Price Quotation Enquiry No.: AIIMSBPLHOSP1516003  Dated: 22.03.2016

Sub:-Request for submission of Price Quotation for Supply of Narcotics Drugs by the Registered Vendor under NDPS Act 1985 / its Amendment in the Department of Anesthesiology/ICU, AIIMS Bhopal

AIIMS Bhopal is the recognized Hospital under Rule 52-O of Narcotics Drugs and Psychotropic Substances (Third Amendment) Rule, 2015 and obtained NDPS license vide Letter No. VI/RM/1/2015/6445 Dated 05.11.2015 from the Office of the Controller Food and Drugs Administration, Madhya Pradesh to use the Narcotics Drugs for the purpose of patient care in the AIIMS Bhopal Hospital.

On behalf of the Director, AIIMS Bhopal, the Medical Superintendent is inviting sealed quotations from authorized registered Supplier Agencies under NDPS Act in the prescribed format given at Annexure-II; the sealed envelopes by post/per bearer for the supply of items detailed enclosed at Schedule of Requirement at Annexure-I below which are required for Department of Anesthesiology/ICU, AIIMS Bhopal Hospital, Saket Nagar, Bhopal-462 020 (MP), India.

The self-attested, Stamped Price Quotation on Supplier Agencies Letter Head including the valid License copy in Format N.D.-1 under Rule 29 of Narcotics Drugs and Psychotropic Substance Act 1985 / its amendment Rules, 2015 should reach to the Office of Medical Superintendent, AIIMS Bhopal Hospital, Saket Nagar, Bhopal-462 020 (MP), India on or before 14.04.2016 at 15.00 Hrs. duly sealed & clearly superscripted “Price Quotation for Supply of Narcotics Drugs under NDPS License to AIIMS Bhopal Hospital”. All quotations should be typewritten or written with indelible ink. All over writing and erased entries will not be considered and treated as deleted entries from the quotations. Each page of price Quotation page numbered and signed by the authorized signatory of the supplier firm. Offers receipt beyond the above Date and time shall not considered and liable for rejection.

Price Quotation Evaluation Process and acceptance of L-1 Prices:-

1. The receipt proposals shall be opened at 13.00 Hrs on 15.04.2016 in the concerned User Department at AIIMS Bhopal Hospital, Saket Nagar, Bhopal-462 020 (MP), India. If any Firm want to be witness the opening of their Price Quotation, they may depute their representative for the same.

2. The Financial Quotation evaluation on the basis of per Set/Unit Item basis will be carried out and Successful L-1 Tenderer/Tenderers will be declared accordingly Item Rate wise.

Important Terms & Conditions:-

1. Copy of Valid NDPS License: The valid license copy in the Format N.D.-1 (Rule 29) for supply of Narcotics Drugs to Hospitals issued by competent authority of Excise Dept/Food & Drugs Administration Deptt. of MP Govt. is required to be enclosed with Price Quotation, failing which, quotation will not be considered and will be summarily rejected.
2. **Literature/Catalogue must enclosed with Price Quotation**: Literature/Catalogue of the quoted item must be submitted along with the quotation, failing which, quotation will not be considered and will be summarily rejected.

3. **Technical Specifications, Make, Brand/Model, offered Pack Size**: is required to be clearly mentioned by the interested Supplier Agency in their Price Quotation.

4. **Price Quotation submission**: The price Quotation must be submitted in the name of “Director, AIIMS Bhopal, Saket Nagar, Bhopal” on the Letter Head of the Firm which should contain VAT/TAN/PAN number clearly otherwise it will not be considered.

5. **Price Basis & applicable Tax claim**: Price should be quoted by interested Tenderer Fixed and up to F.O.R. AIIMS Bhopal basis. Vendor should clearly mention the Rate of applicable Taxes like CST/VAT separately, if firm will not mentioned, the Taxes clearly on their Price Quotation, AIIMS Bhopal assume that the price quoted is inclusive of all and no extra amount in later stage shall be paid by AIIMS Bhopal on account of Taxes.

6. **Rate Validity Period**: The Rates approved should be valid for entire Year period from the date of Purchase Order issued by AIIMS Bhopal.

7. **Quarterly requirement basis Supply Order to be issued**: AIIMS Bhopal will issue a supply order to the Supplier Agency on Quarterly requirement basis and supplier Agency will liable to supply and produce their Bill for payment against supply accordingly.

8. **Items supplied should be as per approved Technical Specifications/Sample**: The store should be supplied strictly in accordance with the supply order and with the approved specification/samples.

9. **Standards/Test Reports**: The quoted items having quality mark such as ISI/BIS/CE (European)USFDA/ISO 9002 standardization should be mentioned. The Test Reports must required to be provided along with the supply of items (if applicable).

