



ALL INDIA INSTITUTE OF MEDICAL SCIENCES (AIIMS) BHOPAL

Saket Nagar, Bhopal-462024 (Madhya Pradesh) India

Website : www.aiimsbhopal.edu.in

No.: Sr.AO Office/2017-18/LPC/ 438
05/07/2017

Dated:

Subject: **Quotation for Supply of Disposable Tissue embedding cassettes**

Dear Sir,

- Sealed quotation are invited, for supply of (**Disposable Tissue embedding cassettes**) as shown in enclosed Financial bid form so as to reach the SR Administrative Officer , First Floor Medical College Building AIIMS Bhopal **by 14:00 Hrs. of 12/07/2017**
- 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.

Terms & Conditions:-

- The quotation is to be submitted only in the format enclosed. Not acceptable in any other form.
- The quotation must be submitted in sealed envelope to the **office of the Sr. Administrative Officer (First Floor Medical College Building) AIIMS Bhopal.**
- Each page of the quotation must be printed on **letter head** of the Participants duly numbered.
- Failure to comply with any of these conditions will **lead to rejection of the quotation** and Responsibility for the same will lie with the participants submitting the quotations.
- **F.O.R.:** Rate quoted shall be fixed and on **FOR destination Basis.**
- **Tax: 1.** Quotation must contain **GST NO/TIN/PAN Number otherwise the quotation will not be considered.**
2. Please enclosed the copy of GST Registration No
- **Rate of applicable Tax should be shown separately.**
- **Supply Delivery period:** The delivery against supply order shall be completed within **21 days** of receipt of the supply order.
- **Penalty/LD on delayed Supply:-**The period of delivery strictly to be followed by the Supplier Agency as per time period communicated through Purchase/Supply Order through e-mail/hard copy through speed post. The penalty @**0.5 %** per week will levied on supply order value of the item and will be deducted from the payment Bill of the supplier Agency. The maximum penalty **will be 10 % against any of Purchase/Supply Order total value.** If any agency will fail to supply the ordered items within this period mentioned as above, the supply order will be treated as cancelled without any further reference and the action as deemed fit shall be initiated against such defaulter Agency/Firms (i.e. blacklisting of such agency for participating in AIIMS Bhopal Price Quotations Enquiries/LTEs/Open Tenders at AIIMS Procurement in any form for Two Years period).
- **Repeat Order: The rates quoted shall remain valid for 12 Months, for the purpose of Repeat Order**
- **Payments:** Payments shall be made against invoice/bills in triplicate duly signed by authorized signatory along with copy of Delivery Challan, NEFT/RTGS Account Details, **Vendor Registration Form for registering Vendor in the Public Finance Management System implemented at AIIMS Bhopal** in the Format given at **Annexure-III** of the Supplier Agency etc. Along with requested Item supply in the Name of "Director, AIIMS Bhopal, Saket Nagar,Bhopal". The payments shall be released in considerable time after issue of CRC/Final Acceptance Certificate in respect of successful commissioning of supplied Items and acceptance of ordered items as per technical specifications asked through this NIQ by user Department of the AIIMS Bhopal after deduction of applicable LD (if any due to delayed supplied) and Taxes like **GST as per present applicable Tax Rates.**
- **Any Offer: Seasonal offers if available from manufacturer may please be indicated on Financial Bid which will be given along with supply.**

- **Right of rejection:** The Competent authority reserves all rights to reject any or all quotation without assigning any reason.

On Letter head
Undertaking

Date:...../07/2017

I/we
Shri/Ms _____ declare
that,

I/We, Shri _____
_____ 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/BIDDER

Rubber seal(s)

Date:.....

Place:.....

Financial Quotation

Price Quotation Enquiry No.: Sr.AO Office/2017-18/LPC/438

Dated:/07/2017

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

Quotation Reference No.....

Dated:...../7/2017,GSTNo:.....

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

Dear Sir,

I am submitting Price Quotation against your Price Quotation Enquiry No. : Sr. AO Office/2017-18/LPC/438 , and offering rates for the items given as below:-

Sr.No.	Description/Specification	Req. Qty.	Unit Name	Brand	MRP	Unit Rate in Rs.	Discount if Any.	Net Unit Cost in Rs .	Total Cost In Rs .
1	2	3	4	5	6	7	8	9	10
1	Disposable Tissue Made of embedding Cassettes Specifications: Made from Acetyl Ploymer, which is a special high density polymer that keeps specimen safely submerged in solution. Large labeling areas are located on three sides of the cassettes. Size : 4 cm x 2.8cmx 0.5 cm	37,500 No's	No's						
Subtotal (A)									
GST Extra @..... In Rs .									
Total Inclusive of all Taxes in Rs.									

(i) GST will be paid as applicable.

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

Name of the Firm

Authorized Signatory:

Contact Details: Cell No.....Email Id :

Annexure-III
Vendor Registration Form.

ALL INDIA INSTITUTE OF MEDICAL SCIENCES BHOPAL PUBLIC FINANCIAL MANAGEMENT SYSTEM (PFMS)		
PFMS UNIQUE CODE :-		
VENDOR REGISTRATION FORM		
S.No.	Head Name	Details
1	Vendor Name	
2	Father/Husband/Owner Name	
3	Date of Birth	
4	PAN Number	
5	Aadhaar Number	
6	TAN Number	
7	TIN Number	
8	Service Tax No	
9	Address1	
10	Address2	
11	Address3	
12	City	
13	Country	
14	State	
15	District	
16	Pin Code	
17	Mobile No.	
18	Phone No.	
19	Email ID	
20	Bank Name	
21	IFSC Code	
22	Account Number	
<p>DATE : _____</p> <p>PLACE : _____</p> <p style="text-align: right;">VENDOR SIGNATURE WITH SEAL</p> <p>Department Name: _____</p> <p style="text-align: right;">Forwarded by HOD/In charge</p>		

Note: All related documents also enclosed with this form self-attested and stamp on it.:-

1. Pan Card of Form
2. Aadhar Card of Firm Owner.
3. Firm Account cancelled cheque copy
4. Firm registration Certificate
5. TIN No. Registration Certificate copy
6. GST Registration Copy

**** The bidders who have already registered for vendor's registration may please ignore this Vendor Registration Form.**

