

Financial Bid

The Assistant General Manager
Indian Bank,
Zonal Office-Tiruvannamalai.

Engagement of agency for
Electrical Safety Energy Audit of Bank's branches/Office Building/s at ZO Tiruvannamalai

With reference to your Tender Document dated **28.04.2026** I/we, having examined all relevant documents and understood their contents, hereby submit our Financial Bid for preparation of Tender for Electrical Safety &Energy audit of Bank's branches/offices at different places/locations.

1. Our professional fee for the services performed in terms of the Scope of Work as set out in the Tender document twill be Rs..... (Rupees.....) for Bank's Branches/ Office at------(For more than one sites, separate sheet Showing branch/office wise break-up maybe enclosed).
2. The taxes as applicable including GST will be extra.
3. All the out of pocket expenses will be borne by me/us and I/we will not charge any amount from Bank other than above quoted fee.
4. We agree to receive the fee in the stages as detailed in the Tender document.
5. Capitalized terms used herein but not defined will have the meanings assigned to such terms in the Tender document.

Place-

(Signature, Name and Designation of the Authorized signatory)

Date-

FORMAT FOR ELETRICITY SAFTY AUDIT REPORT FOR PREMISES HAVING ONE FLOOR & OFFICE

BRANCH CODE &NAME	
ADDRESS	
SANCTIONED LOAD	
CONNECTED LOAD	
MONTHLY ELECTRICITYBILL (APPROX.)	
TOTAL TONNAGE OF AIR CONDITIONER LOAD	
AREA OF THE BRANCH	

ELECTRICAL SAFETY:

S.NO.	DESCRIPTION	DETAILS	REMARKS
1.	WHETHER TPN ISOLATORS/ MCCBs / ELCBs / ARE PROVIDED TO CATER THELOAD	YES/NO	
2.	WHETHER LIGHTS AND EMERGENCY LIGHTS ARE PROVIDED IN ELECTRICAL ROOM /OPERATING ARE AS FOR EASY OPERATION&MAINTENANCE WORKS	YES/NO	
3.	WHETHER PUMP ROOM, DGSET ROOM, UPS ROOM, AC PLANTROOM, ELECTRICAL PANEL ROOM ARE MAINTAINED IN DRY AND IN GOOD CONDITION AND OBSOLETE/HAZARDOUS/ OLD ITEMS ARE NOT DUMPED THERE	YES/NO	
4.	WHETHER WATER SEEPAGE IS OBSERVED NEAR ANY OF THE ELECTRICAL PANEL,DISTRIBUTION BOARD, ELECTRICAL EQUIPMENT,ETC	YES/NO	
5.	WHETHER EARTHING PITS ARE PROVIDED AND CONNECTED TO EQUIPMENT AND THE BODY OF EQUIPMENT	YES/NO	
6.	WHETHER EARTHING PITSAREMAINTAINED PROPERLY	YES/NO	
7.	WHETHER EXHAUST FANS FOR VENTILATION OF PANEL ROOM /ELECTRICAL ROOM/ UPS ROOM / DG SET ROOM IS PROVIDED AND NO PAPER, OLD MATERIAL OR ANY OTHER SCRAPIS KEPT NEAR DB/ PANELS /UPS /BATTERIES ETC.	YES/NO	
8.	WHETHER PENALTY IS BEING IMPOSED IN ELECTRICITY BILLON ACCOUNT OF HIGHER LOAD / POOR POWER FACTOR /POOR LOAD FACTOR ETC (ACERTAINED FROM THE ELECRICITY BILLS OF APRIL/MAY/JUNE/JULY)ADDITIONAL ELECTRICAL LOAD REQUIRED (IF ANY)	YES/NO	
9.	WHETHER LOAD IS DISTRIBUTED IN ALL THREE PHASES TO AVOID ANY UNBALANCING OF PHASE LOAD AND NO LOOSE ELECTRICAL CONNECTIONS/ HAPHAZRAD WIRINGS OBSERVED IN THE BUILDING/ OFFICE PREMISES.	YES/NO	

