

PRICE BID (ENVELOPE-B)

HIRING OF PREMISES FOR SBI MALANIYAD BRANCH MORBI,
DISTT: MORBI, GUJARAT – 363 330

(TO BE SUBMITTED IN A SEPARATE SEALED ENVELOPE)

The Assistant General Manager
State Bank of India,
Regional Business Office - II
First Floor, Shiv Shakti Complex,
Morbi-Wankaner Highway 8A, Morbi – 363 642

With reference to your advertisement in the _____ dated _____ and having studied and understood all terms and conditions stipulated in the newspapers advertisement and in the technical bid, I/We offer the premises owned by us for housing your branch/office on lease basis on the following terms and conditions:

General Information:

Location:

a.	Name of the Building	
a.1	Door No./ Plot No.	
a.2	Name of the Street	
a.3	Name of the City	
a.4	Pin code	

	<p>(i) Name of the owner</p> <p>(ii) Address</p> <p>(iii) Name of the contact person</p> <p>(iv) Mobile No.</p> <p>(v) Email address</p>	
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Rent:

Level of Floor	Built Up Area (sqft)	Rent per sqft per month (Rs.)	Total rent per month of Built up area (Rs.)
Ground Floor			
Total Rent (A)			

Total Rent per month (A) = Rs. _____

(Rupees _____ only)

Rentable area will be based on built up area of the floor in accordance with the one mentioned under para / clause / item 1.17 of technical bid. Rent shall be quoted on built up area basis only, taking into account the parking space, area for installation of generator and VSAT etc., and no separate rent shall be paid for these facilities. Please note that the rent should be inclusive of all present and future taxes including municipal taxes/cess, service charges like society charges, maintenance charges etc and will not be paid separately by the Bank.

The GST if levied on rent paid by us shall be reimbursed by the SBI Malaniyad Branch Morbi - 60310, to the landlord on production of such payment of tax to the Government.

DECLARATION

We have studied the above terms and conditions and accordingly submit an offer and will abide by the said terms and conditions in case our offer of premises is accepted.

Place:

Date:

Name &Signature of Lessor with seal if any