

**ओरिएण्टल
इंश्योरेंस**

पृथ्वी. अग्नि. जल. आकाश.
सबकी सुरक्षा हमारे पास.



**Oriental
insurance**

Prithvi. Agni. Jal. Aakash.
Sab ki suraksha hamare paas

**THE ORIENTAL INSURANCE COMPANY LIMITED
REGIONAL OFFICE (ESTATE DEPT.)
New No. 4, UIL Building, IV Floor, Esplanade, CHENNAI 600 108.
(CIN-U66010DL1947GO1007158)
Phone : 044-23458211/12/13. FAX : 044-23458217.**

TECHNICAL BID

I. Details of the Owner:

1. Name and Address

2. Telephone Number / Mobile number:
Email ID:

3. Marketability of Title

4. Location of the plot/premises
(Attach sketch plan)

5. Floor of the offered premises _____(Ground Floor / First Floor
Second Floor / Third Floor.....)

II. Details of the Locality:
(nearby -----landmark)

III. Details of the property:

1. Carpet Area of the Premises : _____sq.ft.
(Refer "ISI Code No. S-3861-1975")

Excluding (i) Bath room and lavatory (ii) Verandahs (iii) Corridors and passages
(iv) Entrance hall and porches (v) Staircase and mummies (vi) Shaft and Machine
room for lift(vii) Air Conditioning Plant Rooms (viii) Shaft for sanitary pipings etc.

2. If proposal is for ready built premises Yes/NO
Year of construction _____

3. If the proposal is for premises under construction:
(a) Present stage of construction
(b) Time in which the premises would be ready for occupation
(c) Total area of the premises to be provided by offerer

4. Whether parking space will be provided. Yes / No

IV. Terms of lease Offered:

(a) Minimum Period of lease (9 years or 10 years) _____ years

(b) (i) Increase of rent after 3 years @ 15%

(ii) Increase of rent after 5 years @ 25%.

V. Registration charges:

(Do you agree to bear the registration charges on 50:50 basis)

VI. Other facilities available:

(a) Water availability (whether Municipal water / bore well water)

(b) Electrical Power phase and sanctioned load

(c) Lift facilities

(d) Generator / power back up

(e) Fire Fighting arrangements

(f) Distance from bus station / Rly. Station / Air-port

(g) Type of flooring- Granite / marble / vitrified tiles / mosaic / ordinary flooring.

(h) Age of Building – within 10 years / 10-20 years / 20-30 years / above 30 years.

(i) Natural light and ventilation.

(j) Whether premises is fitted with Airconditioners - Yes / No

(k) Whether premises is fitted with Furniture & Fixtures - Yes / No

(l) located on Road side / Back side

(m) Any other relevant information

I/We confirm that all the above are true. We also confirm that we hold clear title to the property and all construction of the premises offered are carried out as per local rules and regulations. I / We also agree to provide space on the terrace of the premises (or at any other suitable area) for installation of **INLIAS Antenna** or any other like device to facilitate the business operations of the OICL without any extra charges.

Place:

Date:

SIGNATURE

Name:

Designation of Duly authorized Attorney.

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FINANCIAL BID:

I. Name and address of owner :

2. Telephone Number/Mobile Number

Email ID

3. I. Address of the property offered.
(GF / FF / SF / TF.....)

II. Carpet Area of the Premises : _____sq.ft. @ Rs. _____ per square foot
(Refer "ISI Code No. S-3861-1975")

III. Excluding (i) Bath room and lavatory (ii) Verandahs (iii) Corridors and passages

IV. Entrance hall and porches

V. Staircase and munties

VI. Shaft and Machine room for lift

VII. Air Conditioning Plant Rooms (viii) Shaft for sanitary pipings etc.

(The Tenderer is advised to quote the rate which includes all the charges and make specific mention of any other charges/taxes.)

III. Terms of lease:

(a) period of lease (9, 10 or more ---- years) : _____ Years

(b) (i) Increase of rent after 3 years : @ _____ %

(ii) Increase of rent after 5 years : @ _____ %

(c) Total Lease period

(Minimum lease period acceptable is either 9 years OR 10 years)

(d) Advance rent.

(e) Security Deposit

I/We confirm to abide by standard lease agreement of the company, which shall be compulsorily registered with the Registration Authority for a total period of lease in one go. I / We agree to bear the registration charges on 50:50 basis.

Place:

Date :

SIGNATURE.