



**ALL INDIA INSTITUTE OF MEDICAL SCIENCES, DEOGHAR**

**अखिलभारतीय आयुर्विज्ञान संस्थान, देवघर**

INSTITUTE OF NATIONAL IMPORTANCE UNDER MINISTRY OF HEALTH AND FAMILY WELFARE

(स्वास्थ्य और परिवार कल्याण मंत्रालय के अंतर्गत राष्ट्रीय महत्व की संस्थान)

Devipur campus, Ramsagar, Deoghar, (Jharkhand) - 814152

देवीपुर परिसर, रामसागर, देवघर, (झारखण्ड) - ८१४१४२

Invitation of quotation  
Repair of ECG Machine  
at AIIMS Deoghar

Reference No.: AIIMS/Deoghar/Repair/ECG Machine/2023-24/79

Date of Issue: 1<sup>st</sup> March 2024

Last Date of Submission: 15<sup>th</sup> March, 2024 at 05:00 PM.

All India Institute of Medical Sciences, Deoghar

Devipur, Deoghar: 814152, Jharkhand

Email: [procurement@aiimsdeoghar.edu.in](mailto:procurement@aiimsdeoghar.edu.in)

## **Invitation of quotation for Repair of ECG Machine AIIMS Deoghar**

**Sealed Quotations** are invited on behalf AIIMS, Deoghar Repair of ECG Machine (**Annexure-I**) required 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 **15.03.2024 at 05:00 PM**. The **Envelope containing the quotation** must be sealed and **super scribed as under:-**

“QUOTATION FOR REPAIR OF ECG MACHINE AT AIIMS DEOGHAR REFERENCE NO.: AIIMS/DEOGHAR/REPAIR/ECG MACHINE/2023-24/79 DUE ON **15.03.2024 AT 05.00 PM**”

LPC Committee  
AIIMS Deoghar Devipur Campus,  
IPD Block – A 4<sup>th</sup> Floor LPC Office  
Ramsagar, Deoghar, Jharkhand -814152.

### **1. Terms & Conditions:**

- a) The quotations received **after this deadline or unsealed shall not be entertained** under any circumstances whatsoever. In case of postal delay this Institute will not be responsible. The offer submitted by Fax / email shall not be considered and no correspondence will be entertained in this matter.
- b) Quotations must be in the **enclosed prescribed Performa(Annexure -2)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.
- c) The work shall be executed as per direction of the concern department.
- d) Rates must be quoted in Indian rupees.
- e) Rates must be inclusive of all charges (including repair/replacement of any parts, service charges, transportation, taxes etc.).
- f) **No overwriting or cutting** is permitted in the rate. If found, the quotation shall be summarily rejected.
- g) The **rates quoted must be valid for 90 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.
- h) **Total cost/amount will be taken in consideration for L1.**Becoming L1 will not be the criteria for awarding of work order unless the rates are reasonable & justified.
- i) The firm/agency may satisfy the following conditions and **attach self-attested copy of the same with the quotation:**
  - The firm shall have valid GST/Other taxes and IT PAN.
  - The firm should not be black listed by any Government agency/Department.

- Purchase order of any government institute / Undertaking on rupees 10 affidavit that the mentioned items has not been supplied by the vendor below the quoted rates to any institute or anybody
- 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 it will be rejected accordingly. Any conditional quotation shall be rejected summarily.
- k) **Delivery Period** – The work should be completed within **15 days** from issue of the 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 done only after satisfactorily completion work and after satisfactory report submitted by the concern department.
- n) **Disputes:** -In the event of any dispute or disagreement arising between the contractors and any other department of AIIMS Deoghar with regards to the interpretation of “Terms& Conditions” of this inquiry, the same shall be referred to arbitrator appointed by The Executive Director, AIIMS, Deoghar, whose decision will be final and binding upon the contractor.
- o) AIIMS, Deoghar reserves the right to reject any quotation or part or the whole of inviting quotation process without assigning any reason. Decision of The Executive Director, AIIMS, Deoghar, will be final in this regard.
- p) The envelope containing quotation should be sealed with WAX/TAPE on both sides. The quotation received after due date will not be accepted.
- q) Procurement will be as per rule **GFR-154** of Government of India.

**Encl.:** Annexure 1 (Specification)

Annexure 2 (Format of price bid)

**Reference no:** AIIMS/Deoghar/Repair/ECG Machine/2023-24/79

S. no.	Name of Work	Repair of Parts	Qty of ECG Machine
1.	Repairing of ECG Machine Make: MQUIP Model: ZQ-1212	Touch Screen (Replacement can be done if required)	01

Reference no:

Date:

**[Letter head of firm]**

PRICE BID FORM

To,  
LPC Chairperson,  
AIIMS, Deoghar. Devipur  
814152 (Jharkhand)

Dear Sir,

I/We ..... am/are submitting the quotation for reference "QUOTATION FOR REPAIR OF ECG MACHINE AT AIIMS DEOGHAR REFERENCE NO.: AIIMS/DEOGHAR/REPAIR/ECG MACHINE/2023-24/79 DUE ON 15.03.2024 AT 05.00 PM" at AIIMS Deoghar.

1. I/We have thoroughly examined, understood and accepted terms & conditions given in the enquiry document, failing which my quotation will be rejected out rightly.
2. I/We hereby offer to work at the following rates:

S. no.	Name of work	Qty to be Repair	Unit rate.	GST	Total cost
1.					
			Total cost/ amount		
Total cost/amount (in words)					

Note:-

- The bidder must quoted their quotation only in above said format on the letter of firm otherwise quotation will be REJECTED.
- All the required documents has to be attached,

Date:

(Name):

Place:

Name of Firm/Company/Agency:

GSTIN No.:

Phone No:

Email:

(Signature of Authorized Person) \_\_\_\_\_

Seal: \_\_\_\_\_