

**SCHOOL OF BIOMEDICAL ENGINEERING  
INDIAN INSTITUTE OF TECHNOLOGY  
BANARAS HINDU UNIVERSITY  
VARANASI-221005**

**QUOTATION ENQUIRY**

**Ref: IIT (BHU)/BME/2020-21/QTN/874/O**

**Due Date: 04-03-2021, 3.00PM**  
**(Last date and time of Quotation receiving)**

**Date: 23-02-2021**  
**(Date of Quotation 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/CIF New Delhi.
2. Sales tax at concessional rate as applicable to educational institution.
3. Your VAT/CST registration number, PAN & TIN number.
4. Conditions of supply and terms of payment.
5. If you are a manufacture 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

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

Sr. No.	Work Description/ Technical specification	Quantity
1	<p><b><u>Minimum specifications for Transducer &amp; Instrumentation Trainer</u></b></p> <ul style="list-style-type: none"> <li>• Built in DC power supply: <math>\pm 5V</math> &amp; <math>\pm 12V</math> regulated power supply to perform experiment with inbuilt short circuit protection</li> <li>• Temperature sensors: Thermistor (NTC type), RTD and Thermocouple (J or K type)</li> <li>• Position sensor</li> <li>• Light sensors: Photoconductive cell, photovoltaic Cell, Phototransistor, PIN Diode</li> <li>• Servo mechanism unit with position sensing</li> <li>• Linear Variable Differential Transformer</li> <li>• Inductive Proximity Sensor</li> <li>• Strain Gauge Sensor</li> <li>• Hall Effect Sensor</li> <li>• Airflow sensor</li> <li>• Humidity Sensor</li> <li>• Ultrasonic Transmitter and receiver pair</li> <li>• On board Signal Conditioning Circuits: Amplifiers: Current, Differential, Summing and Instrumentation amplifier with gain adjustment features</li> </ul>	01 unit

	Inverters, Buffers and Comparators Sample and Hold circuit counter and timer unit Converters: I to V, V to I, V to F, F to V Low pass filter Precision Full wave rectifier Power Amplifier Oscillator compatible with ultrasonic transducer Integrator and Differentiator with switchable time constant  Display devices: Digital and Analog meter	
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N.B.: Other terms & condition pertaining to item mentioned above shall be mentioned below.

The Sealed quotation will be opened on ...4.03.2021 at...4.00 pm in the office of coordinator (This is mandatory in case of e-publishing).

**IMPORTANT TERMS**

- 1- If the equipment is proprietary you have to provide proprietary & sole supplier certificate.
- 2- **User's List:** Provide users list with contact person name, address, phone, fax and email IDs.
- 3- **Manuals/Documents (at the time of installation):** 1 set of hard copy and 1 set of soft copy in English
- 4- **Installation and training should be provided free of cost.**
- 5- **Warranty period to be clearly mentioned and should begin from the date of installation.**



**HEAD/COORDINATOR/PI**

**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 / Regional / 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 Stockist/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 :  
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**14.** Whether printed / authenticated price list of the Firm's  
Products and Catalogue etc. enclosed. : YES / NO

Signature of the Authorized 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)**

