference \_\_\_\_\_.

2. The supply of items mentioned below is awarded to your firm as per the rates mentioned in the Rate Contract agreed upon between FSSAI and Your Firm:

Sl. No.	Model/make of Equipment	Number of Equipment
(i)		

3. All terms and conditions will be as per Rate Contract of FSSAI (already shared), Accordingly 05% of the cost of equipment need to be submitted by the supplier as Performance Bank Guarantee. The Performance Bank Guarantee should be valid for 02 months beyond the contract period.

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Copy to :-

Joint Director(QA), FSSAI, FDA Bhawan, Kotla Road, New Delhi