10.	WHETHER ISOLATING SWITCHES ARE PROVIDED FOR SWITCHING OFF OF THE NON ESSENTIAL LOADS IN PREMISES DURING NIGHT AND MAIN SWITCH TO SWITCH OFF THE POWER SUPPLY TO THE BUILDING/FLOOR INCASE OF FIRE/EMERGENCY.	YES/NO	
11	WHETHER PROPER PREVENTIVE MAINTENANCE AFTER OPENING OF THE ELECTRIACL BOARDS AND DISTRIBUTION BOARDS ARE CARRIED OUTBY THE LICENSE HOLDER ELECTRICIAN OR SKILLED TECHNICIANS OF EQUIPMENT MANUFACTURER / SERVICE PROVIDERS	YES/NO	
12	WHETHER APPROPRIATE TIMERS USED IN THE CHANGE OVER OF AIR CONDITIONERS FOR SERVER ROOM ACs ANDFOR SIGNAGE BOARDS TO MAKE AUTO ON/OFF (FOR SCHEDULE TIMINGS).THE THERMOSTAT OF THE ACs AT SERVER ROOM SHOULD BE SET TO SAY 26 C, SO THAT IT WILLRUN ONLY WHEN THE TEMPRATURE IS TOO HIGH(TO MINIMIZE CHANCES OF FIRE DUE TO IDLE RUNNING OF THE ACs DURING NIGHT)	YES/NO	
13	WHETHER PREVENTIVE MAINTENANCE OF THE ELECTRIC INSTALLTION AND EQUIPMENT IS CARRIED OUT BY SKILLED LICENSE HOLDER ELECTRICIANS/ SKILLED TECHNICIANS	YES/NO	
14	GENERAL CONDITION OF ELECTRICAL CONTROL PANELS,MAIN SWITCH, ELECTRICMETER BOARD, CHANGE OVER SWITCH, AC,WATER COOLERS,WATER FILTERS, WIRING CABLES ETC ARE IN GOOD CONDITIONS AND DBs, PANELS, SWITCH BOARDS ARE PROPERLYCOVERED	YES/NO	
15	WHETHERELECTRICAL EQUIPMENTS OF PANTRY ETC ARE PROPERLY CONNECTED TO INDUSTRIAL SOCKET BOXWITH MCBs. MCBs OR LATEST TYPE SWITCHES ARE PROVIDEDTOSWTICH ON /OFF THE ACs TO PROTECTTHEM FROM OVERLOAD.	YES/NO	
16	WHETHER THE CONTACT NUMBER OF PERSONS, ELETRICIANS, POWER DISTRIBUTION COMPANY. GENERTOR SERVICE PROVIDER, UPS VENDORS, ACs ETC ARE AVAILABLE WITH SECURITY GAURDS AND OTHER STAFF ARE DISPLAYED IN ELCTRIC / UPS/ SERVER ROOM.	YES/NO	
17	WHETHER POWER FACTOR CORRECTION PANEL OF APPROPRIATE RATING IS INSTALLED.	YES/NO	
18	WHETHER ALL THE CONNECTING POINT AT VARIOUS DBs AND PANELS ARE PROPERLY INSULATED AND PROPER INDICATIVE MARKING ARE DONE ARE THE RESPECTIVE PANEL/DB	YES/NO	
19	WHETHER THE INTERNAL INSULATION OF THE WIRE HAVEBEEN ACCOUNTEDFOR CHECKING THE DURABILITYOFELECTRICAL CONNECTION	YES/NO	

FIRE PREVENTIVE MEASURES:

