



OFFICE OF THE STATE MEDICAL COMMISSIONER  
REGIONAL OFFICE (TAMILNADU)  
EMPLOYEES' STATE INSURANCE CORPORATION  
143, STERLING ROAD, NUNGAMBAKKAM, CHENNAI-34

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Website : [www.esichennai.org](http://www.esichennai.org) / [www.esic.nic.in](http://www.esic.nic.in)

No.51/SMC/Med.Equipments/X-Ray Machine/2017

Date:04.08.2017

**TENDER NOTICE NO.10**

**E-Tenders in Two bid system are invited from manufacturers / authorized dealers for the supply of medical Equipments / Instruments for the ESI Hospital at Salem.**

Detailed information regarding the items, application / tender forms, EMD details, specifications, terms and conditions can be downloaded from the following websites: [www.esichennai.org](http://www.esichennai.org) , [www.esic.nic.in](http://www.esic.nic.in).

**The interested bidders shall submit their tender(s) only through online mode at the e-procurement portal <https://esictenders.eproc.in>**

**In addition to e-tender which has to be filed online, the bidders are also required to submit hard copies of Tender documents duly completed along with Earnest Money Deposit (EMD), supported by requisite documents and forms, as mentioned in the tender.**

**For all practical purposes, the e-tender shall be considered for evaluation and the hard copy of tender documents would also be scrutinized.**

Any corrigendum to this tender will be notified through the aforesaid websites only.

The undersigned reserves the right to accept or reject any or all the bids without assigning any reason at any stage.

**Date and Time for submission of Tender:**

LAST DATE FOR RECEIPT OF TENDER	DATE AND TIME FOR OPENING OF TENDER
28.08.2017 - 10.00 A.M	28.08.2017 - 11.00 A.M

If the date of opening of tender happens to be a holiday, the tender will be opened on the next working day. Tender documents duly completed should be dropped on or before the date and time mentioned above, in the tender box kept at the Office of State Medical Commissioner (4th floor), ESIC Regional Office, 143, Sterling Road, Nungambakkam, Chennai-34.

**SENIOR STATE MEDICAL COMMISSIONER**

## TENDER DOCUMENT

The Senior State Medical Commissioner, ESIC, Tamilnadu Region, invites e- tender in Two Bid system for procurement of the following medical equipments as per the specifications enclosed:

Name of Medical Equipment	Quantity ( in Nos.)	EMD ( in Rs.)	Required for
<b>Department of Radiology</b>			
X-Ray Machine ( 300 mA)	1	14600/-	ESI Hospital, Salem

Tenderers are requested to submit the requisite information / documents as per the following annexures :-

- Annexure – I ( Compulsory documents or check list)
- Annexure – II ( Forwarding of tender documents)
- Annexure – III ( Instructions for E-tendering)
- Annexure – IV ( Instructions for offline submission of tender)
- Annexure – V ( Tender Terms and Conditions)
- Annexure – VI ( Company Profile)
- Annexure – VII ( Declaration Form)
- Annexure – VIII ( Request for refund of EMD)
- Annexure – IX ( Price Bid)
- Annexure – X ( Warranty Certificate)
- Annexure – XI ( Price list for spares/consumables/reagents)
- Annexure – XII ( Quotation for AMC / CAMC)
- Annexure – XIII ( Specifications)

**Remark :** Bidder has to deposit the Earnest Money Deposit (EMD) mentioned against each item in the form of demand draft drawn in favour of “**ESI FUND ACCOUNT NO.1**”, payable at Chennai. Application received without Earnest Money Deposit (EMD) will be rejected. A complete set of hard copy of tender documents along with EMD must be submitted latest by the date and time stipulated, in the tender box kept for this purpose in the Office of the Senior State Medical Commissioner at Fourth Floor, ESIC, Regional Office, Chennai-34. Non –submission of hard copy as directed will lead to rejection of the tender application.

