



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

No. AIIMS/R/HS/2024//PAC/03-893/2057

Date: 16/12/2024

NOC


Sub:-Inviting comments/objection (if any) regarding procurement of "Reagents and Consumables for Flowcytometer" for Department of Biochemistry in AIIMS Raipur under Proprietary Article.

Department of Biochemistry, AIIMS Raipur has to procure the "Reagents and Consumables for Flowcytometer" through Proprietary Article Basis under GFR -166. The proposal submitted by M/s Backman Coulter India Pvt. Ltd., who is sole manufacturer and M/s Shristi Enterprises, Raipur, as local Agent of this item along with Proprietary Article Certificate is 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 consumables/reagents to be procured within 07 days i.e. 23/12/2024 from the date of issuance/uploading of the notification.

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 send to the office of Store Office (Hospital) Room no146, C-block, AIIMS Raipur in a sealed envelope or through email on storesofficer.hp@aiimsraipur.edu.in with above reference on or before 23/12/2024 upto 03:00PM, failing which it will be presumed that any other manufacturer/vendor having no comment to offer and case will be decided on merits.


Officer In-charge
Procurement (Lab Consumables)
AIIMS Raipur (CG)

Encls:-

1. PAC Certificate by Manufacturer
2. PAC Certificate by Department
3. Authorization letter of vendor

Procurement of consumables and reagent for flowcytometer for Biochemistry department under PAC at AIIMS Raipur

Technical Specification

Sr. No.	NAME	REQUIREMENT	UNIT	Make & HSN Code	UNIT RATE IN Rs.	GST in %	Unit Rate with GST	TOTAL PRICE in RS.
1.	ISOFLOW™ EPICS SHEATH FL, 10L P. NO.-8546859	04	Pack					
2	COULTER FLOWCOUNT 20 ML IVD P. NO-7547053	01	Pack					
3	IMMUNO TROLL CELLS W/B CONTROL 60 T P. NO-6607077	01	Pack					
4	IMMUNO TROLL LOW CELL KIT,60 T. P. NO. 6607098	01	Pack					
5	OPTILYSE C 200 TESTS CE P. NO-A11895	01	Pack					
6	FP, FLOW CHECK PRO RUO 3X10 ML KIT P. NO-A69183183/A63493	01	Pack					
7	HLA B27/HLA B7 FITC/PE,50T CE P. NO.-A07739	01	Pack					
8	TERACHROME CD45-FITC/CD4-PE/CD8-ECD/CD3-PC5,50 T.P. NO.-6607013	02	Pack					
9	FLOW CLEAN, 500ML P. NO-C48093	01	Pack					



Department of Biochemistry
अखिल भारतीय आयुर्विज्ञान संस्थान, रायपुर (छत्तीसगढ़)
All India Institute of Medical Sciences, Raipur (Chhattisgarh)
Tatibandh, GE Road, Raipur-492 099 (CG)
www.aiimsraipur.edu.in

स्वामित्वप्रमाण-पत्र
Proprietary Article Certificate

फाइल संख्या और संदर्भ File Number and Reference								
1	सामग्रीकाविवरण Description of article	These reagents and consumables are required for Flowcytometer machine of Beckman Coulter Ltd. For testing, diagnostics of various samples in the Service Lab (room no.2214) of Biochemistry Department. <table border="1" style="margin-left: auto; margin-right: auto;"><thead><tr><th>S. no.</th><th>Complete Description of items (Specifications, Catalog No.)</th><th>Qty. Req.</th></tr></thead><tbody><tr><td>1</td><td colspan="2">As per annexure-II</td></tr></tbody></table>	S. no.	Complete Description of items (Specifications, Catalog No.)	Qty. Req.	1	As per annexure-II	
S. no.	Complete Description of items (Specifications, Catalog No.)	Qty. Req.						
1	As per annexure-II							
2	पूर्वानुमानित मात्रा / वार्षिक आवश्यकता Forecast of quantity/Annual requirement	As mentioned in above table at point.01						
3	उपरोक्त मात्रा हेतु अनुमानित मूल्य Approximate estimated value for above	Total Amount ₹2,74,576.10/- (Inclusive GST)						
4	निर्माताका नाम एवं पता Maker's Name and Address	M/S BECKMAN COULTER INDIA PVT. LTD. Registered Office: Unit Nos. TF-B-07(A) to 15, 3 rd Floor, B Wing, Art Guild House, Phoenix Market City, LBS Road, Kurla (West), Mumbai- 400 070. Tel: 022 3080 5000, Fax: 022 3080 5060 Contact: Vishal Sachdeva (key account manager-clinical) Mob: 9718378910; VSACHDEVA@beckman.com						
5	अधिकृत डीलर / स्टॉकिस्ट का नाम Name(s) of authorised dealers/stockists	M/S SRISHTI ENTERPRISES, 99/1 Bhanpuri Industrial Area, Urkura, Raipur. C.G Contact: Mr. Vikash singh/ Amit Sharma Mob: 7697362474, Email: amit.sharma@shristigroup.com Authorised distributor at Raipur						
6	मैं पीएसी के आधार पर उपरोक्त खरीद को स्वीकार करता हूँ। और यह प्रमाणित करता हूँ कि: नोट- (बी) (सी-1) या (सी-2) में से केवल एक को बनाए रखने के लिए टिक करें जो भी लागू हो और दूसरों को काट दें। कृपया ए टिक कर पुष्टि करें इस के बिना पीएसी प्रमाणपत्र अवैध होगा। I approve the above 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.							
6(a)	यह एकमात्र फर्म है जो इस मद का निर्माण / संग्रहण कर रहा है। और This is the only firm who is manufacturing / stocking this item. AND	✓						
6(b)	किसी अन्य फर्म द्वारा समरूप मद निर्मित / विक्रय नहीं किया जाता है जिसका उपयोग इस के बदले किया जा सकता है। अथवा A similar article is not manufacturing / sold by any other firm, which could be used in lieu OR	✓						
6(c-1)	कोई अन्य मेक / ब्रांड निम्न लिखित कारणों (जैसे ओईएम / 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-2)	कोई अन्य मेक / ब्रांड निम्न लिखित कारणों से उपयुक्त नहीं होगा (अगर पीएसी पिछले खरीद में भी दिया गया था, तो कृपया इसके बाद से अधिक स्रोतों का पता लगाने के लिए प्रयास करें)। तथा 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	✗						

7	प्रस्ताव के लिए वित्तशाखा की सहमतिकासंदर्भ (कार्रवाई भंडारऔरलेखाविभाग द्वारा की जायेगी) Reference of concurrence of finance wing to the proposal (Action will be taken by Stores and Account Department)
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पिछलेतीनसालोंमेंइसमद की पीएसी खरीदकाइतिहासनीचेदियाजासकताहै (यदि कोई हो) History of PAC purchase of this item for past three years may be given below (if any)			
प्रदायककानामName of the supplier	---		
आदेश / निविदासंदर्भऔरदिनांक order/tender reference & date	आदेशितमात्रा quantity ordered	आदेशपरमूलदर Basic rate on order (Rs.)	प्रतिकूलप्रदर्शनरिपोर्टअगरकोईहो adverse performance reported if any
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अनुमोदनकरनेवालेप्राधिकारीकाहस्ताक्षर
Signature _____

[Handwritten Signature]
14/11/24

दिनांक
Date _____

अधिकारीकापदनाम
Designation of Officer _____

प्र. ग. विभागाध्यक्ष जैव रसायन विभाग
Head Department of Biochemistry
एम्स, रायपुर (छ.ग.)
AIIMS, RAIPUR (C.G.)