S.NO.	DESCRIPTION	DETAILS	REMARKS (IF ANY)
1.	ALL OLD DISPOSABLE RECORDS, BROKEN FURNITURE ETC ACCUMULATED IN THE PREMISES HAVE BEEN CLEARED.	YES/NO	
2.	COMBUSTIBLE LEAF LITTER /WASTE PAPERS ETC IN AND AROUND THE BRANCH ARE REMOVED /CLEANED PERIODICALLY	YES/NO	
3.	NO STATIONARY / RECORDS/ OLD OBSOLETE ITEMS ARE STORED/KEPT IN THE SERVER/UPS /ELECTRIC ROOM	YES/NO	
4.	STORAGE RACKS IN STATIONARY / RECORD ROOM KEPT AT A SAFE DISTANCE OF AT LEAST 2M FROM ELECTRICAL POINTS/SWITCH /JUNCTIONBOXES	YES/NO	
5.	WHETHER IN THE PANTRY/CANTEEN,LPG ISUSED	YES/NO	

6.	ARE THE FIRE EXTINGUISHERS AVAILABLE IN THE FOLLOWING WORK AREA AND CLEARLY MARKED AND ACCESSIBLE: 1.SERVER/UPS ROOM: CO2 TYPE X 2. INDIVIDUAL DEPARTMENT OF THE PREMISES:CO2 TYPEX1 3.STATIONARY ROOM: CO2 TYPE X 1 4.ELECTRIC ROOM /AC PLANT ROOM: CO2 TYPE X 2	YES/NO	
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SERVER AND UPS ROOM:

S.NO.	DESCRIPTION	DETAILS	REMARKS (IFANY)
1.	WHETHER SERVER ROOM HAVE DUAL ACUNITS WITH TIMERCIRCUITDEVICEONINDEPENDENTCIRCUITS	YES/NO	
2.	WHETHER EXHAUST FANS ARE INSTALLED IN UPS ROOM	YES/NO	
3.	WHETHERPROPER INSULATION AT THE BATTERIES HAVEBEEN PROVIDED	YES/NO	

The particulars furnished in the application are true to the best of my/our knowledge &belief. I/we understand that if any of the particulars is found incorrect, even at a later stage, my/our contract will be cancelled.

SIGNATURE WITH SEAL OFAUDITOR

DATE:

PLACE:

ANNEXURE-2

FORMAT FOR ELECTRICAL SAFETY AUDIT
FOR PREMISES HAVING MULTIPLE FLOORS/OFFICES

1. Assessment of luminaries/ light fittings

Type of luminaries / light fittings	No of luminaries/light fittings	Lux level of luminaries/light fittings	Total electrical load		Remarks (Condition Of light fixtures acceptable or Not)	Suggestions for improvement, If any
			Watt	Amp		

2. Floorwise assessment of Air conditioning system

Type of Air Conditioning units	No of Air conditioners	Capacity of Air Conditioner (TR)	Total electrical load consumption	Condition of air conditioning system	Remarks (Condition of machine Acceptable or Not)	Suggestions improvement, if any

3. Floor wise assessment of UPS

No. of UPS	Capacity (KVA)	P-Voltage of each UPS			P-N Voltage each UPS			Phase Currents	Total electrical load consumption	Neutral Earthing & its adequacy	Protective earthing & its adequacy	Remarks (Condition of machine acceptable or Not)	Suggestions on improvement, if any
		R	Y	B	R	Y	B						

4. Floor wise assessment of electric circuit

Sl.No	Heads	Result	Remarks (acceptable or Not)	Suggestions on improvement,
1	Presence of Main switch interlocking if two different supplies are coming to			
2	Availability of correct identification of circuit details and protective devices			
3	Presence of non standard (mixed) cable colour warning notice at or near consumer unit/ Distribution board			

4	Cables correctly supported throughout the ironer not			
5	Condition of insulation of live parts			
6	Adequacy of wiring for current carrying capacity with regard to the type and nature of the installation			
7	Adequacy of protective devices ,type and rated current for fault protection			
8	Presence and adequacy of circuit protective conductors			
9	Whether Low voltage cables segregated from			
10	Whether Cables separated/seareated from non			
11	Whether proper termination of cables at enclosures			
12	Connections soundly made and under no Undue strain	Insulation of conductor visible outside enclosure		
		Connections of live conductors adequately enclosed		
		Adequately connected at point of entry to enclosure (glands, Bushes etc.,)		
		Condition of accessories including Socket outlets, switches &		
13	Other special observations, if any record the results of particular inspection supplied Separately			