**SENIOR STATE MEDICAL COMMISSIONER**

**COMPULSORY DOCUMENTS (OR) CHECK LIST**

<b>Compulsory documents for Technical Bid :</b>		<b>REMARKS</b>
1	Manufacturer or Authorised dealer (Registration certificate in case of manufacturer or Authorization letter in case of dealer, to be submitted)	YES / NO
2	Demand Draft for EMD or Exemption Certificate	YES / NO
3	Performance Certificate duly authenticated from any other users of the equipment	YES / NO
4	Warranty Certificate	YES / NO
5	PAN number of the tendering organization	YES / NO
6	One copy containing terms and conditions and specification of the quoted equipment signed by the tenderer at the bottom of each page with the office seal duly affixed (In offline submission of bids)	YES / NO
7	Equipment Catalogue	YES / NO

<b>Compulsory documents for Price Bid :</b>		<b>REMARKS</b>
1	Price Bid for the quoting equipment	YES / NO
2	Quotation for AMC/CAMC	YES / NO
3	Price List for (a) Spares (b) Consumables (c) Reagents (d) Accessories (if any)	YES / NO
4	Purchase Order copies for having supplied the quoted equipment to Government Hospitals/reputed institutions	YES / NO

**TENDER FOR THE SUPPLY OF MEDICAL EQUIPMENTS**  
**REQUIRED FOR USE IN ESIC, TAMILNADU REGION**

To

THE SENIOR STATE MEDICAL COMMISSIONER  
ESI CORPORATION, TAMILNADU,  
REGIONAL OFFICE,  
No.143, STERLING ROAD,  
NUNGAMBAKKAM, CHENNAI-34.

Sir,

Sub: Forwarding of Tender documents for Medical Equipments - Reg.

\* \* \*

We have pleasure in submitting our tender for \_\_\_\_\_ (Name of the equipment)

We enclose herewith a Demand Draft No. \_\_\_\_\_ Dt. \_\_\_\_\_ for Rs. \_\_\_\_\_ drawn in favour of ESI FUND ACCOUNT NO. 1 towards Earnest Money Deposit.

**We bind ourselves to the conditions prescribed in the Tender Notification.**

We agree to have the Earnest Money forfeited in case of failure in full or part to undertake the contract upon the acceptance of this tender.

OFFICE SEAL:

SIGNATURE:

DESIGNATION:

NAME & ADDRESS:

**INSTRUCTIONS FOR E-TENDERING**

1. All Tenderers are required to procure Class – III B Digital signature Certificate (DSC) with both DSC Components i.e. Signing & Encryption, to participate in the E – Tender.
2. Tenderers should get registered at <https://esictenders.eproc.in>.
3. Tenderer needs to submit Bid Processing Fee Charges of Rs.2,495/- (Non-Refundable) in the form of Demand Draft from any scheduled bank, in favour of M/s.C1 India Pvt. Ltd. payable at New Delhi, for participating in the tender.
4. Along with the Demand Draft, Bidder needs to send a covering Letter mentioning about the Payment Details, Company Name, Address, Payment towards ESIC Bid Processing Fees (Mention the Tender ID and Tender Title). The payment should reach at the below mentioned address, one day before the due date and time of Bid Submission:

Mr.Mohit Chauhan  
C1 India Pvt. Ltd.,  
301, Gulf Petro Chem Building, 1<sup>st</sup> Floor,  
Udyog Vihar, Phase – 2,  
Gurgaon, Haryana – 122 015.

**Note: Payment will be Approved only after physical receipt of Demand Draft**

5. The Tenderer also needs to mention his company name, address, User ID payments towards ESIC Bid Processing Fees mentioning the Tender ID and Tender Title (at the back side of Demand Draft of Rs.2,495/-)
6. **HELPDESK NUMBERS FOR E-TENDERING** are available at :  
<https://esictenders.eproc.in/html/Support.asp>

