

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

Dated 5 December 2014

Our Reference: Short Rate Enquiry No. 07/14-15/Revolving Fund/GU

Subject: Short Rate Enquiry for repairing of BOD Incubator, Make Caltan, Mfg year before 1992.

Dear M/s

A short rate enquiry is hereby called for awarding repairing work of BOD Incubator, Make Caltan, mfg. year before 1992. The instrument is not maintaining proper temperature. The interested firms can visit on any working day between 11:00 am to 4:00 p.m. at Genetic Unit, Old O.T. Block, Department of Pediatrics except Saturday to physically check the instrument before submitting the repairing cost. They may contact to Dr. Shivaram Shastri or Dr. Madhumita Roy Chowdhury.

TERMS & CONDITIONS:

1. The quotations should be addressed to 'Dr. Madhulika Kabra, Professor, Department of Pediatrics, Genetic Division, Old O.T. Block, AIIMS, New Delhi-29' and sent by post/ courier by **27 December 2014 up to 5.00 P.M.** Quotations should be sealed in an envelope and the reference no. and item name 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 technical bid) or else the quotation will be treated as cancelled.
3. 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/Service tax or any other kind of tax(s) must be separately mentioned against each item. In case no sales tax is chargeable, prices must be quoted as NET PRICE.
5. **Warranty:** The warranty of work performs should be at least 12 months from the date of completion of work.
6. **The firm must complete the work on-site/location within mentioned date after issuing the Work Order. If the firm need to take instrument at their workshop for repairing, the arrangement should be taken by them only. No extra charges will be granted for this.**
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:
 - Name of the beneficiary:
 - Account No. of the beneficiary:
 - IFCS code of the bank/branch:
8. The Professor & Head of the Department 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.

(Sd-)

Dr. Madhulika Kabra

Professor &

Faculty In-charge Peadiatric Genetic Division