



अखिल भारतीय आयुर्विज्ञान संस्थान पटना
ALL INDIA INSTITUTE OF MEDICAL SCIENCES PATNA

Inquiry No. AIIMS/Pat/Store/LP/Surgical Instruments/2014-15/556

Date: - 31/10/2014

To,

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Subject: - **Invitation of quotation for surgical instruments for Department of General Surgery.**

Sealed Quotations are hereby invited by the undersigned on behalf of the Director, AIIMS Patna for supply of surgical instruments for Department of General Surgery 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 10.11.2014 12.00 hrs. The Quotations will be opened on the same day at 3.00 pm in the presence of their authorized representative, if any. The Envelope containing the quotation would please be sealed and super scribed as under:-

“QUOTATION FOR THE SURGICAL INSTRUMENTS

AGAINST

**INQUIRY NO. AIIMS/Pat/Store/LP/Surgical Instruments/2014-15/556”DUE
ON 10.11.2014 12.00 HRS”**

1. **Terms & Conditions:**

- a) Envelope should be super-scribed “**QUOTATION FOR THE SURGICAL ITEMS AGAINST THE INQUIRY NO. AIIMS/Pat/Store/LP/Surgical Instruments /2014-15/.....”DUE ON 10.11.2014 12.00 HRS. . Quotations need to be submitted to Faculty In-charge Administrative Officer, AIIMS Patna.**

The quotations received after this deadline shall not be entertained under any circumstances whatsoever. In case of postal delay this Institute will not be responsible. **Quotation will be opened on 10.11.2014 03.00P.M.**

- b) **Unsealed quotation will be rejected.**
- c) Quotations must be in the enclosed prescribed Performa and forwarding letter 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.

- d) Rates must be quoted as per the format specified taxes extra if any must be written separately. The rates must be quoted in figures as well as in words.
- e) In general no overwriting or cutting is permitted in the rate. If found, the quotation shall be summarily rejected. However, except rate all cuttings and over writings must be signed by the authorized person of the firm.
- f) The rates quoted must be valid for 120 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) Ceiling amount of this quotation will be within 1 Lac.
- h) Becoming L1 will not be the criteria for awarding of purchase order unless the rates are reasonable & justified.
- i) In case holidays is declared on the date of opening of quotation it will be opened on the next working day at the same time.
- j) RTGS/NEFT details need to be furnished by the supplier with the quotation on the letter head of supplier/firm/agency.
- k) 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 Government of Bihar/ Central Government.
 - The firm shall have valid VAT/ Sales Tax No. and IT PAN.
 - **Certificate of non-inclusion in the black list as per given format attached in annexure "2" need to be provided on Rs. 100/- stamp paper duly notarized.**
 - Market standing of minimum 3 Years.
- l) 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.
- m) The supplier may be asked to submit a sample of the product, which will be evaluated by a technical evaluation committee. Price bids of only those firms will be opened which qualifies technically as per the recommendation of the committee. The expenditure incurred for demonstrating the items will be borne by the supplier.
- n) **Delivery Period** – 15 days from award of work.
- o) **Liquidated Damage:** -In the event of the Seller's failure supply the stores/goods are conduct trails, installation of equipment, training, etc. as specified in this inquiry, the Buyer may at his discretion, withhold any payment until the completion of the contract. The Buyer may also deduct from the Seller as agreed, liquidated damages to the sum of 0.5% of the contract price of the delayed/undelivered, stores/services mentioned above for every week of delay or part their of a week, subject to the maximum value of the Liquidated Damages being not higher that 10% of the value of delayed stores.
- p) **Guarantee/Warranty Terms:** The equipment's/Instruments/Materials supplied by result of this Quotation/supply order shall be of the best quality and workmanship and new in all respects and shall be strictly in accordance with the specifications and particulars contained /mentioned against each item in this document/ supply order. The seller guarantees that the said good equipment's / Instruments would continue to confirm to the description and quality a foresaid for a period of 12 months from

the date of delivery/installation of the said equipment's/Instruments/materials to the buyer.

- q) **Payment Terms:** 100% after delivery and submission of following documents by vendors to Finance Accounts Section -
 - a) Contingent Bill in triplicate along with supporting vouchers.
 - b) Store Receipt Certificate issued by stores.
 - c) Installation/Inspection Report issued by the concerned department if applicable.
- r) **Disputes:** - In the event of any dispute or disagreement arising between the contractors and any other department of AIIMS Patna with regards to the interpretation of "Terms & Conditions" of this inquiry, the same shall be referred to the Director, AIIMS Patna whose decision will be final and binding upon the contractor.
- s) AIIMS, Patna reserves the right to increase or decrease amount of work. Decision of Quantity of Equipment and Instruments in the AIIMS, Patna will be final in this regard.
- t) AIIMS, Patna reserves the right to reject any quotation or part or the whole of inviting quotation process without assigning any reason. Decision of the AIIMS, PATNA will be final in this regard.

Faculty-in-charge AO

Encl.: Annexure 1 (Format of Price Bid) Annexure 2 (Declaration Format)

PRICE BID FORM

To,
The Faculty-in-charge AO,
AIIMS Patna.

Dear Sir,

1. I/We submitted the quotation for Enquiry No. **AIIMS/Pat/Store/LP/Surgical Instruments /2014-15/....."DUE ON 10.11.2014 12.00 HRS. . .** for "Supply of Surgical Instruments in department of General Surgery" at AIIMS Patna.
2. I/We thoroughly examined and understood terms & conditions of contract given in the enquiry document.
3. I/We hereby offer to supply at the following rates. I/ We undertake that I/ We are not entitled to claim any enhancement of rates on any account during the validity of rate.

Sl. No. (a)	Product with Description (b)	Make & Model No. (c)	Unit (d)	Quantity (e)	Price per unit (f)	Taxes (Including all @ %.) (g)	Price per Unit (inclusive of all taxes) (h = f + g)	Total Amount (I = e x h)	Total Amount (In Words) (j)
1.	Protoscope Big		Nos.	10					
2.	Dressing Tray with Lid		Nos.	4					

	12"×10" "H"								
3.	Towel Clip		Nos.	20					
4.	Artery Forceps Large Curved		Nos.	11					
5.	Artery Forceps Large Straight		Nos.	11					
6.	Mosquito Artery Forceps 4" Curved		Nos.	12					
7.	Mosquito Artery Forceps 4" Straight		Nos.	12					
8.	Allice Forceps Medium		Nos.	12					
9.	Babcock Forceps Medium		Nos.	12					
10.	CBD Dialator		Nos.	1					
11.	Metzenbaum Scissors Curved 7"		Nos.	6					
12.	Metzenbaum Scissors Staright 7"		Nos.	6					
13.	Artery Forceps 7" Curved		Nos.	12					

14.	Artery Forceps 7" Straight		Nos.	12					
15.	Morris Retractor Small		Nos.	4					
16.	Needle Holder 6"		Nos.	4					
17.	Needle Holder 8"		Nos.	4					
	Total								

(Signature of Authorized Person)

(Name)

(Designation)

Name of Firm/Company/Agency

Contact Details

Place- _____

Date- _____

DECLARATION

Date.....

To,

The Faculty-in-charge AO,
AIIMS Patna.

Dear Sir,

Ref.: Inquiry No.

I / We hereby confirm that our firm has not been banned or blacklisted by any government organization/Financial institution/Court /Public sector Unit /Central Government.

Signature of Authorized Person.....

Name.....

Designation.....

Seal

Place:

Date: