

Invitation of quotation
for
Supply of General Consumables
At

All India Institute of Medical Sciences, Gorakhpur

Inquiry No.: : Admin/Gen/04-01/2018-AIIMS.GKP

Inquiry Issue Date : 08th January, 2019

Last Date of Submission : 14th January, 2019 at 05:00 PM.

**All India Institute of Medical Sciences,
Gorakhpur**

Kunraghat, Gorakhpur, Uttar Pradesh 273008

Telefax: 0291- 2740741, email: procurement@aiimsjodhpur.edu.in

**Invitation of quotation for Supply of General Consumables at
AIIMS Gorakhpur**

Sealed Quotations are hereby invited by the undersigned on behalf of the Director, AIIMS Gorakhpur for Supply of General Consumables for the Institute as per terms & conditions mentioned below. The filled quotations along with all the required document must reach in the office of the undersigned on or before 14.01.2019 05.00 PM. The Envelope containing the quotation would please be sealed and super scribed as under:-

**“QUOTATION FOR SUPPLY OF GENERAL CONSUMABLES
AGAINST INQUIRY NO. ADMN/GEN/04-01/2018-AIIMS.GKP” DUE ON
14.01.2019 05.00 PM”**

1. Terms & Conditions:

- A) The quotations received after this deadline & unsealed shall not be entertained under any circumstances whatsoever. In case of postal delay this Institute will not be responsible. **The offer Submitted Fax/Email shall not be considered and no correspondence will be entertained in this matter.**
- B) Quotations must be in the enclosed prescribed Performa on the letter head of the firm duly signed by the Proprietor/ Partner/ Director or their authorized representative, In case of signing of quotation by the authorized representative letter of authorization must be attached with the quotation. Quotation must be dropped in “**Quotation Box**” located in Administration Block of AIIMS, Jodhpur.
- C) Rates must be quoted in **Indian rupees** and as per the format specified taxes extra if any must be written separately.
- D) Rates must be quoted FOR basis (including Freight charges, Insurance, installation etc.)
- E) No overwriting or cutting is permitted in the rate. If found, the quotation shall be summarily rejected.
- F) The rates quoted must be valid for 60 days minimum from the date of opening of the quotation and silence of any tendered on this issue shall be treated as agreed with this condition.
- G) Becoming L1 will not be the criteria for awarding of purchase order unless the rates are reasonable & justified.
- H) RTGS/NEFT details need to be furnished by the supplier with the quotation on the letter head of supplier/firm/agency.
- I) The firm/agency may satisfy the following conditions and attach self-attested copy of the same with the quotation:
- Firm shall be registered with the State Government/ Central Government.
 - The firm shall have valid GST/Other taxes and IT PAN.
 - **The firm should not be black listed by any Govt. Agency/Dept.**
- J) Quotations qualified by such vague and indefinite expressions such as “subject to prior confirmation”, “subject to immediate acceptance” etc. will be treated as vague offers and rejected accordingly. Any conditional quotation shall be rejected summarily.

INQUIRY NO. Admin/Gen/01-01/2018-AIIMS.GKP

- K) **Bidders note that ordered material must be delivered at AIIMS, Gorakhpur and quotation will be submitted on following address: -**
**Administrative Office, Medical College,
All India Institute of Medical Sciences, Jodhpur
Basni IInd Phase, Jodhpur 342005, (Rajasthan)**
- L) **Delivery Location:-**
**Administrative Officer/ Store In-Charge
All India Institute of Medical Sciences, Gorakhpur
Kunraghat, Gorakhpur, Uttar Pradesh 273008**
- M) **Delivery Period** – within 30 days from Purchase order.
- N) **Liquidated Damage:** - If the supplier fails to deliver the material on or before the stipulated date, then a penalty at the rate of 0.5 % per week of the total order value shall be levied subject to maximum of 10% of the total order value.
- O) **Payment Terms:** Payment will be only after satisfactorily delivery/commissioning of material and after inspection by the AIIMS Gorakhpur.
- P) **Disputes:** -In the event of any dispute or disagreement arising between the contractors and any other department of AIIMS Gorakhpur with regards to the interpretation of “Terms & Conditions” of this inquiry, the same shall be referred to the Director, AIIMS Gorakhpur whose decision will be final and binding upon the contractor.
- Q) AIIMS, Gorakhpur reserves the right to increase or decrease quantity and / or amount of work. Decision of Quantity of material in the AIIMS, Gorakhpur will be final in this regard.
- R) AIIMS, Gorakhpur reserves the right to reject any quotation or part or the whole of inviting quotation process without assigning any reason. Decision of the AIIMS, Gorakhpur will be final in this regard.