5. Floorwise assessment of electrical Panel room

Sl.No	Heads		Result	Remarks acceptable or Not)	Suggestions on improvement ,if any
1	Presence of Main switch interlocking if two different supplies are coming of Distribution panel				
2	Availability of correct identification of circuit details and protective e devices				
3	Presence o from standard(mixed)cable e colour warning notice at or near consumer unit/ Distribution board				
4	Cables correctly supported throughout the lrun or not				
5	Condition of insulation five parts				
6	Adequacy of wiring for current carrying capacity with regard to the type and nature of the installation				
7	Adequacy of protective devices, type and rated current for fault protection				
8	Presence and adequacy of circuit protective conductors				
9	Whether Low voltage cables segregated from Medium voltage cables				
10	Whether Cables separated/segregated from non electrical services				
11	Adequacy of protective earthing conductor				
12	Adequacy of Neutral earthing conductor				
13	Whether proper termination of cables at enclosures				
14	Connections soundly made and under no Undue strain	Insulation of conductor visible outside enclosure			
		Connections of live conductors adequately enclosed			
		Adequately connected at point of entry to enclosure (glands, bushes etc.)			
		Condition of accessories including socket outlets, switches & joint boxes			

10. Assessment of lighting protection system

Sl. No	Heads	Result	Remarks (acceptable or Not)	Suggestions with new technologically energy efficient, environment friendly, cost benefited air condition in system
1	Number of terminals			
2	Number of down conductors			
3	Continuity of conductor			
4	Condition of the lightning conductor			
5	Joints condition			
6	Testing point on down conductor			
7	Earth conductor condition			
8	Earth resistance			
9	Other special observations, if any record the results of Particular inspection supplied separately			

11. Assessment of Diesel Generating Set:

No of Diesel Generator Set	Capacity Diesel Generator 1.Rating 2.make 3.type	P-P Voltage Of each Diesel Generator Set	P-N Voltage each Generator Set	Phase Currents	Total electrical load consumption	Neutral earthing & its adequacy	protective earthing & adequacy	Capacity of connections	Whether Generator Set loaded/underded and extent there of in%	Remarks condition of Machine acceptable or Not)	Suggestions on improvement, if any

SIGNATURE WITH SEAL

(CONSULTANT/CONTRACTOR)

(OFFICER OF BRANCH/OFFICE)

NAME OF THE ELECTRICAL ENGINEER/CONSULTANT/CONTRACTOR:

SUPERVISOR'S VALID LICENSE NO:

DATE:

PLACE:

The particulars furnished in the application are true to the best of my/our knowledge & belief. I/we understand that if any of the particulars is found incorrect, even at a later stage, my/our contract will be cancelled.

SIGNATURE WITH SEAL

(CONSULTANT/CONTRACTOR)

DATE:

PLACE:

FORMAT FOR ELECTRICAL ENERGY AUDIT FOR BRANCHES

BRANCH CODE & NAME	
ADDRESS	
SANCTIONED LOAD	
CONNECTED LOAD	
MONTHLY ELECTRICITY BILL (APPX)	
TOTAL TONNAGE OF AIR CONDITIONER LOAD	
AREA OF THE BRANCH	

ELECTRICAL ENERGY AUDIT:

DESCRIPTION	Wattag	Recommendation
Type of Electrical Fittings installed and its Lux level and Wattage		
No of Ceiling Fan installed and its power consumption.		
No. of Wall Fan installed and its power consumption		
No of Air-conditioners and its capacity and power consumption of each.		
No of computer installed and its power consumption.		
UPS installed and its capacity		
Any other gadgets installed and its power consumption.		
Verification of electricity Bill for last 12 months and observation if any		
Leakage if any in the wiring system		

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DATE:
PLACE:

SIGNATURE & SEAL OF AUDITOR
(Signature, Name and Designation of the
Authorized signatory)

Details of Rectification Required

High Risk

Medium Risk

Low Risk

Signature of Auditor

Signature of BM/ABM