

**MANUAL FOR PROCUREMENT OF GOODS 2017**

**Ministry of Finance Department of Expenditure**

Annexure 6

Annexure 6: Proprietary Article Certificate

(Refer Para 4.6.1)

Valid for the Current Financial Year

|  |  |  |  |
| --- | --- | --- | --- |
| File Number and Date Reference | |  | |
| 1 | Description of article |  | |
| 2 | Forecast of quantity/annual requirement |  | |
| 3 | Approximate estimated value for above quantity |  | |
| 4 | Maker’s name and address |  | |
| 5 | Name(s) of authorized dealers/stockists |  | |
| 6 | I approve the above purchase on PAC basis and certify that: --  Note- Tick to retain only one out of (b), (c-1) or (c-2) whichever is applicable and cross out others. Please do confirm (a) by ticking it – without which PAC certificate will be invalid. | | |
| 6(a) | This is the only firm who is manufacturing/stocking this item.  AND | |  |
| 6(b) | A similar article is not manufactured/sold by any other firm, which could be  used in lieu OR | |  |
| 6 (c-1) | No other make/brand will be suitable for following tangible reasons (like OEM/warranty spares): OR | |  |
| ............................................................................................................ | |
| 6(c) | No other make/brand will be suitable for following intangible reasons (if PAC was also given in the last procurement cycle, please also bring out efforts made since then to locate more sources): OR | |  |
| ............................................................................................................ | |
| 7 | Reference of concurrence of finance wing to  the proposal: | ......................................................... | |

|  |  |  |  |
| --- | --- | --- | --- |
| History of PAC purchases of this item for past three years may be given below | | | |
| Name of the Supplier |  | | |
| Order/Tender  Reference& Date | Quantity Ordered | Basic Rate on Order (Rs.) | Adverse Performance Reported if Any |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Signature of faculty/Staff …………………………………

Signature of Approving Authority ...............................................................

Date ............................... Designation of Officer .......................................

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