



भारत सरकार/Government of India
स्नातकोत्तर आर्युविज्ञान शिक्षण एवं शोध संस्थान
डा.राम मनोहर लोहिया अस्पताल, नई दिल्ली
Post Graduate Institute of Medical Education and Research,
Dr. Ram Manohar Lohia Hospital, New Delhi



No. 17-1(119)/2017/HA-I/8652

Dated 23rd Aug, 2017

NOTICE

The Medical Superintendent, Dr. Ram Manohar Lohia Hospital, New Delhi invites application from **War Widows and/or Person with Disability** for running the kiosk at MORTUARY BLOCK, Dr. RML Hospital.

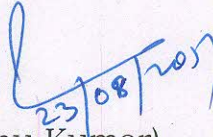
Interested parties can collect detailed information/Terms & Conditions personally from HA-I, Room No.-18, Nursing Home, Dr. RML Hospital, New Delhi or downloaded from website of <http://rmlh.nic.in>.

Sealed application should be superscripted as **“Application for running Kiosk at Mortuary Block in Dr. RML Hospital”** may be submitted in the Room No. 18, HA-1 Section, Nursing Home, Dr. RML Hospital, New Delhi.

IMPORTANT DATES

- Last date of the receipt of Application 2:00 PM on 12th Sept, 2017
- Opening Date and Time 2:30 PM on 12th Sep, 2017

The Medical Superintendent, Dr. RML Hospital, New Delhi reserves the right to reject any or all application without assigning any reasons whatsoever.


(Shambhu Kumar)
Deputy Director (Admn.)
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TERMS & CONDITIONS

1. **The sole purpose of establishment in running of this kiosk is to facilitate the patients, attendants and hospital staff with amenities of high standards at the lowest possible rates.**
2. Application should invariably be submitted in a sealed envelope duly page-numbered & indexed along with self attestation on each page.
3. Application would be considered subject to their acceptance of all the Terms & Conditions.
4. The following documents are required to be enclosed along with the application (all documents must be self attested, failing which the same shall be treated as invalid):
 - I. Two photographs
 - II. Address Proof
 - III. PAN Card
 - IV. IT returns of previous financial year, if available
 - V. Physically Handicap Certificate **OR** War Widow Certificate
 - VI. Proof of income from all sources
5. Application duly complete in all respect should be submitted in the Room No. 18, HA-1 Section, Nursing Home, Dr. RML Hospital, New Delhi in a sealed cover, failing which the application is liable to be rejected.
6. All the supporting enclosures to be provided as part proof of should be self attested by the applicant or the person authorized on his/her behalf.
7. Application submitted by the Applicant shall be rejected out rightly if the Applicant:-
 - *Submits incomplete application.*
 - *Submit the application in joint venture.*
 - *Stipulates his/her own conditions or any alternative/conditional proposals.*
 - *Does not agree with the stipulated Terms and Conditions.*
8. The shops should be operational within one month from the date of acceptance of the offer of allotment.
9. The covered area of the Kiosk is **5' x 5'** which may not be changed in any condition.
10. In case of individual applicant only branded packed items also allowed to sell and in case of any firm/franchise only branded items of their own brand be allowed to sell.
11. The application shall be legibly filled in ink or typed neatly giving full addresses of the individual /firm. Any alteration overwriting etc. shall be duly attested by the applicant.
12. The application should be signed by the applicant himself/themselves or of his/their authorized agent/representatives. (The authorization to be enclosed wherever applicable).

[Handwritten Signature]
23/08/17

