

All India Institute of Medical Sciences, <u>Jodhpur</u>

Dated: 30th April, 2019

CORRIGENDUM

Invitation of quotation

For

Dermabond (Cyanoacylate Tissue Adhesive)

At

All India Institute of Medical Sciences, Jodhpur

Inquiry No.: : Admn/Gen/10-08(ii)/2019-AIIMS.JDH

Inquiry Issue Date : 24th April, 2019

Last Date of Submission : 30th April, 2019 at 05:00 PM.

INQUIRY NO. Admn/Gen/10-08(ii)/2019-AIIMS.JDH

The following revisions / modifications is made -

Annexure 1

Specification

Sr No.	Item Name	Qty.	Remark
1.	Dermabond (Cyanoacylate Tissue Adhesive)	10 Nos.	Sample Must be Submitted

Note: The Bidder must submit the sample of quoted make for technical evaluation at AIIMS Jodhpur at the time of submission of their quotation. Failure to submit the sample at the time of submission of their quotation/offer will be summarily rejected.

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

\sim

		Administrati AIIMS, Jodi								
Ι	Dear S									
(Admr	ERMABOND n/Gen/10-08(ii	S (CYANOACYLA i)/2019-AHMS.JDI	TE TIS H"DU	SUE AI E ON	DHESIVE)	AT AIIMS	S AGAINST T	HE INQUII	RY NO.
	Cyan 2.		e Adhesive) at AIIN ghly examined, und			antad tarms	le conditio	one given in th	a an animy da	aumant
			otation will be rejec			epied terms	& condition	ons given in ur	e enquiry do	cument,
	3.		offer to supply at ti		wing rate					
	S. No	Pa	orticular	Qty		Price/Unit Exclusive of GST (INR)	GST/ Other Taxes	Price/ Unit Inclusive of GST (INR)	Total Cost Inclusive of GST (INR)	MRP
	1.		d (Cyanoacylate e Adhesive)	10 Nos.						
4	 The Bidder must submit the GSTIN Registration and PAN Card self-attested copy with the quotation otherwise quotation will be REJECTED. The bidder must quoted their quotation only in above said format on the letter of firm otherwise quotation will be REJECTED. Catalog must be attached with quotation for technical evaluation. The Bidder must submit the sample of quoted make for technical evaluation at Administrative Office, Medical College, Second Floor, AIIMS Jodhpur at the time of submission of their quotation. Failure to submit the sample at the time of submission of their quotation/offer will be summarily rejected. 									
	Dat	e				(Name)				
Place Name of Firm/Com					m/Compa	nny/Agency_				
					G	STIN No.:				
					Ba	ank Name:				
					Ba	ank Accour	nt No.: _			
					IF	SC Code:-				
					Bı	anch Nam	e:			
					-	3. T				

(Signature of Authorized Person)

Seal:_____

INQUIRY NO. Admn/Gen/10-08(ii)/2019-AIIMS.JDH