

25/11

From: Steven Nimmo
Sent: 11 January 2024 12:39
To: Sales
Subject: FW: Query
Attachments: Projects IPCT Form - 16 November 2021 (Final) (1).docx

Alysha

Please see attached email, can you contact Kelly Gray to arrange for me to go out and measure.

Kind Regards

Steven Nimmo
m. 07740851162 t.01224 637609
Aberdeen Blind Company
32 Esslemont Avenue
Aberdeen, AB25 1SP
e. steven@aberdeen-blinds.co.uk
w. www.aberdeen-blinds.co.uk

Zna Row

*1185 x 1548 2700
TOP Row*



*PVC
Z*

From: Gary Watt (NHS Grampian) <gary.watt2@nhs.scot>
Sent: Thursday, January 11, 2024 12:01 PM
To: Gray, Kelly <kelly.gray@abdn.ac.uk>; GRAM Facilitieshelpdesk <gram.facilitieshelpdesk@nhs.scot>; Steven Nimmo <steven@aberdeen-blinds.co.uk>
Cc: Lumsden, L. <l.lumsden@abdn.ac.uk>
Subject: Re: Query

Best bet would be for Aberdeen Blinds to cost this up (Steven copied in) and for AU to place an order directly if they approve of the costs.
Regards Gary

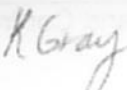
*Van 124.20
Row 109.35*

Project Budget Cost Request Form



ALL SECTIONS MUST BE COMPLETED BEFORE REQUEST WILL BE CONSIDERED

Site: NHSG	Building: Aberdeen Maternity Hospital
Ward / Department: University department Aberdeen Centre for Women's Health Research on 2 nd Floor	Contact Name: Kelly Gray
Contact Number: 01224 437260	Contact E-Mail Address: Kelly.gray@abdn.ac.uk
Brief Description of Request: A workstation assessment has been completed for a member of University staff working in an office at the Maternity Hospital advising that blinds are required to prevent glare. This is something that the Institute will pay for but should be arranged via NHS. Gary Watt confirmed that completion of this form was required.	

Request Submitted By:	Name: Kelly Gray
	Job Title: Institute Coordinator
Signature: 	Date: 11/01/2024

Request Supported By (e.g. Service or Business Manager):	Name: Gary Watt
	Job Title: Service Manager
Signature:	Date: 11/01/2024
Management Accountant Approval:	Name:
	Job Title:
Signature:	Date:

Date Received:	Date Returned:
Project Manager:	Project Number:



Project Budget Cost Request Form



ALL SECTIONS MUST BE COMPLETED BEFORE REQUEST WILL BE CONSIDERED

Budget Cost Amount for Approval: (to be provided by Estates)	£
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Intended Source of Funding (e.g. Departmental; Endowments; Capital etc.):
Budget Code (for information:- no charge will be made until approved): Will be paid by University

Detailed Description of Requirements: Blinds are required in Dr Mairead Blacks office on the 2 nd floor of the Maternity Hospital following an occ health recommendation
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Does the request involve any of the following:

Alterations to the ventilation system	Yes / No
Alterations to the water system	Yes / No
Alterations to physical structures	Yes / No
If the answer to any of the above is 'Yes', has the Infection Prevention and Control Team (IPCT) been consulted? Yes / No	
Name of IPCT Contact:	

State the business objective that will be met by the request:

Eradication of Health and Safety or risk issue (please provide details):
Occ health recommendation for anti-glare
Service or efficiency improvement (please provide details):
Improvement to environment (please provide details):

This section should only be completed if the requested work is to be authorised to proceed (before or after costing is provided)

Authorised By:	Name:
	Job Title:
Signature:	Date:

**Aberdeen Blind Co Ltd**

Transmitted By email to sales@aberdeen-blinds.co.uk

Order No 2286472
 Order Date 01/02/2024 3:42PM
 Requested Kelly Gray
 01224 272000 (Phone)

1no Chain Operated Roller Blind complete with chain secured to the wall Fabric: Ex-lite**Please supply the following goods or services**

No	Item Code / Job	Product / Service Description	Unit Price	Qty	VAT	Total
1	FG	1no Chain Operated Roller Blind complete with chain secured to the wall Fabric: Ex-lite Colour: Cream	£109.35 / Each	1.00	£21.87	£109.35
Comments Ref: 2nd Floor Office, Maternity Hospital, ARI - BlindsQuotation has been received and approved by UniversityEstates to go direct due to location being an NHS managedbuilding.						
					Total (excl.VAT)	£109.35
					VAT	£21.87
					Total (incl.VAT)	£131.22

Delivery Address: *LIVE*** University of Aberdeen / Kelly Gray****Ship to:**

Medicine, Med Sci, & Nutrition
 Ahs - Administration
 Polwarth Bldg, Foresterhill AB25 2ZD
 Aberdeen

Mark For:

Name Kelly Gray
 Delivery Date 01/02/2024
 Tel No 01224 272000
 Email s02kg1@abdn.ac.uk
 Ship To Code 47

Payment Method: To Be Invoiced - *LIVE*** University of Aberdeen**

Accounts Payable
 King's College
 Aberdeen
 AB24 3FX

Payment Type To Be Invoiced
 Name on Invoice ***LIVE*** University of Aberdeen
 Cheque with Order No

Terms and Conditions:

This purchase order is issued subject to acceptance of the University of Aberdeen General Conditions of Purchase. A copy of these may be downloaded from <https://www.abdn.ac.uk/staffnet/documents/Procurement-Terms-and-Conditions-of-Purchase.pdf>. These conditions may not be superseded or modified by any acknowledgement or counter-offer issued by the Supplier without the specific written approval of an authorised representative of the University of Aberdeen. All delivery notes and invoices relating to this order are to be clearly marked with the order number.

University of Aberdeen :: University of Aberdeen Marketplace
 <idea.marketplace@egsgroup.com>
Sent: 01 February 2024 15:42
To: Sales
Subject: University of Aberdeen Purchase Order (2286472) <mail-ref-id: 294288c>
Attachments: PO_2286472.pdf

Follow Up Flag: Follow up
Flag Status: Completed



Official Purchase Order (2286472)



University of Aberdeen (VAT Number 267 3290 44)

The University of Aberdeen is a charity registered in Scotland, No. SC013683

Please check this email for attachments.
[Link directly to order](#)

Aberdeen Blind Co Ltd
 Transmitted By email to sales@aberdeen-blinds.co.uk

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Delivery Address: ***LIVE*** University of Aberdeen / Kelly Gray

Ship to:
 Medicine, Med Sci, & Nutrition

Mark For:
 Name Kelly Gray