



BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME UNDER NATIONAL HEALTH MISSION



SERVICE PROVIDER
Tender No. WO-37/2021-2022/698

No : 1001076

CYRIX[®]

HEALTH CARE PVT LTD

ISO 13485 : 2012 & ISO 9001-2008 CERTIFIED COMPANY | AERB Approved Service Agency

Service Report

30/64 1 B, Petta Junction, Poonithura, Kochi- 682 038, Kerala
Ph : 98472 99500 Website : www.cyrix.com | Email : bemp.kl@cyrix.in

Health Facility..... <u>SPHL</u>	Call Registration Date : <u>12-8-24</u>
Address..... <u>Thiruvananthapuram</u>	Caller ID : <u>128898</u>
..... <u>Kerala</u>	Date of Visit : <u>16-8-24</u>
Ph:..... <u>8921564889</u>	Asset No : <u>0111466</u>
	EQPT Name: <u>Pharmacy Refrigerator</u>
	Manufacture: <u>kelvinator</u> Model: <u>Nubricool Plus</u>
	S. No..... <u>NA</u> Dept. <u>molecular diagnostic section</u>

Service Classification : Breakdown call PMS Calibration Cust. Training

Problem Identified : No proper cooling

Action Taken : Checked and found that cooling gas exhausted, issue with door beading and door path work. The machine is too old and rusted. Need to replace there for further working.

Completed Date : 16/8/24 Time : 2:00 PM Spare Required

Spare Replaced Requested

Description	Qty.	Part Number	PR Number
1. <u>NA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>
2.			
3.			

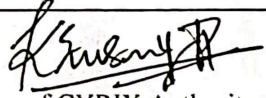


Cyrix Engineer	Date	Start Time	End Time
<u>Soojys Sudheep</u>	<u>16/8/24</u>	<u>1:00 PM</u>	<u>2:00 PM</u>

Customer Remark Completed

Service Engineer Name : <u>Soojys Sudheep</u>	Customer Name : <u>Thiruvananthapuram</u>
Signature: <u>[Signature]</u>	Signature: <u>[Signature]</u>
Date: <u>16-8-24</u>	Date: <u>16/8/24</u>
Contact Number: <u>7907406244</u>	Contact Number: <u>[Number]</u>
	Designation : <u>JAICHAND. J</u>
	Hospital Seal

State Public Health & Clinical Laboratory
Trivandrum
8229564889

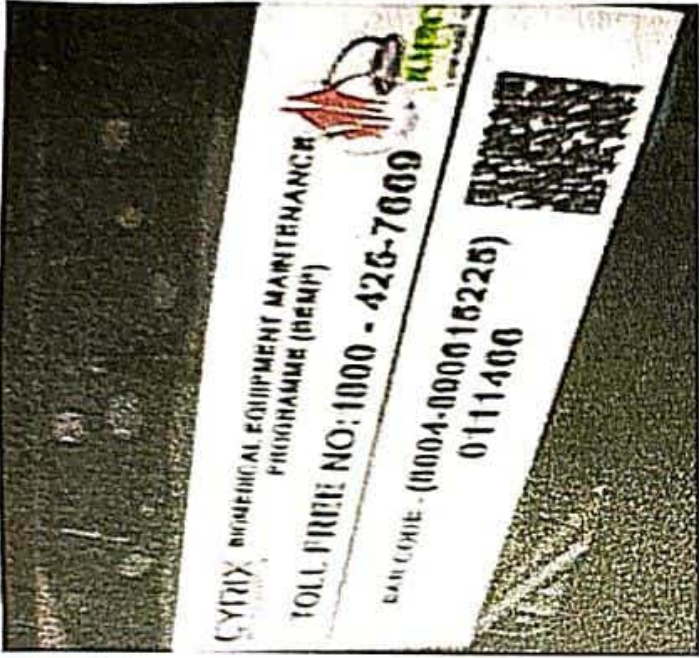
PROFORMA
RECOMMENDATION FOR BEYOND ECONOMIC REPAIR (RBER)
BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAM (BEMP)

Name of Hospital: STATE PUBLIC HEALTH LABORATORY	Name of District: Thiruvananthapuram
Name of Equipment: Pharmacy Refrigerator	Equipment ID & Barcode: 128898 & 0111466
Make: Kelvinator	Model: Nutricool plus
Serial Number: NA	Warranty details: No Warranty
Date of purchase/ Year of manufacture/ Installation Date: 10/08/2012	Present status of the equipment: Fully Damaged
Date of breakdown: 12/08/2024 (Toll free) (Date of registration of complaint through email/ Toll free)	*AMC/CAMC period agreed at the time of purchase: No AMC /CAMC
Action taken: Checked and found that the unit is not cooling. Identified cooling gas exhausted, Door and door beading defective. The unit is too old and rusted .Need to replace all the spares for further checking and working condition of the equipment.	
Recommendations for repair (required service details) : Not recommending for repair.	
Cost of spares (specify parts and cost): Door patch work, Door beading and gas charging = 14750/-	
# Percentage value of the cost of spares with respect to Cost of Purchase/ Asset Value: 73.7%	Asset Value: 19990/-
Abstract of Service Report provided by the OEM/ Authorized Service Provider/ CYRIX (Attached or Not) : Cyrix service report and reference quotation attached.	
Reasons for recommending the equipment as BER: Checked and found that the unit is too old and rusted. Identified Door, Door beading defective and cooling gas exhausted. The unit was installed on 10/08/2012 and covered up to 12+years. The repair cost is 73.7%. As per the tender clause 5.3.14.1 both criteria met. So recommending the unit for condemnation	
 Name & Signature of CYRIX Authority with date	
Remarks of Junior Consultant (Biomedical) NHM: <i>As per the report the repair cost is high. So can be RBER as per tender conditions.</i>	
Recommended for BER (Yes/ No):	 Signature of JC BM (NHM)
Date: 31-8-2024	
Date: (i/c)	 Signature of Superintendent / Medical Officer



MANEESHA MOHAN M.R.
 Junior Consultant (Biomedical)
 National Health Mission
 Thiruvananthapuram

DIRECTOR
 State Public Health &
 Clinical Laboratory
 Thiruvananthapuram



FREEZ AIR6512, Thrikarthika, Kollivoor Grammananchavath, Nemom P.O. Pallichal, Thiruvananthapuram,
Kerala, 695020

Mob : 9603344081

Mail : freezair.svm@gmail.com

TAX INVOICE

Form GST INV - 1

(Rule 1 of GST Invoice Rules)

GSTIN : 32BEHPG4104B1ZF

CASH / CREDIT

Invoice No	FA/24-25/021
Inv Date	06-08-2024

Name & Address of Receiver (Billed to)

Name:	CYRIX HEALTHCARE PVT LTD
Address:	First Floor,petta Junction 30/641b Poonithurn,ernnakulam-682038
State Code:	32
GSTIN :	32AAFCC2499H2ZM

Site :						
Work order no:						
Sl.No.	Description of Goods / Services	HSN	Quantity	Rate	Taxable Value	
1	CHARGE FOR 600 LITER CHILLER REPLACE DRIER CAPIRRY TUBE NITROGEN FLASHING LEAK TESTING REPLACE COPPER TUBES AND GAS CHARGING @ GH THIRUVANANTHAPURAM	995463	1.00	12500.00	12500.00	
Total					12,500.00	
					CGST @9%	1,125.00
					SGST@9%	1,125.00
					Round Off	-
Total Bill Amount					14,750.00	

E&OE

Declaration

Certified that all the particulars shown in the above Tax Invoice are true and correct in all respects and the goods on which the tax charged and collected are in accordance with the Provisions of the GST ACT 2017 and the rules made there under.

Bank Account Details

A/c No: 7475002100000279
 Bank Name: Panjab National Bank
 Branch: Vizhinjam
 IFSC: PUNB0747500

Authorized Signatory

