



F. No AUD/1-10(186)/2017-18

Date: 08.06.2018

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Sub: Notice Inviting Quotation for supply of Drugs, medical accessories etc.

Sir,

Sealed quotations are invited from the Firms dealing in the line for supply of Drugs/ Medicines and medical accessories as per details given below at Dr. B. R. Ambedkar University Delhi (AUD) Campus on the terms and conditions mentioned in this document:

2. Details of Drugs and Medical Accessories:

S. No	Name of Drug	Manufactured by	Qty.	Per Unit Rates (Both in words and figures)	GST (Rs.)	Price/Unit inclusive of Tax (Rs)	Total Amount inclusive of Tax (Rs)
1.	As per enclosed Format						

3. Submission of Quotation

Submission of Sealed Quotation by hand/Speed post	Date of submission: From 08.06.2018 to 18.06.2018 upto 3:00 PM Place: Room No 6A, Administration, Dr B.R. Ambedkar University , Lothian Road, Kashmere Gate, Delhi-110006
Opening of Quotation	Date of Opening: 18.06.2018 at 3:30 PM

Terms and Conditions

1. The Firm should have a valid PAN No. and GST No. It should not have been blacklisted by any Central/ State Govt. Department/ PSU. Details of GST and PAN No should be mentioned on the quotation.
2. The Firm should have a valid Drug License Certificate, the number of which should be mentioned on the quotation.
3. The Quotation must be in enclosed prescribed proforma on the letter head of the Firm duly signed by Proprietor/Partner/Director or their authorized

representative. In case of signing of quotation by the authorized representative, letter of authorization must be attached with the quotation.

4. RTGS/NEFT details needs to furnish by the supplier with the quotation on the letter head of Supplier/Firm/Agency.
5. Only one rate against one item will be entertained and accepted for.
6. The quotation shall remain valid and open for acceptance for a period of 90 days from the last date fixed for receiving the same
7. No representation regarding increase/decrease/altering/ withdrawal of rates already quoted in the bid shall be considered after the last date of receipt of bids and no price escalation claim will be entertained at any stage.
8. The Vendor shall write down rates in the table given on first page of this document both in word and figurers. The rates should be quoted in Indian Rupees inclusive of GST, other taxes, cartage, packing, forwarding etc. whatsoever payable and free delivery at Dr B R Ambedkar University Delhi. Nothing extra to whatever is written as grand total shall be paid by AUD.
9. AUD reserves the right to reject any quotation without assigning any reason. The documentation submitted by the Vendor shall not be returned back. University also reserves the right, at its own discretion, not to award any order under the present tender. The decision of AUD in this regard shall be final and no representation of any kind shall be entertained.
10. As a part of the process to evaluate the quotations, the Tender Evaluation Committee may invite the Vendor to make a presentation before it. The Vendor may also be asked to produce a sample of each item for inspection at the time of evaluation of quotations.
11. The quotation must be written in one ink or should be typed one without any cutting/overwriting.
12. Work shall be completed within 21 days from the date of issue of Work order/ Supply order.
13. In case of failure to complete the work in time, AUD shall impose a penalty of 2.5% of the value of work order per week without prejudice. In case of sub-standard/ inferior quality work, the University shall reject the same and nothing shall be payable to the Vendor. AUD reserves the right to impose a penalty upto 10% of the value of work order in case the work is not found to be fully satisfactory.
14. In case of any dispute arising out of the quotation or any breach of contract, AUD reserves the right to appoint any person as Arbitrator to sort out the dispute under relevant act/ law. All disputes are subject to jurisdiction of Delhi courts only.

15. The submission of quotation by a Vendor implies that he/ she has read the entire tender document and has made himself/ herself aware of the scope and specification of the work to be performed and of local conditions and other factors which have a bearing on the execution of the work.
16. The Vendor shall sign on each page the document as mark of acceptance of these terms and conditions. All the documents attached with the bid should be signed, page marked and sealed by the bidder.
17. Quotations received after the below mentioned due date and specified time will also be summarily rejected. Vendor quoting fluctuating rate such as “this is prevalent market rate and amount shall be charged as per applicable market rates at the time of delivery” shall be rejected out rightly. Conditional tenders shall be summarily rejected.
18. Payment to the Firm will be made after the drugs has been received and inspected by Medical Officer, Ambedkar University, Kashmere Gate Campus. Payment to the Vendor will be made through electronic fund transfer only in its designated bank account.
19. Clarifications, if any, may be sought from the AUD Admin Division on Telephone No 23863655. Tender format can be downloaded from our website 'www.aud.ac.in'.

S/d
Asst. Registrar (Admn-I)

[On the letterhead of Firm]
Annexure –I
Price Bid Form

To,

The Registrar
Dr. B.R Ambedkar University Delhi
Lothian Road, Kashmere Gate,
Delhi-110006

Dear Sir,

I/We.....Submitted the quotation for Enquiry No “**NIQ for supply of Drugs, medical accessories etc. against Enquiry No. AUD/1-10(186)/2017-18** due on 18.06.2018, 3:00 PM for supply of drugs at Dr. B.R. Ambedkar University Delhi.

S. No	Name of Drug	Manufactured by	Qty.	Per Unit Rates (Both in words and figures)	GST (Rs.)	Price/Unit inclusive of Tax (Rs)	Total Amount inclusive of Tax (Rs)
1.	Tab. Pantosac-40		200				
2.	Tab. PCM 500		2000				
3.	Tab. PCM 650		2000				
4.	Tab.Cipcal 500		500				
5.	Tab. Digene		500				
6.	Tab. Augmentin 625		200				
7.	Tab. Allegra 120		200				
8.	Tab. Becasule-Z		500				
9.	Tab.Tayo 60 K		140				
10.	Tab. Flexon		500				
11.	Tab. Vizylac		200				
12.	Tab Sinarest		1000				
13.	TT. Injection		50				
14.	Accu Check Glucometer		1				
15.	ORS		100				
16.	Dressing 4”		50				

Date.....

Signature of Authorized Person.....

Place.....

Name

Phone No.....

Name of Firm/Company/Agency.....

RTGS/NEFT A/c No.....

GST No.....

PAN No.....

Email.....

Drug License Certificate No.....