

DEPARTMENT OF ENT
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANASARI NAGAR, NEW DELHI -110029

18 April 2014

To
M/s

Our Reference: Short Rate Enquiry No. 01/ENT/Ear tips/2014-15

Subject: Short Rate Enquiry for purchasing Ear tips for hearing analyzer.

Dear M/s

A short rate enquiry is hereby floated/invited for purchasing the ear tips to be use with Miaco Middle Ear Analyzer Mode MI 44, in Department of ENT, AIIMS, New Delhi.

Item Name: Ear tips

Quantity : 06 boxes (consisting different sizes ear tips)

Specification:

Compatible to use with Miaco Middle Ear Analyzer Mode MI 44

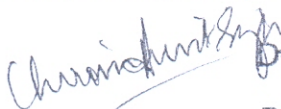
Made with soft material (like silicon)

CE/FDA approved

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TERMS & CONDITIONS:

1. The quotation should be addressed to 'Professor & Head, Department of ENT, AIIMS, New Delhi -29' and sent by post/ courier by **30 April 2014 up to 5.00 p.m.** Quotations should be sealed in an envelope and the reference no. clearly written on top of the envelop. (i.e. quotation for the item).
2. The firm must be registered and having TIN no./ registration no. (Please mentioned TIN/ registration no. on the bid) or else the quotation will be treated as cancelled.
3. The make/model of the article offered should invariably be quoted. Quotation should be typed/ written in ink. No overwriting or erased entries should be there in the quotation. **The rates should be valid for at least three months.**
4. VAT/Sales tax or any other kind of tax(s) must be mentioned separately as applicable on the item. In case no sales tax is chargeable, prices must be quoted as NET PRICE.
5. The Professor & Head, has reserves the right to call the firm to physical demonstration of item to verify the quality of offered item. The firm must have to demonstrate the product within 7 days of requisition, failing which the bid will be rejected.
6. **The firm should be competent to supply the item at the mentioned place/location within 30 working days after issuing the Supply Order.**
7. The payment will be made electronically viz RTGS/NEFT after delivery/ and satisfactory installation of the item. The following information should be also mentioned in the invoice:
 - a. Name of the beneficiary:
 - b. Account No. of the beneficiary:
 - c. IFCS code of the bank/branch:
8. **The quantity can be increased or decreased by 25% of required quantity**
9. The Professor & Head, Deptt. Of ENT , has reserves the right to cancel/reject full or any part of the rate enquiry which generally do not fulfill the conditions stipulated in the rate enquiry.



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