10. **Taking back of Rejected Stores**: All rejected stores shall be at the risk of the supplier and must be removed immediately and the fresh item having 80% Shelf life.

11. **Supply Delivery period**: The delivery against supply order shall be completed within 21 days of receipt of the supply order. A delay of more fourteen days will invite cancellation of order and blacklisting of such defaulter Agency for the participation in AIIMS Price Quotations/LTE/Open Tenders for period of 2 Years.

12. **Supply Timings to AIIMS Bhopal**: The supply should be made between 9.30 am to 4.00 pm on any of the working day and 9.30 am to 2.00 pm on Saturday on designated store. No partial supply will be entertained. However in case due to any reason part supply has been made the payment will be made only after the completion of complete supply.

13. **Payments**: Payments shall be made against invoice/bills in triplicate duly signed by authorized signatory along with copy of supply Challan. It shall be submitted to the dealing Store along with supplies. The payments shall be released in considerable time
after issue of Inspection/Final Acceptance Certificate by nominated Inspection committee of the AIIMS Bhopal.

14. **Right to Amendment /Acceptance /Rejection:** Director/Medical Superintendent, AIIMS Bhopal reserve the right to amend/accept/reject any offer against this Price Quotation Enquiry as per his discretion.

15. **Jurisdictions:** The Court of Bhopal shall alone have jurisdictions to decide any dispute arising out of or in respect of the contract.

**Undertaking**

I/we Shri/ Ms-----------------------------------------------declare that I/We read the terms & Conditions and understood and hereby declare that the information submitted is true to the best of my/our knowledge. Any false information/fabrication will invite cancellation of the bid and action under relevant rules & regulations.

**Name(s) & Signature of the Tenderer with rubber seal(s) -----------------------------------------------**
## Schedule of Requirement

**Price Quotation Enquiry No. : AIIMSBPLHOSP1516003**

**Dated: 22.03.2016**

Narcotics Items required for the Department of Anesthesiology/ICU, AIIMS Bhopal Hospital as follows:-

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Narcotics Items needs to be supplied</th>
<th>Tentative Annual Required Quantity (in Vial)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Injection Fentanyl 2ml Vial</td>
<td>720</td>
</tr>
<tr>
<td>2</td>
<td>Injection Fentanyl 10ml Vial</td>
<td>360</td>
</tr>
<tr>
<td>3</td>
<td>Injection Morphine 10mg Vial</td>
<td>840</td>
</tr>
</tbody>
</table>

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**Annexure-II**

**FINANCIAL QUOTATION**

Price Quotation Enquiry No. : AIIMSBPLHOSP1516003  
Dated: 22.03.2016

(Strictly in the format given below only sealed in the Financial Quotation Envelope)

Quotation Reference No. of the Tenderer: ……………………  
Dated: ……………………

To,  
The Director,  
AIIMS Bhopal, Saket Nagar, Bhopal-462020 (MP)

Dear Sir,  
I am submitting Price Quotation against your Price Quotation Enquiry No. : AIIMSBPLHOSP1516003 and offering rates for the items given in the Schedule of Requirement, Annexure-I as below:-

<table>
<thead>
<tr>
<th>ITEM SL. NO.</th>
<th>NAME OF THE ITEM (AS PER THE SCHEDULE OF REQUIREMENT ANNEXURE-I)</th>
<th>MAKE</th>
<th>PRICE (IN Rs.) PER UNIT (IN FIGURE)</th>
<th>TAXES &amp; OTHER EXPENCES (IF ANY) PER UNIT UPTO FOR (B)</th>
<th>Total Price per Unit Inclusive of Taxes &amp; all Expenditure up to FOR (C)=(A)+(B)</th>
<th>Total Price per Unit (IN WORDS) UPTO F.O.R. inclusive Taxes &amp; Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Injection Fentanyl 2ml Vial</td>
<td></td>
<td></td>
<td>9/</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Injection Fentanyl 10ml Vial</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Injection Morphine 10mg Vial</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. The Financial Quotation evaluation on the basis of per Unit Item basis will be carried out and Successful L-1 Tenderer/Tenderers will be declared accordingly Item Rate wise.

2. The rates should be inclusive of all taxes & charges up to F.O.R. basis.

**Name(s) & Signature of the Bidder with Stamp/Seal**

Name of the Firm ………………………………………………………………………………………………………

Authorized Signatory: ……………………………………………………………………………………………...

Contact Details: Cell Nos……………………………………..Email Id : ………………………………

Price Quotation Enquiry No. : MSO/HC/AIIMSBPLHOSP1516003  Dated: 22.03.2015 Page 5 of 5