



अखिलभारतीयआयुर्विज्ञानसंस्थान, रायपुर(छत्तीसगढ़)
All India Institute of Medical Sciences, Raipur (Chhattisgarh)
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Raipur-492 099 (CG)
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AIIMS/R/HS/CTVS/733/155/2020

Date: 21/10/2020

Inviting Quotations for Purchase of consumable item (Disposable Wound Protector) required for Cardiac Surgery in CTVS OT at AIIMS Raipur.

NOTICE INVITING QUOTATION

Sealed quotations are invited from intending registered Stockist / Distributors having GST and relevant documents for Purchase of **consumable items (Disposable Wound Protector) required for Cardiac Surgery in CTVS OT, AIIMS Raipur**. The quotation with copy of certificate of GST & other documents should be submitted to office of **Store Officer – Hospital, Room No. – 146, C C1 Block, Gate No. 1, AIIMS Raipur or through email at storesofficer.hp@aiimsraipur.edu.in up to 27/10/2020 before 10:00 am**. The Online Bids can be submitted through CPP portal also. The quotations/Bids will be opened on the next day i.e. on **28/10/2020 at 11:00am**. Details of item are

| Sno | Specification | Quantity Required | Unit | HSN Code | Brand | Unit Rate | GST | | | Amount |
|-----|---|-------------------|------------|----------|-------|-----------|------|------|------|--------|
| | | | | | | | SGST | IGST | CGST | |
| | Disposable Wound Protector | | | | | | | | | |
| 1. | Disposable Wound Protector, Small Size 2.5 -6 cm | 45 | Pcs | | | | | | | |
| 2. | Disposable Wound Protector, Medium Size 5 -9 cm | 40 | Pcs | | | | | | | |
| | Grand Total | | | | | | | | | |

given as under:-

Terms & Condition

1. Firm to mention Make/Brand name in their quotation.
2. Taxes, if any (Kindly mention in above table) should be clearly mentioned in the offer.
3. Document relating to registration of firm i.e. GST and relevant document should be submitted along with quotation.
4. Products are certified from ISI/ISO/CE/GMP/BIS as applicable, the Certificate to this effect should be attached.
5. Supply should be done within 15 days after Placement of PO.
6. Price should be FOR Destination basis (i.e. concerned department).
7. 100% Payment will be released after certification from concerned department.
8. **Quotation Name/No. and due date of opening must be mentioned on top of envelops.**

9. LD @ 0.5% of delayed supply per week or part of week for delay of supply of material subject to maximum up to 10% of delayed supply to be deducted.
10. AIIMS Raipur reserves the right to place order for full or part quantity to one or more firms. The AIIMS, Raipur reserves the right to increase/decrease the number of required quantity.
11. All other terms & condition as per GFR 2017.
12. Material to be delivered at **CTVS Department, AIIMS Raipur.**
13. **Validity of the quotation should be 90 days from the date of opening.**
14. **Firm to submit documentary evidence in support of their claim for GST at the time of submission of bills.**
15. **The Details of the vendor to be submitted as per Form –A.**

Stores Officer (H)
AIIMS, Raipur (C.G)

Form-A

Vendor's Details:

| | | |
|---|---|--|
| 1 | Name of the Bidder | |
| 2 | Permanent Account No(PAN) | |
| 3 | Particulars of Bank Account | |
| | a) Name of the Bank | |
| | b) Name of the Branch | |
| | c) Branch Code | |
| | d) Address | |
| | e) City Name | |
| | f) Telephone No | |
| | g) NEFT/IFSC Code | |
| | h) RTGS Code | |
| | i) 9 Digit MICR Code appearing on the cheque book | |
| | j) Type of Account | |
| | k) Account No. | |
| 4 | Email id of the Bidder | |
| 5 | Complete Postal Address of the bidder | |
| 6 | Contact No. | |