

M/s. Pridhvi Asset Reconstruction & Securitisation Company Ltd.
FOR SALE OF IMMOVABLE ASSET of M/s. VIKRAM HOSPITAL PVT. LTD.,

BID FORM

PRIDHVI ASSET RECONSTRUCTION AND SECURITISATION COMPANY LIMITED

Registered & Corporate Office: D. No. 1-55, 4th Floor, 'Raja Praasadamu', Masjid Banda Road,
Kondapur, Hyderabad – 500 084, India

Telephone No: 040-41413333. E-mail: co@paras.org.in

"Sealed Tender cum Auction Form"

FOR SALE OF ASSETS – A/c of M/s. VIKRAM HOSPITAL PRIVATE LIMITED

To,

Mr. V. Udayabhaskara Rao,

Chief Manager & Authorised Officer,

Pridhvi Asset Reconstruction and Securitisation Company Limited.

D. No. 1-55, 4th Floor,

'Raja Praasadamu', Masjid Banda Road,

Kondapur, Hyderabad – 500 084

Contact. Mobile: 9640993395. Office land line No: 040-41413305.

E-mail id: udayabhaskar[@paras.org.in](mailto:u@paras.org.in)

BID AMOUNT (in figures): Rs. _____/-

BID AMOUNT (in words): Rupees _____ ONLY.

SECTION – I

APPLICABLE WHERE BID IS BEING MADE BY ONE BIDDER ONLY

(SOLE BID)

1. Name of Bidder (IN BLOCK LETTERS): _____

2. Category of Bidder (please tick):

- ☐ Individual ☐ Sole Proprietor ☐ Partnership Firm ☐ Company
☐ Others (specify)_____.

3. Address of Bidder (as mentioned and submitted in the relevant KYC documents):

Telephone No. (with STD code) _____ Email _____@_____

4. Permanent Account Number (PAN) Card No. _____

5. Aadhaar Card Number: _____.

6. Name of the person representing the Bidder at the auction: _____

Telephone No. (with STD code) _____ Mobile: _____

M/s. Pridhvi Asset Reconstruction & Securitisation Company Ltd.
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SECTION II

APPLICABLE WHERE BID BEING MADE JOINTLY BY TWO OR MORE BIDDERS
(JOINT BID)

1. Details for Joint Bidder #1:

i. Name: _____

ii. Category (please tick):

☐ Individual ☐ Sole Proprietorship ☐ Partnership Firm ☐ Company
☐ Others (specify)_____.

iii. Address of Bidder (as mentioned and submitted in the relevant KYC documents):

Telephone No. (with STD code)_____ Email_____@_____

iv. Permanent Account Number (PAN) Card No._____

v. Aadhaar Card Number:_____.

vi. Name of the person representing the Bidder at the auction: _____

Telephone No. (with STD code)_____ Mobile: _____

Email: _____

2. Details for Joint Bidder #2:

i. Name: _____

ii. Category (please tick):

☐ Individual ☐ Sole Proprietor ☐ Partnership Firm ☐ Company
☐ Others (specify)_____.

iii. Address of Bidder (as mentioned and submitted in the relevant KYC documents):

Telephone No. (with STD code)_____ Email_____@_____

iv. Permanent Account Number (PAN) Card No._____

vi. Aadhaar Card Number:_____.

vii. Name of the person representing the Bidder at the auction: _____

Telephone No. (with STD code)_____ Mobile: _____

Email: _____

M/s. Pridhvi Asset Reconstruction & Securitisation Company Ltd.
FOR SALE OF IMMOVABLE ASSET of M/s. VIKRAM HOSPITAL PVT. LTD.,

3. Details for Joint Bidder #3:

i. Name: _____

ii. Category (please tick):

☐ Individual Company ☐ Sole Proprietor ☐ Partnership Firm ☐

☐ Others (specify)_____.

iii. Address of Bidder (as mentioned and submitted in the relevant KYC documents):

 _____ Telephone No. (with STD code)
 _____ Email _____ @ _____

iv. Permanent Account Number (PAN) Card No. _____

v. Aadhaar Card Number:_____.

vi. Name of the person representing the Bidder at the auction: _____

Telephone No. (with STD code)_____ Mobile: _____
Email: _____

**Add additional sheet in case of more joint bidders.*

M/s. Pridhvi Asset Reconstruction & Securitisation Company Ltd.
FOR SALE OF IMMOVABLE ASSET of M/s. VIKRAM HOSPITAL PVT. LTD.,

SECTION – III

APPLICABLE TO BOTH SOLE BID AND JOINT BID

DECLARATION

I/ We certify that:

1. The Tender amount stated above is towards the purchase of the property:

1	Land and Building bearing Door No. 46, New No. 30/1 and Door No. 3044, New No. D-31 (formerly CITB Site No. 47), Vivekananda Road, Yadavagiri, Devaraja Mohalla, Mysuru – 570 020 Land admeasuring 21600 Sq.ft., along with building with super built up area of 61200 Sq.ft.,
2	All the Movable assets located in the above property (bearing Door No. 46, New No. 30/1 and Door No. 3044, New No. D-31, (formerly CITB Site No.47), Vivekananda Road, Yadavagiri, Devaraja Mohalla, Mysuru–570 020. (comprising of Medical equipments, including office furniture & fixtures, electrical fittings, vehicles, etc.,)

2. Earnest Money Deposit (EMD) of **Rs.3,10,00,000/-** (Rupees Three crores Ten Lakhs Only) is being submitted as per the format prescribed in the Other Terms and Conditions of sale, vide Demand Draft No. _____ drawn on _____

(Nationalised / Scheduled Commercial Bank) in favour of **"Pridhvi Asset Reconstruction and Securitisation Company Limited"**, payable at Hyderabad, dated _____ or by way of RTGS to the credit of **Account No. 1006311 00000229, Collection Account: Pridhvi Asset Reconstruction and Securitisation Company Limited, Union Bank of India, Mid Cooperative Branch - Punjagutta, Hyderabad, IFSC Code: UBIN0577901.**

3. The above information is true and accurate and I / We may be held legally accountable for misrepresentation and/or for any loss, damage, etc. of whatsoever nature on account of the inaccuracy or falsity of any information stated or represented by us whatsoever in any manner.

4. I/We have read and understood all the terms and conditions relating to the sale of asset in the A/c of M/s. VIKRAM HOSPITAL PRIVATE LIMITED and are willing to abide by them unconditionally.

Date: _____

Place: _____

Name: _____

For and on behalf of: _____ (Bidder/
Joint Bidder # 1)

**Add additional sheet in case of more joint bidders.*