



भारतीय
प्रौद्योगिकी
संस्थान
बनारसी हिन्दू विश्वविद्यालय



INDIAN
INSTITUTE OF
TECHNOLOGY
BANARAS HINDU UNIVERSITY

SCHOOL OF BIOMEDICAL ENGINEERING

QUOTATION ENQUIRY

Ref: IIT (BHU) /BME/16-17/QTN/661/O

Due Date: 14.06.16
(Last date of quotation receiving)

Date: 16.05.16
(Date of tender enquiry)

Dear Sir,

Please submit your lowest rate for supplying the under mentioned items. Quotation in duplicate must reach us before the date marked above and should contain the following information:

1. Full specification and make of the item offered and its rate F.O.R. Varanasi only. For items quoted in foreign currency the rupee equivalent on the date of quotation opening will be considered.
2. Sales tax at concessional rate as applicable to educational institution.
3. Your VAT / CST registration number, PAN & TIN numbers.
4. Conditions of supply and terms of payment. (No advance payment will be given)
5. If you are a manufacturer of the item or if you have proprietary right over it, please mention it in the quotation and provide a certificate.
6. Please mention your agency commission in Indian Rs., if applicable (in case of imported items).
7. Please give undertaking as per annexure-I-B
8. Quotations should clearly state net final price inclusive of all taxes, freight etc.
9. Price for individual items should be quoted along with essential accessories
10. Price of optional accessories should be clearly mentioned separately.

Quotation must be sent in a **sealed envelope** with word "QUOTATION", our reference number, and due date as given above, clearly marked over it.

SL. NO	Name of Items	Description / Technical Specification	Quantity
1	Ultra Low Temperature Freezer- Vertical Type	Microprocessor controlled, Vertical Type, Ultra Low Temp. Freezer with digital LED displays with at least three internal chambers lockable doors or better. Capacity at least 300 to 400 liters or more. Higher capacity with lower equivalent price will be preferred. Temperature range -60°C to -86°C or more, adjustable with increment of 1°C. Working efficiently at wide ambient temperature range of 10°C to 35°C or better. Built-in Over/Under voltage compensating technology to reduce wear & tear. Microprocessor controlled Cascade freezing technology preferably with 2 Compressors of 1H.P each (imported model). VIP insulation for better temperature stability or better. Interior made up of Stainless steel with stainless steel selves and exterior with Galvanized powder coated steel. A minimum of 3 shelves further subdivided into two compartments each should be there making a minimum of 5 compartments in total Malfunction Audio-visual alarms on display for over/under temperature, sensor defect, condenser radiating effect, high ambient temp., probe failure, hot condenser, remote alarm contact and power failure. Pressure equalization design / Vacuum relief port for easier door opening. Optionally a set of appropriate stainless-steel racks for 2-inch high cryoboxes entirely filling one compartment of the ultra low temp. freezer. Quoted model should be CE certified & certificate should be provided along with quote. Voltage 220-240V, 50/60 Hz. Warranty at least 24 months or better on entire unit.	1

N.B. : Other terms & conditions pertaining to item mentioned above, shall be mentioned below:

The Sealed quotations will be opened on 20.06.16...at ..12 noon.... in the office of Dr. S. Bose Dasgupta, School of Biomedical Engineering....

Sandeep Dasgupta
HOD/COS/PI

Principal Investigator
Project No. DBT-PI
School of Biomedical Engineering
IIT (BHU), Varanasi

INDIAN INSTITUTE OF TECHNOLOGY (BHU) VARANASI

TO BE RETURNED

Following proforma should be filled in and duly signed by the firm and sent along with the quotation. (Please refer to the detailed instructions/notes before filling this proforma).

