

SRRA Data Purchase Application Form

Applicant Information:

Applicant's Name	
Company / Organization	

Academic/ Research Institute/ Company/ Organization	
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Address Line#1	
Address Line#2	
Qty	Telephone
State	Fax
Country	Email
Pin/Zip Code	Website

Information on Data to be purchased:

S. NO.	Station ID	Station Name	State
1			
2			
3			
4			
5			
6			

S. No.	Data Products	From (DD/MM/YYYY)	To (DD/MM/YYYY)	Amount (INR/\$)
1	One minute data (ASCI)-per day (Without gap filling)			
2	One minute data (ASCI)-per month(Without gap filling)			
3	One minute data (ASCI)-per year (Without gap filling)			
4	Monthly & daily average data per month -(based on one minute data - without gap filling)			
5	Ten minute data (ASCI) -per day (Without gap filling)			
6	Ten minute data (ASCI) -per month (Without gap filling)			
7	Ten minute data (ASCI) -per year			
8	Hourly data (ASCI) -per day (Without gap filling)			
9	Hourly data (ASCI) -per month (Without gap filling)			
10	Hourly data (ASCI) -per year (Without gap filling)			
11	Hourly data (ASCI) -per day (gap filled)			
12	Hourly data (ASCI) -per month (gap filled)			
13	Hourly data (ASCI) -per year (gap filled)			
14	Monthly & daily average data per month (based on hourly data-gap filled -PDF report)			
15	Monthly & daily average data per month (based on hourly data-gap filled -PDF report)			
			Total	
			Service Tax @ 15 %(and/or) other Taxes as application	
			Net payable	

* Please specify respective year or month or days solely or combined as per requirement)

Payment Details:

We enclose herewith the remittance by Demand Draft drawn in favour of Maharashtra Energy Development Agency payable at Pune (or) through RTGS/ NEFT

Demand Draft No / Transaction ID.....dated.....

Rs.....Rupees(.....
.....)

Drawn on (Banker's Name)

Station:

Name:

Date:

Designation:

Signature with Seal

For RTGS MEDA Account details:

- Account Name : Maharashtra Energy Development Agency (MEDA)
- Account Number : 20062200599
- Bank Name & Address : Bank of Maharashtra
- (00330)-Pune Erandawana
- DR. Ketkar Marg 79/3,
- Kamala Nehru Park Erandawana Pune
- Pune - 411 004
- IFS Code : MAHB0000330
- MICR Code : 411014016

Non Disclosure Undertaking:

Since, the data supplied by MEDA is confidential information I, hereby undertake in my personal capacity and on behalf of my company, that:

1. I / We agree to execute a Non-Disclosure Agreement (NDA) / Indemnity Bond with MEDA on the data obtained as and when MEDA send the NDA
2. I / We will use the data only for our internal purpose
3. I / We will not use the confidential information for any purpose other than the permitted use.
4. I / We will not distribute or disclose to any other person any of the conditional information.
5. I / We will not permit any other person to have access to the confidential information.

6. I / We will not make multiple copies of the confidential information for any form of distribution.
7. I / We will not publish the data purchased in any form.
8. I / We agree to keep the data in safe custody.
9. I / We agree that in case of any breach of undertaking, MEDA decision on this shall be final and will be adhered to.

Station:

Date:

Applicant Signature and Seal