

**JAI PRAKASH NARAYAN APEX TRAUMA CENTRE  
ALL INDIA INSTITUTE OF MEDICAL SCIENCES  
RAJ NAGAR, NEW DELHI – 110029  
TENDER/RATE ENQUIRY**

Dated: 16.09.2015

R.E. No. 38/TC/Surg./2015-16

NAME OF THE FIRM IN WHOSE  
FAVOUR THE TENDER FORM HAS  
BEEN ISSUED

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THE SENIOR STORES OFFICER, ROOM NO. 301, 3<sup>RD</sup> FLOOR, JPNATC, BUILDING, RAJ NAGAR, NEW DELHI – 110029.

LAST DATE OF SUBMISSION : 09.10.2015 upto 11:00 AM

DATE OF OPENING : 09.10.2015 at 2:30 pm

SEAL OF THE OFFICER

Dear Sir,

1. I/we hereby submit our sealed quotation in two bid system along with samples for the purchase of I.A.P. Monitoring Device.
2. All the terms and condition such as taxes etc. has been indicated in the schedule failing which it may be presumed that the rates are inclusive of all taxes and other terms and conditions are also as per your terms and conditions are also as your requirements.
3. I/We hereby submitted security of Rs.5000/- in favor of A.I.I.M.S., JPNATC A/C NEW DELHI vide along with quotation.
4. I/We have noted that over writing entries shall be deleted unless duly out/written and initialed.
5. Tender is duly signed (not thumb impression is affixed)

Contd....P-2

Contd... from P-1

6. If the firm gives a false statement on any of the above information the firm/supplier will not be considered and their quotation shall be rejected and the security deposited shall be forfeited.
7. Warranty/Guarantee: Minimum One year on site comprehensive warranty in case of Machinery and Equipment items if applicable.
8. The payment will be made electronically viz RTGS/NEFT against delivery and satisfactory installation of the item. The following information should be also mentioned in the quotation.
  1. Name of the beneficiary:
  2. Account No. of the beneficiary:
  3. IFCS code of the bank/branch:
9. The end user reserves the right to cancel/reject full or any part of the rate enquiry which generally do not fill the conditions stipulated in the rate enquiry.
- 10. A separate list of the consumables accessories/reagents/spare parts etc. with price required to operate the equipment should be also enclosed in case of equipment if applicable.**
11. The firm should be able to give demonstration of the item if required within 1 week of requisition. In case of equipment if applicable.
12. This forwarding letter duly signed is returned along with the sealed quotations.
13. The EMD of as Rs.5000.00 is required to be submitted in the form of **Demand Draft/Pay order drawn in favour of "AIIMS JPNATC A/c", New Delhi**. In case of non submission of EMD such offers will be summarily rejected even in case of Small Scale and MSME registered firms also as per policy of AIIMS no exemption is provided to small Scale / MSME other such firms being Autonomous Institute.

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Quotations are invited by post/per bearer for the supply of items detailed below which are required for JPNATC, AIIMS.

The quotations should reach this office on or before 09.10.2015 at 11:00 A.M. duly sealed & marked tender/ R.E. No. 38/TC/Surg./2015-16 due for opening at 2:30 P.M. on 09.10.2015 in the office of Sr. Stores Officer Room No. 301, 3<sup>rd</sup> floor, JPNATC Building, RAJ Nagar, New Delhi. All quotations should be typewritten of in ink. All over writing and erased entries will be deleted from the quotations. The rates should be valid at least for one year.

The Bid should be accompanied with an **EMD/BID Security amounting to Rs.5000/- (Rupees Five Thousand Only) by way of Demand Draft/Pay order drawn in favour of "AIIMS JPNATC A/c", New Delhi**, failing which the quotations shall not be considered for acceptance and will be out rightly rejected.

The firms have to quote for one best quality as per specifications only and only sample of the same should be submitted. The offers submitted as quality A,B,C, & D etc.will be summarily rejected, any alteration in the specification shall not be considered at all.

The quoted items having quality mark such as I.S.I/C.E. mark/ ISO9002 Standardization should be mentioned if applicable.

SEAL OF THE OFFICER

**S.No.** **NOMENCLATURE: -**

**QTY.**

1. I.A.P.Monitoring Device  
(Intra Abdominal Pressure Monitoring Kit)

10 Nos (Approx.)