1. Validity of the offer :
 2. Approximate Delivery Period :
 3. (a) Whether rates have been quoted F.O.R. site and covers packing forwarding and insurance charges.: YES / NO
 - (b) If not, please mention the same :
 4. (a) Whether the prices are inclusive of Sales Tax and : other taxes. YES / NO
 - (b) If not, kindly specify the amount / rate :
 5. If the Sales Tax is charged extra, declaration for charging Sales Tax correctly attached. : YES / NO
 6. (a) Whether supply will be made directly or through any Local/Regiona/Authorized Dealer / Stockist: Directly/Stockist/Authorized Dealer
 - (b) If through a Stockist / Dealer: -
 - (i) Name and full address of the Party :
 - (ii) Whether the order to be placed with the : Principal / Stockist / Dealer
 - (iii) Who will raise the bill : Principal / Stockist / Dealer
 - (iv) Cheques will be drawn in favour of : Principal / Stockist / Dealer
 - (v) Whether any Delivery, Packing and Forwarding : YES / NO
- Charges will be payable to local Stockiest/Dealer: (Please specify the amount/percentage etc, if any)
7. Our terms of payment (Please indicate your preference by a (✓) mark). Please note that no other payment terms are likely to be accepted.
 - (a) **For Local Firms or if the bills are raised by the Local Dealers.**
 - (i) 100% Payment on bill basis :
 - OR**
 - (ii) 100% payment against Proforma Invoice after receipt of materials in good condition, installation and satisfactory report.
(Only under exceptional cases)

(b) If the bills are raised by outstation Firms

(i) 100% Payment on bill basis :

OR

(ii) 100% payment against Proforma Invoice after receipt of materials in good condition, installation

and satisfactory report :

OR

(iii) D.G.S. & D. Terms of Payment for D.G.S. & D Rate Contract items :

OR

(iv) 75% against Proforma Invoice (at site) or documents through Bank and 25% after receipt of materials in good condition, installation and satisfactory report. :

OR

(v) 90% payment against Proforma Invoice (at site) or documents through bank and 10% after receipt of materials in good condition, installation and satisfactory report (Only under special Circumstances). :

8. Whether any Excise Duty is payable on the items. : YES / NO
If yes, indicate the amount / percentage. :%
9. Whether any installation charges are payable extra. : YES / NO
If yes, amount to be specified. :
10. Whether any discount for educational institution :
offered on the printed price list of the manufacturer. : YES / NO
Please mention the amount / percentage. :
11. Whether the product is on DGS &D/D.I. Rate contract.
If yes, please enclose a photocopy of the same. : YES / NO
12. Whether the product bears I.S.I. Mark. YES / NO
If yes, please mention the I.S.I. License no. :
13. (a) Whether the firm is Sales Tax payer. : YES / NO
If yes, please mention the Sales Tax Numbers. :
- (b) Whether the Local Dealer(s) is / are Sales Tax
payer(s) : YES / NO
If yes, please mention the Sales Tax numbers of each :
14. Whether printed / authenticated price list of the Firm's
Products and Catalogue etc. enclosed. : YES / NO

Signature of the Authorised Official with Seal

UNDERTAKING

WE HEREBY UNDERTAKE THE FOLLOWING:

1. We will not sell the product (s) to other institutions, bodies and also in the market on the rates less than those quoted by us to the Institute.
2. The goods on which Sales Tax has been charged are not exempted for payment of Sales Tax under C.S.T. Act or U.P.S.T. Act or the rules made there under and the amount mentioned on account of Sales Tax on goods is not more than what is payable under the provisions of the relevant Act or Rules made there under.
3. The rate of Excise Duty mentioned in the quotation is in accordance with the provisions of the rules and the same is payable to the Excise Authorities in respect of the stores.
4. The goods / Stores / articles offered shall be of the best quality and workmanship and their supply will be strictly in accordance with the technical specifications and particulars as detailed in the quotation.
5. The information furnished by us in the quotation is true and correct to the best of our knowledge and belief.
6. We have read and understood the rules, regulations, terms and conditions and agree to abide by them.

Authorised Signatory
(Seal)