2. Special Terms & Conditions:

- A) **Bidder must quote the product as per specification provided in Annexure 1.**
- B) **Catalog must be attached with quotation for technical evaluation.**
- C) **The Bidder must submit the GSTIN Registration and PAN Card self-attested copy with the quotation.**
- D) **The supplier may be asked to arranging demonstration of their equipment for which rates have been quoted, to the AIIMS Gorakhpur, if required. The expenditure incurred for demonstrating the items will be borne by the supplier.**
- E) **Inspection committee will check the products thoroughly, if somehow inspection committee found any discrepancy and is not satisfied with the final product then AIIMS, Gorakhpur has the right to reject the supply and cancel the order, and no claim for payment in this regard will be entertained.**

Administrative Officer

Encl.: Annexure 1 (Specification)
Annexure 2 (Format of price bid)

Annexure 1

S. No	Particular	Specification
1.	Lignocaine Jelly	20 gm
2.	Normal Salin	500 ml
3.	Inj. Pantop	-
4.	Neomycin oinment	5 gm
5.	Neomycin oinment	10 gm
6.	Hand Wash	200 ml
7.	Soap	75 gm
8.	POP Bandage 6"	-
9.	POP Bandage 4"	-
10.	Soft Roll 6"	-
11.	Soft Roll 4"	-
12.	Temporary Filling Material	-
13.	Dental Endodontic EDTA	-
14.	Sodium Hypochlorite 3%	500 ml
15.	C+ File	15-40
16.	WHO and IAP Growth Charts	-
17.	Eustachian tube catheter	-
18.	Ear microsuction tips with adaptor	-

Note:- The supplier may be asked to arranging demonstration of their equipment for which rates have been quoted, to the AIIMS Gorakhpur, if required. The expenditure incurred for demonstrating the items will be borne by the supplier.

[On the letterhead of firm]

ANNEXURE "2"
PRICE BIDFORM

To,

Administrative Officer,
AIIMS, Gorakhpur.

Dear Sir,

1. I/We Submitted the quotation for Enquiry No. **"QUOTATION FOR SUPPLY OF GENERAL CONSUMABLES AT AIIMS AGAINST THE INQUIRY NO. Admin/Gen/04-01/2018-AIIMS.GKP" DUE ON 14.01.2019 05.00 PM** for Supply of General Consumables at AIIMS Gorakhpur".

2. I/We thoroughly examined, understood and accepted terms & conditions given in the enquiry document, failing which my quotation will be rejected out rightly.

3. I/We hereby offer to supply at the following rates and as per Annexure-1.

S. No	Particular	Qty	Price/Unit Exclusive of GST (INR)	GST/ Other Taxes	Price/ Unit Inclusive of GST (INR)	Total Cost Inclusive of GST (INR)	MRP
1.	Lignocaine Jelly	200 Nos					
2.	Normal Salin	100 Nos					
3.	Inj. Pantop	5 Nos					
4.	Neomycin oinment	50 Nos					
5.	Neomycin oinment	20 Nos					
6.	Hand Wash	500 Nos					
7.	Soap	500 Nos					
8.	POP Bandage 6"	50 Nos					
9.	POP Bandage 4"	50 Nos					
10.	Soft Roll 6"	50 Nos					
11.	Soft Roll 4"	50 Nos					
12.	Temporary Filling Material	10 Nos					
13	Dental Endodontic EDTA	2 Pkt					
14	Sodium Hypochlorite 3%	5 Nos					
15	C+ File	2 Pkt					
16	WHO and IAP Growth Charts	1 Nos					
17	Eustachian tube catheter	1 Nos					
18	Ear microsuction tips with adaptor	1 Nos					

INQUIRY NO. Admin/Gen/01-01/2018-AIIMS.GKP

Note:-

- 1. The Bidder must quote only single Make.**
- 2. Bidder note that ordered material should be delivery at AIIMS, Gorakhpur at without any extra cost and quotation will be submitted at AIIMS, Jodhpur.**
- 3. The bidder must quoted their quotation only in above said format on the letter of firm otherwise quotation will be REJECTED.**

Date _____

Place _____

(Signature of Authorized Person) _____

(Name) _____

Name of Firm/Company/Agency _____

Phone No. _____

Email: _____