



Ref No. : AIIMSBPLHOSPGFR1541516002

Dated: 22.03.2016

Sub:- Purchase of Qiagen India Pvt. Ltd. make Kits for Zika Virus Testing at AIIMS Bhopal, Saket Nagar, Bhopal-462020 (MP) on Proprietary Article Certificate basis under GFR-154.

AIIMS Bhopal Hospital is intended to Purchase Kits for Zika Virus Testing on Proprietary basis under the provisions of GFR-154 as per the Schedule of Requirement given at Annexure-II. The Proprietary Article Certificate (PAC) certification is attached at Annexure-I for kind perusal.

The above documents are being uploaded for open information to Authorized Dealer/Distributor/ Supplier Agency/Firm, who are interested and willing to supply the requested Proprietary nature Kits for Zika Virus testing to AIIMS Bhopal. For this purpose interested Agency is required to be submit their Price Quotation in the format given at Annexure-III on their Letter head along with necessary Technical Catalog/Specification details, Proprietary Article Certificate, Authorization for Supply from Manufacturing Company within 21 Days on issue of this Proprietary Reagent enquiry with clearly mentioning reference No. AIIMSBPLHOSPGFR1541516002 Dated: 22.03.2016.

The Sealed Price Quotation along with Proprietary Certificate, Authorization from manufacturing Company and Technical Catalog/Specifications should be received by Office of the Medical Superintendent at AIIMS Bhopal Hospital, Saket Nagar, Bhopal-462020 (MP) on or before 13/04/2016 upto 15:00 Hrs., failing which it will be presumed that no any other vendor having the authorization/availability to supply of requested reagents to AIIMS Bhopal Hospital and based on the same procurement through only known single source (i.e. as mentioned in the Proprietary Article Certificate at Annexure-I) under the Provisions of GFR-154 may be carried out for AIIMS Bhopal Hospital.

**(Dr K.C. Tamaria)
Medical Superintendent**

Enclosure :- Related Documents enclosed

- 1) Proprietary Article Certificate (PAC) of Department of Microbiology, Annexure-I**
- 2) Schedule of Requirement - Kits required for Zika Virus testing, Annexure-II**
- 3) Price Quotation Format, Annexure-III**

Annexure-I

Proprietary Article Certificate

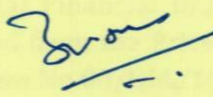
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Procurement of Proprietary Articles under GFR 2005 Rule No. 154

Certificate for Purchase of Proprietary Article Recorded by Indenting Department

- (1) **Description of Article:** QuantiTect Probe RT-PCR Kit (Qiagen)
- (2) **Quantity:** As per List of Items given in Annexure-II
- (3) **Approximate cost, if known:** Rs. 51,442/- (Rupees Fifty One Thousand Four Hundred Forty Two Only)
- (4) **Maker's name and address:** M/s Qiagen India Pvt. Ltd.
Samyak Towers, Property #39, Pusa Road,
Karol Bagh, New Delhi-110 005
- (5) **Name and Address of Authorized Distributor :** Not Applicable
- (6) I am submitting request for approval for the purchase of items and I certify that: --
No other make/brand will be suitable since the entire protocol of RT-PCR for Zika Virus has been standardized by CDC using this kit.


Dr. DEBASIS BISWAS
Additional Professor
Department of Microbiology
All India Institute of Medical Sciences
Sector Nagar, Bhopal-462024
(Dr Debasis Biswas)
Additional Professor & Head,
Department of Microbiology
AIIMS Bhopal
Dated: 10.03.2016

ANNEXURE-II

SCHEDULE OF REQUIREMENT

Price Quotation Enquiry Ref. No. : AIIMSBPLHOSPGFR1541516002 Dated: 22.03.16

S.No.	Name of required Reagent/Kit	Catalogue No.	Qty.	Unit
RT-PCR Kit				
1	QuantiTech Probe RT-PCR Kit (200)	204443	1	Kit

ANNEXURE-III

PRICE QUOTATION

Price Quotation Enquiry Ref. No. : AIIMSBPLHOSPGFR1541516002 Dated: 22.03.16

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

Quotation Reference No. of the Supplier Agency:..... Dated:

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

Dear Sir,

I am submitting Price Quotation against your Price Quotation Enquiry No. : AIIMSBPLHOSPGFR1541516002 Dated 22.03.2016 and offering rates for the Kits given in the Schedule of Requirement, Annexure-I for Zika Virus Testing at AIIMS Bhopal as below:-

ITEM SL. NO.	NAME OF THE ITEM (AS PER THE SCHEDULE OF REQUIREMENT ANNEXURE-II)	MAKE	PRICE (IN Rs.) PER UNIT (IN FIGURE) (A)	TAXES & OTHER EXPENCES (IF ANY) PER UNIT UPTO FOR (B)	Total Price Unit Inclusive of Taxes & all Expenditure upto FOR (C)=(A)+(B)	Total Price per Unit (IN WORDS) UPTO F.O.R. inclusive Taxes & Expenditures
1	QuantiTech Probe RT-PCR Kit (200)					

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.

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

Name of the Firm

Authorized Signatory:

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

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