

**DEPARTMENT OF EMERGENCY MEDICINE  
ALL INDIA INSTITUTE OF MEDICAL SCIENCES**

Date-24/10/2016

**Reference: 02/Emergency medicine/Proprietary Item/2016-2017**


Subject: Purchase of Life band-Dis. Equal Load (Distribution band used with AUTOPULSE) for Department of Emergency Medicine, AIIMS, New Delhi-29 on proprietary basis- Inviting comments thereon.

The department of emergency medicine has been procuring the above cited items (i.e Life band-Dis. Equal Load) From M/s Arian Healthcare on proprietary basis. The proposal submitted by M/s Arian Healthcare. The proprietary certification and authorization certification are attached & uploaded on website.

The above documents are being uploaded for open information to submit objection, comments, if any, from any manufacturer regarding proprietary nature of the item with 15 days from the date of issue/uploading of the notification giving References-02/Emergency medicine/Proprietary Item/2016-2017

The comments should be sent to Professor Head, Department of Emergency Medicine, at AIIMS on or before 09/11/2016 up to 5.00 pm failing which it will be presumed that any other vendor is having no comment to offer and case will be decided on merits.

Yours sincerely

  
Dr. Praveen Aggarwal  
Prof. & Head  
Department of Emergency Medicine

Encl:

1. Quotation
2. Proprietary Certificate
3. Authorization certificate



# Arian Healthcare

4327/3, Flat No. 202, IInd Floor, Ansari Road, Darya Ganj, New Delhi-110002  
Tel. : 011-23250080, Fax : 011-23250209, Mobile : 9811140954  
E-mail : arianhealthcare@rediffmail.com; arianhealthcare@gmail.com

Ref.: AHC/AIIMS/2016-17

Dt.: 28.09.2016

The Prof. & H.O.D.,  
Deptt. Of Emergency Medicine,  
All India Institute Of Medical Sciences.,  
Ansari Nagar, New Delhi-29

## Sub.:Quotation

Sir,

As per your requirement, we are pleased to quote you our most competitive rates for the following products:

S.No.	DESCRIPTION	Qty.	Quoted Rate Per Pc. (In Rs.)	Negotiated Rate In Rs.
1.	LIFEBAND – Dis. Equal Load Distribution band, to be used with AUTOPULSE. Mfd. By: M/s. ZOLL Medical, U.S.A.	Each	Rs.12,700=00	Rs.12,319.00 (Rupees Twelve Thousand Three Hundred Nineteen Only)

### Terms & Conditions :-

- 1) The above rates are FOR your hospital.
- 2) The above quoted rates are exclusive of VAT @5% but in case of any statutory change in the govt. policy we will request you for the amendment accordingly.
- 3) Delivery within 4 working weeks after the receipt of your confirmed order.

We hope that you will find our offer competitive & give us an opportunity to serve you.  
We assure you our best services & co-operation.

Thanking You,

Yours truly,

For **Arian Healthcare**

(Authorized Signatory)

- Encl:- Proprietary Certificates for the quoted product.  
Fall Clause Certificate.
- Letter of Authority from M/s. ZOLL Medical.
  - Copy of S.O. For the quoted product.



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All India Institute Of Medical Sciences.,  
Ansari Nagar, New Delhi-29

Sub.: FALL CLAUSE CERTIFICATE.

Sir,

With reference to our quotation no. AHC/AIIMS/2016-17 Dt. 28.09.2016 for the supply of **LIFEBAND – Equal Load Distribution Band**, we submit herewith that:

“The price charged for the stores/Equipment’s under the reference, by the supplier shall in no event exceed the lowest price at which the supplier the stores/Equipments of same identical description to any other person/organization/Institution during the currency of the contract as per the fall clause adhered by DGS & D. If at any time, during the said period the supplier reduced the said prices of such/stores/equipments or sales such stores to any other person/Organizations/Govt. Institution/Co-operative stores at price lower than the quoted prices, he shall forthwith notify such reduction or sale to the Director, All India Institute of Medical sciences and the price payable for the items supplied after the date of coming force of such reduction or sale shall stand correspondingly reduced for AIIMS”.

Should you require any clarification then please feel free to contact us.

Thanking You,

Yours truly,

For **Arian Healthcare**

(Authorized Signatory)





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www.zoll.com

Dated: 25<sup>th</sup> September, 2016

To  
The Prof. & H.O.D.,  
Deptt. Of Emergency Medicine,  
All India Institute of Medical Sciences,  
Ansari Nagar, New Delhi-29.

**Sub.: Letter Of Authority**

Dear Sir,

We **Zoll Medical Corporation** do hereby authorise **M/S. Arian Healthcare, 4327/3, Flat No.202, 2<sup>nd</sup> Floor, Ansari Road, Darya Ganj, New Delhi-110002** to quote, make supplies & collect the payment on our behalf against all your requirement.

We have not authorized any other dealer for the same. We solicit your kind support for our products & assure you our best services & co-operation.

For **ZOLL Medical Corporation**  
  
Bhanu Parkash

Technical & Product Application Manager