**HELPDESK NUMBERS ARE OPEN BETWEEN 09.30 HRS AND 18.00 HRS IST  
MONDAY TO FRIDAY (Exclusion: Holidays)**

**Please email your issues at [esichelpdesk@c1india.com](mailto:esichelpdesk@c1india.com) before you call helpdesk**

<b>Name</b>	<b>E-mail</b>	<b>Phone Numbers</b>
1. Mr. Elavarasan Raghunathan	<a href="mailto:elavarasan.raghunathan@c1india.com">elavarasan.raghunathan@c1india.com</a>	022-66865600/10/11/ +918655995550
2. Mr. Mohit Chauhan (Payment related queries only)	<a href="mailto:Mohit.chauhan@c1india.com">Mohit.chauhan@c1india.com</a>	+91-124-4302033

**SENIOR STATE MEDICAL COMMISSIONER**

**INSTRUCTIONS FOR OFFLINE SUBMISSION OF TENDER**

1. The sealed envelope containing the completed tender super scribed as “TENDER FOR THE SUPPLY OF ..... (name of the equipment)” addressed to The SENIOR STATE MEDICAL COMMISSIONER, ESIC, T.N, REGIONAL OFFICE, 143, Sterling Road, Nungambakkam, Chennai-34, will be received up to the date and time stipulated.
2. **FOR TWO BID SYSTEM**

The sealed envelope containing the completed tender superscribed as "TECHNICAL BID FOR THE SUPPLY OF EQUIPMENTS/INSTRUMENTS \_\_\_\_\_ (Name of the Equipment) for the Department of \_\_\_\_\_ (Name of the department) for the ESI Hospital Salem Due on \_\_\_\_\_ (Last date of submission) on the first envelope and "PRICE BID FOR THE SUPPLY OF EQUIPMENTS/INSTRUMENTS \_\_\_\_\_ (Name of the Equipment) for the Department of \_\_\_\_\_ (Name of the department) for the ESI Hospital Salem Due on \_\_\_\_\_ (Last date of submission)" on the second envelope. Both the envelopes are again to be sealed and put in a single envelope superscribing "TENDER FOR \_\_\_\_\_ (Name of the Equipment) Due on \_\_\_\_\_ (Last date of submission) should be addressed to The Senior State Medical Commissioner, ESIC, T.N, R.O., 143, Sterling road, Nungambakkam, Chennai-34
3. BIDDERS ARE FREE TO QUOTE FOR ONE OR MORE EQUIPMENTS BUT SEPARATE ENVELOPE FOR EACH EQUIPMENT SHOULD BE USED AND SEPARATE DEMAND DRAFT TOWARDS EMD FOR EACH EQUIPMENT SHOULD BE ENCLOSED, FAILING WHICH, THE QUOTATION FOR THAT EQUIPMENT WILL BE TREATED AS UNRESPONSIVE AND SUMMARILY REJECTED. QUOTATIONS FOR SEPARATE EQUIPMENT BY THE SAME BIDDER SHOULD BE SUBMITTED IN SEPARATE ENVELOPE AND SHOULD NOT BE PUT IN A COMMON COVER.
4. **The EMD amount should be enclosed in a separate cover along with the tender documents.**
5. Postal delays if any will not be condoned.
6. **Each and every page of the tender document should be numbered and signed by the authorized signatory of participating firm with seal.**
7. The tenderer shall also enclose the copies of documents in support of details about the firm besides latest income Tax returns, GST Registration and work completion certificates etc. All these documents shall be kept along with the Technical Bid.
8. Photocopy of latest ITR/ PAN No. should be enclosed with the completed tender.

9. It is mandatory that the rates for each and every item shall be quoted in figure and words in the relevant column provided in the e-tender document in PDF format which has to be downloaded and filled and then scanned and uploaded along with the price bid as a supporting document for the amount filled online in the Price Bid.
10. The quotation should be type written and every correction in the tender should invariably be attested by full signature by the tenderer with date before submission of the tenders to the authorities concerned, failing which, the tender is liable for rejection.
11. One copy containing terms and conditions and specification of the quoted equipment should be signed by the tenderer at the bottom of each page with the office seal duly affixed and returned along with the tender.
12. Declaration form and Company profile formats enclosed must be filled in and signed by the tenderers and enclosed along with the tender. Tenders received without the Declaration form shall not be considered.
13. All Duly scanned copies of tender document along with original EMD shall be **dropped in the Tender Box kept for this purpose in the Office at Fourth Floor, ESIC, Regional office, No. 143, Sterling Road, Nungambakkam, Chennai – 34.**

