

SINGLE VENDOR DECLARATION

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Date: 22-4-2024	PO No: BLR/PO/24-25/000012
Vendor Name:	FAST FIRE SERVICE
Product Description: fire extinguisher refilling	Unit / Project NAME -
Justification:	
	Only known supplier. (<u>List of the suppliers</u> which were contacted below and the specific reasons <u>why each was not a viable source</u>).
	Only known qualified supplier or item. (List the qualifications that each source or items meet. If another supplier offers a similar item, <u>provide the item identification, supplier information and comparable pricing</u>).
	Supplier proprietary item. (The selected supplier is the only manufacturer of this item. List the reasons why no substitute item can be used and if no similar item is available) Vendor has authorised Distributor/ dealer we have going with the same vendor because of local one and due to urgency .
	Franchise / Management / User Dept Directed. (Emergency Requirements from User department)
Prepared By	Approved By