Corrigendum 3

Date: 17-05-2024

CORRIGENDUM TO TENDER NO.: S-253/15-M-1 dated 30-04-2024

(Tender ID: 2024_SOI_805471_1)

EXPRESSION OF INTEREST (EoI) FOR ESTABLISHMENT OF GEOSPATIAL DATA AND LOCATION BASED SERVICES PLATFORM

1. Sample Data for PoC:

Sample data can be obtained either by physically collecting from the O/o Director NGD,
 Survey Of India or downloading it from ftp server. The link is as under:

o <u>Host name:</u> 117.251.89.165

Port Number: 21
 User name: NGDC
 Password: n&gdc@123

o Folder name: 0 SOI GEOPORTAL EOI POC DATA

This data will be accessible prior to the closure of EoI submission date .

The data provided is exclusively intended for Proof of Concept (PoC) purposes related to this Expression of Interest (EoI) and should not be utilized for any other purposes. Any party downloading this data must submit a declaration as provided in Annexure A by email (within 2 days) and in hard copy before 31/5/2024.

The FTP details provided in Corrigendum 2, dated 14/05/2024, are to be considered cancelled.

DECLARATION FORM

for

EXPRESSION OF INTEREST (EoI) FOR ESTABLISHMENT OF GEOSPATIAL DATA AND LOCATION BASED SERVICES PLATFORM

TENDER NO.: S-253/15-M-1 dated 30-04-2024

(Tender ID: 2024_SOI_805471_1)

[Company/Agency/Entity Name]: _____

I, [Name of Authorized Representative], representing [Company Name], hereby declare that:
1. The data provided to us for the purpose of Proof of Concept (PoC) related to the Expression of Interest (EoI) for "Establishment of geospatial data and location based services platform" will be used solely for the intended PoC activities and will not be utilized for any other purposes.
2. I/We understand that the data provided is proprietary, and we agree not to disclose it to any third parties or use it for any unauthorized purposes.
3. We further acknowledge that upon completion of the Proof of Concept activities or upon request by the issuing authority, we will promptly delete and destroy all copies of the provided data from our systems and confirm the same in writing to the issuing authority.
Date:
Signature of Authorized Representative:
Name of Authorized Representative:
Contact Information: