

 <b>बैंक ऑफ महाराष्ट्र</b> <b>Bank of Maharashtra</b> भारत सरकार का बैंक एक प्रतिष्ठित एक बैंक	<b>सूचना प्रौद्योगिकी विभाग</b> Information Technology Department प्रधान कार्यालय: लोकमंगल, 1501, शिवाजीनगर, पुणे -5 Head Office: Lokmangal, 1501, Shivajinagar, Pune-5 टेलीफोन/tele-020 : 25614235 ई-मेल/e-mail : cmit_proc@mahabank.co.in	
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AX1/IT/NAS/PO/233/2025-26

Date: 08.12.2025

**M/s Connectivity IT Solutions Private Limited**  
**Unit No. 309, Eco Star,**  
**Vishweshwara Nagar Road,**  
**Off Aarey Road**  
**Goregaon(E), Mumbai- 400 063**

**PO No. 233/2025-26**

**Kind Attn.:**

**Mr. Shekher Gaigwal**

Dear Sir,

**Sub: Purchase Order for Supply, Installation and Maintenance of 1 Qty of Network Attached Storage (NAS).**

**Ref: Your commercial offer Letter Ref No: CS-SQ-MUM-2025-26-001168 dated 08.12.2025.**

We refer to your above-mentioned quotation and hereby place our Purchase Order for "Supply, Installation and Maintenance of 1 Qty of Network Attached Storage (NAS)". The rate finalized as per your offer are as follows:

(Rupees in Actual)

S. No	Description	Qty	Unit Price	Total Cost
1	<b>NAS Storage Synology:</b> Synology NAS RS1221RP + 8 GB RAM with Synology hat 3310-16T 16TB * 8 drive after RAID, 4 * Giga Network Port		5,02,260/-	5,02,260/-
2	<b>Additional Warranty &amp; Support:</b> Optional 3 years Priority support pack is optional & with in warranty period include priority email, telephonic, remote support to user, RMA 72 hours on NAS (include Hard Drive) return to EBM service center	1	1,00,452/-	1,00,452/-
<b>TOTAL COST</b>				<b>Rs. 6,02,712/-</b>

**The total cost of order is Rs. 6,02,712/- (Rupees Six Lakhs Two Thousand Seven Hundred Twelve only) + applicable taxes.**

The prices mentioned above are exclusive of GST which would be payable as per actual applicable rates.



**A. Location details for delivery:**

The product should be delivered at Bank's Corporate Office within 15 days with proper diligence and upkeep. The address details for delivery are as under:

Bank of Maharashtra,  
Corporate Office  
134/1, Mont Claire Baner- Pashan  
Link Road,  
Pashan, Pune,  
Maharashtra- 411021

**B. Payment Terms:**

Payment shall be released within 30 days after successful completion of the delivery, installation, and post acceptance of Health Check by the respective System Users of Bank.

We request you to acknowledge the receipt of this communication & send your acceptance as per attached format at **Annexure-1**. Please put the signature of the Authorized signatory and seal of your company on the 'Acceptance copy of the order' as token of acceptance of order. The signed and stamped order copy be returned to us within 7 working days as token of you having accepted the terms & conditions of the purchase order without any qualifications. We also request to furnish the Contact Details of important authorities of your company as per format at **Annexure-2**.

Yours faithfully,

  
(Deepak Kumar)  
Chief Manager  
IT Procurement & Payments

**Enclosures:**

**Annexure 1: Acceptance form**

**Annexure 2: Format for Contact Details of Important authorities from Company**

**Cc:** Chief Manager, IT - For co-ordination and supervision



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**Annexure-1: Acceptance Form**

**(TO BE SUBMITTED ON THE OFFICIAL LETTERHEAD OF THE COMPANY)**

To,  
The Chief Manager,  
Information Technology Department  
Bank of Maharashtra,  
Head office "Lokmangal" 1501,  
Shivajinagar, Pune-411005.

Dear Sir,

**Sub: Purchase Order for Supply, Installation and Maintenance of 1 Qty of Network Attached Storage (NAS).**

**Reg: Acceptance of your PO No. AX1/IT/NAS/PO/233/2025-26 dated 08.12.2025.**

We are in receipt of your order referred above along with its enclosures. We have gone through the order and the terms and conditions thereof. We hereby accept the order and convey our acceptance without any qualifications & agree with and confirm all the terms and conditions mentioned therein. We assure you that our Company will comply with the terms and conditions of the order. The second copy of the order along with all the annexure duly signed and stamped by us is enclosed.

**Yours faithfully,**

**Signature/s**

**For and on behalf of:**

**Seal of the company:**

**Name and Designation of Authorized Signatory of the Company:**

**Place:**

**Date:**

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## **Annexure 2 - Format for Contact Details of important authorities from Company**

### **1. Service Account Manager/ Single Point of Contact**

<b>Name</b>	
<b>Designation</b>	
<b>Email</b>	
<b>Mobile</b>	
<b>Landline</b>	
<b>Mailing Address</b>	

### **2. Implementation:**

Escalation 1, Escalation 2 and Escalation 3 for implementation related matters in below format

<b>Name</b>	
<b>Designation</b>	
<b>Email</b>	
<b>Mobile</b>	
<b>Landline</b>	
<b>Mailing Address</b>	

### **3. Operations:**

Escalation 1, Escalation 2 and Escalation 3 for operations related matters in below format

<b>Name</b>	
<b>Designation</b>	
<b>Email</b>	
<b>Mobile</b>	
<b>Landline</b>	
<b>Mailing Address</b>	

### **4. Top Management:**

Top Management Members of firm viz, MD, ED, VP etc. mainly for interaction with Bank's Top Management

<b>Name</b>	
<b>Designation</b>	
<b>Email</b>	
<b>Mobile</b>	
<b>Landline</b>	
<b>Mailing Address</b>	

In case company is providing products of some other OEM. Contact details OEMs should also be provided in above formats.

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