



अखिलभारतीयआयुर्विज्ञानसंस्थान, रायपुर(छत्तीसगढ़)
All India Institute of Medical Sciences, Raipur (Chhattisgarh)
Tatibandh, GE Road,
Raipur-492 099 (CG)
www.aiimsraipur.edu.in

AIIMS/R/HS/NICU/2036/2022/PAC

Date: 01/08/2022

Call for Objections

Sub:- Inviting Comments/objections (if any), regarding procurement of Patient Probe Reusable care plus incubator kit for NICU Department at AIIMS Raipur under Proprietary Article Basis.

NICU Department, AIIMS Raipur has to procure the **Patient Probe Reusable care plus incubator kit (2045964-001)** for NICU Department through Proprietary Article Basis under GFR -166. The proposal submitted by M/s Wipro GE Healthcare Pvt. Ltd., Bangalore who is sole manufacturer as well as local Agent of this item along with Proprietary Article Certificate are attached and same upload on AIIMS Raipur website.

The above documents are being uploaded for open information to submit objections/comments (if any) from any manufacturer/supplier before declaring proprietary article for the said equipment/items to be procured, within 11 days (i.e. 11/08/2022) from the date of issuance/uploading of the notifications. The objection should be raised on the technical compliance sheet as enclosed, if any firm claiming suitability of their product with respect to specification mentioned.

The comments should be sent to the office of Stores Office (Hospital), Room No. 329, C C1 Block, Gate No. 01, AIIMS, Raipur in sealed envelope or through mail storesofficer.hp@aiimsraipur.edu.in on or before 11/08/2022 up to 3.00 PM failing which it will be presumed that any other vendor having no comments to offer and case will be decided on merits.

Stores Officer- H
AIIMS Raipur

Encl:-

1. Proprietary Letter by Manufacturer
2. Proprietary Letter by Department



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स्वामित्वप्रमाणपत्र
Proprietary Article Certificate

फाइल संख्या औरसंदर्भ File Number and Reference		
1	सामाग्रीकाविवरण Description of article	Patient Probe Reusable Care plus incubator kit
2	पूर्वानुमानितमात्रा / वार्षिकआवश्यकता Forecast of quantity/annual requirement	
3	उपरोक्तमात्रा हेतुअनुमानितमूल्य Approximate estimated value for above	
4	निर्माताकानाम एवं पता Maker's name and address	Wipro GE health Care
5	अधिकृतडीलर / स्टॉकिस्टकानाम Name(s) of authorised dealers/stockists	Ravi Jain
6	<p>मैंपी ए सी के आधारपरउपरोक्त खरीदकोस्वीकारकरताहूँऔर यह प्रमाणित करताहूँकि: नोट- (बी), (सी-1) या (सी-2) में से केवल एक कोबनाए रखने के लिए टिककरें, जोभीलागूहोऔरदूसरोकोकाटदें।कृपया (ए) टिककरपुष्टिकरेंइसकेबिनापीएसीप्रमाणपत्र अवैध होगा</p> <p>I approve the above purchase on PAC basis and certify that:- Note- Tick to retain only one out of (b), (c-1) or (c-2) whichever is applicable and cross out others. Please do confirm (a) by ticking it - without which PAC certificate will be invalid.</p>	
6 (a)	यह एकमात्र फर्महैजोइसमदकानिर्माण / संग्रहणकर रहा है। और This is the only firm who is manufacturing /stocking this item. AND	<input checked="" type="checkbox"/>
6 (b)	किसीअन्य फर्म द्वारासमरूपमदनिर्मित / विक्रय नहीं कियाजाताहै, जिसकाउपयोगइसकेबदलेकियाजासकताहै। अथवा A similar article is not manufacturing/sold by any other firm, which could be used in lieu OR	<input checked="" type="checkbox"/>
6 (c-1)	कोईअन्य मेक / ब्रांडनिम्नलिखितकारणों (जैसेओईएम / वारंटी के) के लिए उपयुक्त नहीं होगा। अथवा No other make/brand will be suitable for following tangible reasons (like OEM/warranty spares): OR	

	
6 (c)	<p>कोई अन्य मेक/ब्रांड निम्नलिखित कारणों से उपयुक्त नहीं होगा (अगर पीएससी पिछले खरीद में भी दिया गया था, तो कृपया इसके बाद से अधिक स्रोतों का पता लगाने के लिए प्रयास करें) तथा</p> <p>No other make/brand will be suitable for following intangible reasons (if PAC was also given in the last procurement cycle, please also bring out efforts made since then to locate more sources): OR</p>	

	<p>प्रस्ताव के लिए वित्त शाखा की सहमति का संदर्भ (कार्रवाई भंडार और लेखा विभाग द्वारा की जायेगी)</p> <p>Reference of concurrence of finance wing to the proposal (Action will be taken by stores & Account Department)</p>	_____

पिछले तीन सालों में इस मद की पीएससी खरीद का इतिहास नीचे दिया जा सकता है (यदि कोई हो) History of PAC purchase of this item for past three years may be given below (if any)			
प्रदायक का नाम Name of the Supplier			
आदेश / निविदा संदर्भ और दिनांक Order/Tender reference & Date	आदेशित मात्रा Quantity Ordered	आदेश पर मूल दर (<input type="checkbox"/>) Basic Rate on order (<input type="checkbox"/>)	प्रतिकूल प्रदर्शन रिपोर्ट अगर कोई हो Adverse Performance Reported if any

अनुमोदन करने वाले प्राधिकारी का हस्ताक्षर.....

दिनांक 14/3/22

अधिकारी का पदनाम.....

डॉ. फाल्गुनी पादी
Dr. Phalguni Padhi

Reg No.-16414/07

सह-प्राध्यापक (नवजात शिशु विभाग)
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अखिल भारतीय आयुर्विज्ञान संस्थान, रायपुर (छ.ग.)
All India Institute of Medical Sciences, Raipur (C.G.)



Wipro GE Healthcare Pvt. Ltd.

LOB: 1st Ground (LG) Floor of DB City Corporate Park,
Arera Hills, Opp. M.P. Nagar Zone-1,
Bhopal - 462 011, Madhya Pradesh, India

T: +91 755 2466968, 2463470, 2463647, 0
www.wiprage.com

PROPRIETARY ARTICLE CERTIFICATE

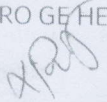
THIS IS TO CERTIFY THAT THE FOLLOWING ITEMS IS EXCLUSIVELY MANUFACTURED BY M/S WIPRO GE HEALTHCARE PVT. LTD. AND WE ARE THE EXCLUSIVE SALES AND SERVICE PROVIDER FOR EQUIPMENT INCLUDING ITS SPARE PARTS, ACCESSORIES AND EXPENDABLES

DESSCRIPTION .

- PATIENT PROBE REUSABLE CARE PLUS INCUBATOR KIT 2045964-001

WE ARE THE ORIGINAL MANUFACTURER AND DISTRIBUTOR OF THE EQUIPMENT AND ALL SPARE PARTS. FOR WIPRO GE HEALTHCARE PVT.LTD.

FOR WIPRO GE HEALTHCARE PVT.LTD


AUTHORIZED SIGNATORY

Thank you for partnering with us on our mission of being at work for a healthier India

Wipro GE Healthcare Pvt. Ltd. Regd. Off: No. 4, Kadugodi Industrial Area, Bangalore 560 067, Karnataka India
CIN : U33111KA1990PTC016063 T 91 80 4180 1000 F 91 80 4180 1290