**SENIOR STATE MEDICAL COMMISSIONER**

**TENDER TERMS AND CONDITIONS**

1. Tenders will be opened at SSMC's office, ESIC, R.O., Chennai -34, on the stipulated date and time in the presence of the tenderers / representatives who choose to be present.
2. The two part bids i.e. Techno - commercial (Unpriced Bid) and Price bid prepared by the Bidder shall comprise of the following:

**(A) Techno - commercial Bid (Unpriced Bid)**

- a). Bid Security (EMD) should be furnished in accordance with instructions.
- b). Detailed technical specification of items quoted along with catalogue / literature, make and model of the equipments offered without indicating price.
- c). Statements of Deviations from tendered commercial conditions, if any.
- d). Statement of deviations parameter wise from tendered specifications, if any.
- e). Authority letter from manufacturer, in case tender is submitted by agents.
- f). Tenderers have to indicate the name and address of the bankers.
- g). Documentary evidence that the goods and ancillary to be supplied by the tenderer are eligible goods and services and conform to the bidding documents.

**(B) Price Bid**

- a). The information given at Techno - commercial bid should be reproduced in price bid with prices indicated. Any deviation in this regard will render the bid liable for rejection.
- b). Rates should be typed in words as well as in figures, free from erasing, cutting and overwriting.
- c). Price quoted should match with the items quoted in techno - commercial bid.
- d). Each and every page of the quotation should be separately numbered and duly signed.
- e). In case the price quoted cannot be matched with the items/quoted in technical bid, the bid shall be liable to be rejected.
- f). **The quoted price should be all inclusive lump sum price offered for each item including cost of the equipment, freight, Insurance, transit insurance, packing forwarding etc., and including charges for installation and commissioning with all men and material required for the same and including charges for the quoted warranty period. GST Rates must be quoted separately.**
- g). **No additional charges (transportation etc.) / Demurrages will be borne by ESIC.**
- h). **The rates quoted should be F.O.R ESI Hospital, Salem. No other charges in addition will be payable on any account over and above the lump sum price quoted in the price bid. The rates quoted in ambiguous terms such as "Freight on actual basis" or "Taxes as applicable extra" or "Packing forwarding extra" will render the bid liable for rejection.**



i). Only Techno-commercial bid (un-priced bid) will be opened first on the date mentioned in the presence of bidders who chose to be present. The price bid of the firm whose equipment is technically viable fulfilling the specifications and all other conditions alone, will be considered for evaluation.

j). A certificate that the quoted items have not been supplied to any other organization / institution at a rate, lower than quoted here, should be enclosed.

k). If it is found at any stage that the goods as stated have been supplied at a lower price than the price quoted in this tender, the difference in cost would be refunded by the supplier to the purchaser, even if the contract has already been concluded subject to due allowance for elapsed time.

**3. Tender currencies:**

- The tenderer shall quote only in **INDIAN RUPEES**.

4. **Bid Security (EMD)** : Each tender must be accompanied by a EMD as mentioned against the equipment in the **form of Demand Draft only drawn in favour of ESI FUND ACCOUNT NO.1, payable at Chennai**. The tenders not accompanied by EMD is liable for rejection. For EMD exemption, if any, necessary documents for exemption should be submitted, otherwise tender will be liable for rejection. Advance Stamp Receipt for the refund of EMD should be enclosed with the tender document. The EMD of unsuccessful tenderers shall be refunded within one month after the award of tender to the successful tenderer.

5. Only the manufacturers or their authorized distributor/stockist would be considered for the tender.
6. The contract should not be sublet without the prior written permission of the Senior State Medical Commissioner
7. Either the authorized Indian agent on behalf of the principal/OEM or principal/OEM himself can bid but both cannot bid simultaneously for the same item/product in the same tender.
8. If an agent submits bid on behalf of the principal/OEM, the same agent shall not submit a bid on behalf of another principal/OEM in the same tender for same item/product.
9. Successful bidder shall not be entitled to any rate revision of price for any reason except that allowed by Government of India.
10. The rates quoted should be valid for one year from the date of approval of the Tender and the quantity mentioned is on the basis of present requirement which are to be supplied within the period mentioned in the tender.

