All India Institute of Medical Sciences (AIIMS) Bhopal
Saket Nagar, Bhopal 462 020

Department: Phletomy Station Hospital Complex

Ref. AIIMS/BPL/Phleletomy station/2015-16

Dated: 01/02/2016

Subject: Requirement of Laboratory Plastic Ware

Quotation shall be submitted as a hard copy in a sealed envelope addressed to ‘The Director, AIIMS Bhopal’, & Kind attention to the office of the Store officer (Central Stores Medical College) AIIMS Bhopal, latest by 2:00 pm of 22/02/2016

Schedule of requirement & separately.

<table>
<thead>
<tr>
<th>Sr.No</th>
<th>Description</th>
<th>Size</th>
<th>Req.Qty</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Lab Tray (autoclable Polypropylene)</td>
<td>15” x 12” x 3”</td>
<td>20</td>
</tr>
<tr>
<td>2</td>
<td>Plastic Test tube Stand (3Tier)</td>
<td>13 mm x48 Holds</td>
<td>15</td>
</tr>
</tbody>
</table>

Terms & Conditions:

1. The quotation is to be submitted only in the format enclosed. Not acceptable in any other form.
2. The quotation must be submitted in person in sealed envelope to the office of the Store officer (Central Stores Medical College) AIIMS Bhopal.
3. Each page of the quotation must be printed on letter head of the company duly numbered.
4. If you are the authorized distributor for more than one manufacturer and empanelled for all such category then, please submit separate quotation for each Manufacturer.
5. Quotation of non empanelled companies will not be entertained
6. F.O.R.: Rate quoted shall be fixed and on FOR destination Basis.
7. Tax: (1) Quotation must contain VAT/TAN/PAN number otherwise it will not be considered.
   (2) Rate of applicable Tax should be shown separately.
8. Delivery Period: Supply is required immediately from ready stock but maximum within a period of 15 Days.
9. Payment: Payment will be made within reasonable time from the date of acceptance of supply.
10. Rates Validity: Rates quoted first time will be valid for one year from the date of Purchase Order.
11. Penalty: If the supply is not received within the scheduled delivery period, a penalty @ 0.5% per week or part thereof subject to a maximum of 5% shall be imposed which will be deducted from the Invoice.
12. Right of rejection: The Competent authority reserves all the right to reject any or all quotation without assigning any reason.
# Financial Bid Format

Name of supplier:  
Address:  
Contact No:  
E Mail Id:  

Date:

Quotation for supply of Laboratory Plastic Ware, for Phlebotomy station Hospital complex AIIMS Bhopal, as per the Enquiry No: 02, Dated:01/02/2016

<table>
<thead>
<tr>
<th>Sr. No</th>
<th>Description</th>
<th>Qty</th>
<th>Brand/Make</th>
<th>Cat No: <em>Attach Photocopy of Highlighted Item.</em></th>
<th>Pack Size as per catalogue.</th>
<th>MRP as printed on Pack</th>
<th>Catalogue Price</th>
<th>Per Unit Cost which ever is less on col:7 &amp; 8</th>
<th>% of Discount on unit Price in Col:9</th>
<th>Net Per Unit Cost after discount whichever is higher in Col:10 &amp;11</th>
<th>VAT applicable if any (Not Applicable on MRP)</th>
<th>Net Unit cost including All</th>
<th>Total Cost Per pack in Rs.</th>
</tr>
</thead>
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<td>1</td>
<td>Lab Tray - Autoclable polypropylene (Size 15&quot; x 12&quot; x 3&quot;)</td>
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* In support of Column 5, 6 & 8 a photocopy of concerned page of catalogue should be necessarily attached.

Signature of the vendor with Stamp  
Date: