Invitation of quotation

for

Muscle IHC Antibodies

At

All India Institute of Medical Sciences, Jodhpur

Inquiry No. : Admin/Gen/63-07/2019-AIIMS.JDH

Inquiry Issue Date : 18th March, 2020

Last Date of Submission : 24th March, 2020 at 05:00 PM.



All India Institute of Medical Sciences, Jodhpur

Basni Phase - II, Jodhpur – 342005, Rajasthan Telefax: 0291- 2012978, email: <u>procurement@aiimsjodhpur.edu.in</u> <u>www.aiimsjodhpur.edu.in</u>

Invitation of quotation for Muscle IHC Antibodies at AIIMS <u>Jodhpur</u>

Sealed Quotations are hereby invited by the undersigned on behalf of the Director, AIIMS Jodhpur for supply of Muscle IHC Antibodies for the Institute 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 24.03.2020 05.00 PM. The Envelope containing the quotation would please be sealed and super scribed as under:-

"QUOTATION FOR SUPPLY OF Muscle IHC Antibodies AGAINST INQUIRY NO. ADMN/GEN/63-07/2019-AIIMS.JDH" DUE ON 24.03.2020 05.00 PM"

1. Terms & Conditions:

- A) The quotations received after this deadline & unsealed shall not be entertained under any circumstances whatsoever. In case of postal delay this Institute will not be responsible. The offer Submitted Fax/Email shall not be considered and no correspondence will be entertained in this matter.
- B) Quotations must be in the enclosed prescribed Performa 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. Quotation must be dropped in "Quotation Box" located in Administration Block of AIIMS, Jodhpur.
- C) Rates must be quoted in **Indian rupees** and as per the format specified taxes extra if any must be written separately.
- D) Rates must be quoted FOR basis (including Freight charges, Insurance, installation etc.)
- E) No overwriting or cutting is permitted in the rate. If found, the quotation shall be summarily rejected.
- F) The rates quoted must be valid for 60 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) Becoming L1 will not be the criteria for awarding of purchase order unless the rates are reasonable & justified.
- H) RTGS/NEFT details need to be furnished by the supplier with the quotation on the letter head of supplier/firm/agency.
- I) 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 Rajasthan / Central Government.
 - The firm shall have valid GST No. and IT PAN.
 - The firm should not be black listed by any Govt. Agency/Dept.

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- J) 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.
- K) **Delivery Period** within 07 days from Purchase order.
- L) **Liquidated Damage:** If the supplier fails to deliver the material on or before the stipulated date, then a penalty at the rate of 0.5 % per week of the total order value shall be levied subject to maximum of 10% of the total order value.
- M) **Payment Terms:** Payment will be only after satisfactorily delivery / commissioning of material and after inspection by the AIIMS Jodhpur.
- N) **Disputes:** -In the event of any dispute or disagreement arising between the contractors and any other department of AIIMS Jodhpur with regards to the interpretation of "Terms & Conditions" of this inquiry, the same shall be referred to the Director, AIIMS Jodhpur whose decision will be final and binding upon the contractor.
- O) AIIMS, Jodhpur reserves the right to increase or decrease quantity and / or amount of work. Decision of Quantity of material in the AIIMS, Jodhpur will be final in this regard.
- P) AIIMS, Jodhpur reserves the right to reject any quotation or part or the whole of inviting quotation process without assigning any reason. Decision of the AIIMS, Jodhpur will be final in this regard.

2. **Special Terms & Conditions:**

- A) Bidder must quote the product as per specification provided in Annexure 1.
- B) Catalog must be attached with quotation for technical evaluation.

Administrative Officer

Encl.: Annexure 1 (Specification)

Annexure 2 (Format of price bid)

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Annexure 1

Specification

S.No	Nomenclature	Qty
1	Dystrophin	01 Vial
2	Dystrophin-N-TER	01 Vial
3	Dystrophin-C- TER	01 Vial
4	Sarcoglycan-Alpha	01 Vial
5	Sarcoglycan- Beta	01 Vial
6	Sarcoglycan-Gamma	01 Vial
7	Sarcoglycan-Delta	01 Vial
8	Merosin-Alpha 2 Laminin	01 Vial
9	Emerin	01 Vial
10	Fast Myosin Heavt Chain	01 Vial
11	Slow Myosin Heavt Chain	01 Vial

Note:- L1 Bidder is required onsite validation of IF Antibody.

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[On the letterhead of firm] ANNEXURE "2" PRICE BIDFORM

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To	Ο,								
		istrative Officer, , Jodhpur.							
D	ear S	ir,							
fo IN Jo 1. do	r En NQU dhpu ocum	I/We thoroughly examined ent, failing which my quotate I/We hereby offer to sup	FOR SU7/2019-Al , understo	UPPLY OIMS.JDH od and accerejected o	F Musc " DUE cepted test ut rightly	le IHC An ON 24.03. rms & condy.	ntibodi 2020 (ditions	ies AGAIN 05.00 PM a	ST THE at AIIMS e enquiry
	S. No.	Particulars	Quoted Make	Quoted Pack Size	Qty	Price/Unit Exclusive of GST (INR)	GST %	Price/Unit inclusive of GST (INR)	Total Amount Inclusive of GST (INR)
	1	Dystrophin			01 Vial				(11 (11)
Ī	2	Dystrophin-N-TER			01 Vial				
Ī	3	Dystrophin-C- TER			01 Vial				
ľ	4	Sarcoglycan-Alpha			01 Vial				
Ī	5	Sarcoglycan- Beta			01 Vial				
Ī	6	Sarcoglycan-Gamma			01 Vial				
Ī	7	Sarcoglycan-Delta			01 Vial				
Ī	8	Merosin-Alpha 2 Laminin			01 Vial				
Ī	9	Emerin			01 Vial				
Ī	10	Fast Myosin Heavt Chain			01 Vial				
	11	Slow Myosin Heavt Chain			01 Vial				
2.3.4.	The que Cat	e Bidder must quote only re Bidder must submit the otation otherwise quotation e bidder must quoted their otation will be REJECTED. talog must be attached with otherwise must be attached with otherwise.	GSTIN In will be Requotation	Registration REJECTE Only in ab For technica	n and P D. ove said l evaluat	format on ion.	the let		otherwise
	Plac	e		Name	of Firm/	Company/.	Agenc	y	
		-							
				G511 1	N INO.:				

Bank Name:-____

IFSC Code: Branch Name: Phone No		Bank Account No.:
Branch Name: Phone No Email: (Signature of Authorized Person)		IFSC Code:-
Email:(Signature of Authorized Person)		Branch Name:
Email:(Signature of Authorized Person)		Phone No
		Email:
		(Signature of Authorized Person)