11. Copies of Purchase Order for having supplied the quoted equipment to Government Hospitals/reputed institutions should be enclosed. The rates quoted in the purchase order should not be deleted or made illegible. A certificate duly authenticated from any other users of the equipment about satisfactory performance should also be enclosed.
12. For the equipment where reagents, cartridge, other consumables, etc. are required the price bid must include: A) The rate list indicating the prices of the consumables prevalent on the date of tendering B) List should indicate the cost and life of consumables C) The rate for reagents, consumables should remain constant for five years.
13. Firms should also give a certificate that spares/ consumables/ reagents of the equipment quoted will be freely available at least for five years after warranty period.
14. The equipments should be Guaranteed/ Warranted (**Comprehensive**) for a **minimum period of three years** from the date of satisfactory installation and inspection. **Warranty should be comprehensive including Spares/Accessories.**
15. Firm should undertake to enter into Annual Maintenance Contract (AMC/CAMC) for equipment (mandatory for all equipments in double bid system) as well as for accessories attached for a **minimum period of five years after completion of warranty period** and accordingly quote the rates of AMC/CAMC for five years. The rates for AMC (Labour) should not exceed 3% and for CAMC (Comprehensive) should not exceed 10% per annum, of the unit cost of the equipment on the date of purchase. Firm should undertake to keep the equipment in running order throughout the year and in case of equipment going out of order during warranty/AMC/CAMC the fault should be attended within 24 hours and rectified within 7 days of lodging the complaint.
16. If the equipment needs calibration, the firm shall be responsible for calibration as part of CAMC/AMC.
17. Tenderer should be able to demonstrate the product quoted by them, to the Technical Evaluation Committee in Chennai within one week from the date of opening of tender.
18. The company will get only one chance for demonstration. In case, the company fails to arrange the demonstration, the tender shall be liable for cancellation.
19. The date for demonstration shall be fixed with mutual consent on telephone/e-mail and the same shall be confirmed in writing or by fax. In any case, not more than two weeks time shall be given to arrange for demonstration.
20. The successful bidder should furnish Performance Security Deposit @ 10% of the value of the contract.

21. The Senior State Medical Commissioner, ESIC, T.N., R.O.,Chennai-34, will be at liberty to terminate the tender proceedings without assigning any reasons thereof. The bidder will not be entitled for any compensation whatsoever in respect of such termination.
22. No articles shall be supplied to the hospital except on requisition in writing signed by the SSMC / Medical Superintendent or by an officer authorized by him/her in writing to do so.
23. Bidders in their own interest shall ascertain the eligibility of whatsoever concessions and exemptions are eligible and applicable to the ESI Corporation and shall advise the purchaser and quote accordingly.
24. Customs duty Exemption Certificate will be issued wherever applicable. The Tenderer will assist and undertake all activities related to release for equipments from Customs.
25. **Delivery Schedule** : Within 30 days after placement of supply order. The delivery should be at the place shown by the receiving officer within the premises of the ESI Hospital, Salem at the cost of the supplier. For imported items, an enhanced delivery period, if required can be agreed and the same should be indicated clearly. If the successful tenderer fails to execute the supply within the stipulated period, penalty of 5% of the value of the order will be levied. Failure to execute the supply will lead to cancellation of supply order and the Performance security will stand forfeited.
26. The payment towards the supply is subject to receipt of inspection note/performance certificate to the effect that the items supplied are conforming to the supply order placed.

**SENIOR STATE MEDICAL COMMISSIONER**

**COMPANY PROFILE**

- 1 Name of the firm
2. Full Address:
3. Telegraphic Address/E-mail Id:
4. Telephone No.
5. Telex/Fax No.
6. Date of Establishment of firm:
7. Is Your Firm registered under
  1. The Indian Factories Act
  2. Companies Act
  3. Any other Act
8. Name & address of your Bankers.  
Stating the name in which the  
Account stands  
(Please give Account details)
9. Are you on the list of approved  
Contractors of any other authority  
(if so please give details)
10. Give details of any Govt. contract  
Executed during the last 12 months
11. Are you a Manufacturer. If so  
Please furnish the items you  
Manufacture
12. Are you a small scale industry  
Registered with the appropriate  
Authority. If so furnish details
13. Are your products certified by ISI?  
If so furnish details
14. Any other information which you  
Consider necessary to furnish

DATE

SIGNATURE:

NAME & ADDRESS:

**DECLARATION FORM**

- (i) We .....having our office at.....do declare that we have carefully read all the conditions of Tender for the supply of ..... and abide by all the conditions set forth therein by The Senior State Medical Commissioner, ESIC, T.N., R.O.,Chennai-34.
- (ii) We also declare that we.....possess valid licence bearing No.....valid upto.....
- (iii) We further declare that :
  - (a) The Spares/ consumables/ reagents of the equipment quoted will be freely available at least for five years after the expiry of warranty period.
  - (b) The rates for all the reagents, consumables etc. shall remain constant for five years.
  - (c) The Warranty is Comprehensive, including Spares / Accessories.
  - (d) CAMC rate includes all the Spares , Accessories listed.
  - (e) We undertake to enter into Annual Maintenance Contract (AMC/CAMC) for equipment as well as for accessories attached for a minimum period of five years after completion of warranty period.
  - (f) The quoted items have not been supplied to any other organization/institution at a rate lower than quoted here.

DATE:

SIGNATURE:

SEAL:

NAME & ADDRESS:

From

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To

THE SENIOR STATE MEDICAL COMMISSIONER  
ESI CORPORATION, TAMILNADU,  
REGIONAL OFFICE  
No.143, STERLING ROAD,  
NUNGAMBAKKAM, CHENNAI-34

**Sub: Request for refund of EMD Amount – reg.**

\* \* \*

With reference to your advertisement dated \_\_\_\_\_, we have submitted tender for \_\_\_\_\_ (name of equipment).

In case we are not the successful bidder, we request you to kindly refund the EMD amount of Rs. \_\_\_\_\_. The Cheque may be kindly be drawn in favour of

\_\_\_\_\_  
Beneficiary's Name :  
Account No. :  
A/C Savings Current :  
IFSC Code No. :  
Bank Name :  
Branch Name & Address :

Yours faithfully,

(SIGNATURE & SEAL)

**PRE-RECEIPT**

Received an amount of Rs..... vide cheque No..... dated..... from ESI Corporation towards refund of EMD amount.

**Revenue  
Stamp**

(SIGNATURE & SEAL)

**PRICE BID FOR THE SUPPLY OF MEDICAL EQUIPMENTS**

I/We \_\_\_\_\_ hereby offer to supply medical equipments at ESI Hospital, Salem as per the specifications in the Tender, at the rate given below and agree to hold this offer for one year from the date of approval of tender and for further period if extended.

<b>Sl. No</b>	<b>Name of Medical Equipment</b>	<b>Quantity (in Nos.)</b>	<b>Rate per unit (in Rs.)</b>	<b>Tax (if any)</b>	<b>Total (in Rs.)</b>
1	<b>X-Ray Machine</b> (Dept of Radiology- ESI Hospital, Salem)	1			

**N.B: COST OF ACCESSORIES, IF ANY, SHOULD BE QUOTED SEPARATELY**

**Signature of Bidder with date and seal**

**WARRANTY CERTIFICATE FOR THE SUPPLY OF MEDICAL EQUIPMENT**

I / we \_\_\_\_\_ do hereby undertake to provide warranty for the equipment \_\_\_\_\_ for a minimum period of three years from the date of satisfactory installation and inspection of the said equipment in your Hospital premises.

**Signature of Bidder with date and seal**

**PRICE LIST FOR SPARES**

The following is the list of spares and their rates for use of the equipment \_\_\_\_\_

<b>Sl. No</b>	<b>Name of the Spare part</b>	<b>Unit</b>	<b>Rate per unit (in Rs.)</b>	<b>Tax (if any)</b>	<b>Total (in Rs.)</b>

**Signature of Bidder with date and seal**

**PRICE LIST FOR CONSUMABLES**

The following is the list of consumables and their rates for use of the equipment \_\_\_\_\_

<b>Sl. No</b>	<b>Name of the Consumable</b>	<b>Unit</b>	<b>Rate per unit (in Rs.)</b>	<b>Tax (if any)</b>	<b>Total (in Rs.)</b>

**Signature of Bidder with date and seal**

**PRICE LIST FOR REAGENTS**

The following is the list of reagents and their rates for use of the equipment \_\_\_\_\_

<b>Sl. No</b>	<b>Name of the Reagent</b>	<b>Unit</b>	<b>Rate per unit (in Rs.)</b>	<b>Tax (if any)</b>	<b>Total (in Rs.)</b>

**Signature of Bidder with date and seal**



**QUOTATION FOR AMC / CAMC**

I / We \_\_\_\_\_ do hereby accept to enter into Annual Maintenance Contract (AMC) at a rate not exceeding 3% of the unit cost of the equipment on the date of purchase, per annum, for five years after completion of warranty period. Our AMC rate is as follows:

Year	AMC Price (in INR)	Tax (if any)	Total Price (in INR)
4 <sup>th</sup> year			
5 <sup>th</sup> year			
6 <sup>th</sup> year			
7 <sup>th</sup> year			
8 <sup>th</sup> year			

(OR)

I / We \_\_\_\_\_ do hereby accept to enter into Comprehensive Maintenance Contract (CAMC) at a rate not exceeding 10% of the unit cost of the equipment on the date of purchase, per annum, for five years after completion of warranty period. Our CAMC rate is as follows:

Year	CAMC Price (in INR)	Tax (if any)	Total Price (in INR)
4 <sup>th</sup> year			
5 <sup>th</sup> year			
6 <sup>th</sup> year			
7 <sup>th</sup> year			
8 <sup>th</sup> year			

**List of services and spares in CAMC, are mentioned as below :**

- 1.
- 2.
- 3.
- 4.
- 5.

**Signature of Bidder with date and seal**

**SPECIFICATIONS FOR MEDICAL EQUIPMENTS / INSTRUMENTS**  
**TECHNICAL SPECIFICATIONS - 300 mA X-RAY MACHINE SPECIFICATIONS:**

- **Generator:**

- High Frequency generator.
- Output 24 KW or more
- KV range 35 KV - 125 KV.
- Output to be specified at various KVs.
- Anatomical programming radiography should be possible.
- It should have automatic exposure control device.
- It should have over loading protection.

- **Radiographic Table:**

1. Fixed type radiographic table with bucky and grid
2. Bucky should have a grid ration 8:1 or more.
3. Bucky should hold all standard sizes of cassettes up to 14' x 17'.

- **Vertical Bucky Stand:**

1. Vertical bucky with grid.
2. It should have provision to do chest radiography without grid.
3. The vertical bucky should move up to 30 cms above ground level.
4. The vertical bucky should hold all standard sizes of cassettes up to 14' x 17'.

- **X-ray tubes and Column Stand:**

1. Over couch tube on tube column.
2. The X-ray tube should be rotating anode high speed, compatible with the generator and must have dual focus.
3. Large focus: 1.2 or less.
4. Multi-Leaf Collimator with auto light shut off. Halogen lamp with 100W bulb at least.
5. Tube with anode heat storage capacity 300 KHU or more.
6. Tube rotation at vertical axis and horizontal axis +/- 180 degrees.
7. The column stand should have breaking system with fully counter balanced mechanism.

- **Essential Accessories:**

1. The essential accessories to be provided with the unit. Voltage stabilizer/UPS of required capacity. The capacity and make of the voltage stabilizer should be specified.
2. Two deluxe light weight lead radiation protective aprons.
3. Appropriate size Lead protection screen with lead viewing glass.

- The equipment should have A.E.R.B & CE/FDA type approval certificate.
- Buy back of old 100 mA X-ray Machine to be included.