GOVT. OF WEST BENGAL OFFICE OF THE SUPERINTENDENT, SREE BALARAMSEVA MANDIR S.G HOSPITAL KHARDAH NORTH- 24 PARGANAS, KOLKATA-700116. PH.NO-033-2583-4948/ c-mail- sbsmbalaram@gmail.com

Memo No: SBSMH/18/219 Date: 21/02/2018

NOTICE INVITING QUOTATIONS

Sealed Quotations are invited from eligible bidders / agencies for purchase of 'Computer Sets' (Desktops with multifunction printers, & UPS) along with some additional necessary parts, as per Annexure-III, for Sree Balaram Seva Mandir S.G. Hospital, Khardah, North 24- Parganas. The 'Quotation form' along with 'terms and conditions' may be obtained from the office of the undersigned.

The following items and /or documents are to be submitted along with the Quotations:-Copy of valid Trade license

2) Copy of up-to-date Income Tax.

3) Copy of PAN.

4) Copy of G.S.T. Regn. certificate.

Copy of Professional Tax Certificate.

6) Filled up the Annexure I, II & III(Also enclose attested photo copies as proofs of relevant

Distribution of Bid- forms

: 21/02/2018

Submission of Bid-forms

: 21/02/2018 to 07/03/2018 up to 1:00 p.m. (except Sundays & holidays)

Date of Opening Quotations

: 07/03/2018 at 2:30pm.

The Quotation documents in scaled envelopes should be dropped in the QUOTATIONS' BOX kept in the

Terms and conditions:-

- Quotations without any above listed documents will be treated as invalid.
- Three copies of challans & Bills should be submitted at the time of supply.
- 3) The competition among the bidders, shall be on the lowest rate, of any said particular item, which should always be lower than the M.R.P.
- 4) The M.R.P. of any given item shall always be in parity with the local market price.

The Purchase committee shall reserve the right of acceptance or cancellation of any Quotation, even if it being the lowest, without assigning any reason thereof. The purchase committee also reserves the right to withhold payment, if the work done is not satisfactory.

Superintendent 21/0/18 Sree Balaram Seva Mandir S.G Hospital Khardah North - 24 Parganas

Superintendent Sree Balaram Seva Mandir S.G. Hospital Khardah North 24 Parganas

Page 1 of 2

Memo No: SBSMH/18/219/1(11)

Date: 21/02/2018 Copy forwarded for information & necessary action, requesting to exhibit this notice on their respective

- 1) The Director of Health Services, West Bengal, Swasthya Bhawan.
- The District Magistrate, North 24- Parganas.
- The Chief Medical Officer of Health, North 24- Parganas.
- 4) The District Informatics Officer, National Informatics Centre, Office of the District Magistrate,
 - (He/She is requested to upload this 'Notice Inviting Quotation' to the official website)
- The S.D.O., Barrackpore Sub- Division, North 24- Parganas.
- 6) The Asstt. Chief Medical Officer, Barrackpore Sub- Division, North 24- Parganas.
- The Chairman, Khardah Municipality, North 24- Parganas.
- The Inspector-in-charge, Khardah Police Station, Khardah, North 24 Parganas.
- The Station Master, Khardah Railway Station, Eastern Railways Division.
- 10) The Post Master, B.D.Sopan Post-office, Khardah.
- 11) Office Copy.

Superintendent 24/02 Sree Balaram Seva Mandir S.G Hospital

Khardah North - 24 Parganas

Superintendent Sree Balaram Seva Mandir S.G. Hospital Khardah North 24 Parganas

Annexure - I

Superintendent Sree Balaram Seva Mandir S.G. Hospital Khardah North 24 Parganas

APPLICATION FORM FOR OUGTATION

AFTL	ICATION FORM FOR QUOTATION
 Name of the firm 	
2. a. Full Postal Address	
b. Cell Phone No.	
c .Telephone No.	
d. e-mail address	:
 Trade license no. (Renewed) 	:2
4. Any other information wh	ich you consider necessary to furnish: <u>UNDERTAKING</u>
a) I, the undersigned, certify in the Quotation document and b) The rates quoted by me are and also during any extension p	that I have gone through the terms and condition mentioned undertake to comply with them. valid and binding upon me for the entire period of contract, period, if required.
Date:	Signature of the Quotationer
Place:	T. II.

Full Name:-

Designation:-

(Office seal of the Quotationer)

Bid Form

Annexure-II

Superintendent Sree Balaram Seva Mandir S.G. Hospital Khardah North 24 Parganas

All points are to be filled up; no places are to be kept vacant. For statutory clearances/registrations not applicable, mention "NOT APPLICABLE" instead of keeping blank.

	a weeking orank.
Name of the Item	T
Name of the hospital, quotatione for, with addresses	
Quotation Notice Memo, Number	KHARDAH,24PGS(N), Kolkata-700116
Due date of the submission of the Quotation	е
Name / Title of the Bidder	
Full Address	
	E-Mail
	Tel. No & Mobile No.
	Fax
Local Addresses, if any	
Legal entity of the bidder whether Firm / Society / Company / Other entity	
Relationship of the applicant with	
SST Registration No.	* *
Trade License No.	
ranted by	
or the purpose of	
Name & Address of the Banker of the	bidders
Professional Tax Registration No.	
Source (10)	

Superintendent Sree Balaram Seva Mandir S.G. Hospital Khardah North 24 Parganar

	Milaiva	I INVITE 44 E GEGORIA
Whether provided similar services to state Government Hospitals, Quotationed for in past. If yes indicate the Work order No. & Date	Yes	No
Blacklisted by any government authority at any time. If yes, provide details	Yes	No
Income Tax Return for last year attached	Yes	N _e
Professional Tax Registration	Yes	No
I have gone through the street	105	No

I have gone through the eligibility criteria for participating in the Quotation and certify that all the conditions have been fulfilled.

I have read the General and Special Terms and Conditions, including the penal provisions, as given in the Quotation documents. I have accepted them and agree to abide by them.

Certified that the above information is correct and true to the best of my knowledge and belief. Nothing has been concealed, falsified & fabricated, and in case, any information is found incorrect, I, the undersignatory will be personally responsible for the same.

The supporting documents (photocopies) regarding all the above furnished informations are being attached herewith, and the originals shall be exhibited at the time of opening of the BID.

Date;	
	*
	•
	Signature
	Name of authorized person for bidder with seal

Specification with configuration of the items, as per requirement.

Superintendent
Stee Balaram Seva Mandir S.G. Hospital
Khardah North 24 Parganas

SL. NO.	NAME OF THE ITEM	CONFIGURATION	DD1 GE
		200-076	PRICE/UNTI
1.	PROCESSOR	i3 (7th generation)	
2.	MOTHER BOARD	GIGABYTE	
3.	RAM	4GB, DDR4	
4.	HARD DISK		
5.	DVDRW	1 TB	
6.	MOUSE & KEYBOARD	ASUS	
7.	CARDER		_
	CABINET	FOXCIN	
8.	MONITOR	AOC	
	in	(18.5" LED WITH 3 YEARS'	
_		WARRANTY)	
).	UPS	APC-600 AV	

SL. NO.	NAME OF THE ITEM	NAME OF THE COMPANY	PRICE/UNIT
1.	2 NOS. OF MULTIFUNCTION LESER JET PRINTERS (BLACK & WHITE)	CANON	TRICISONI

C)

SL. NO.	NAME OF THE ITEM	CONFIGURATION	PRICE/UNIT
1.	2 NOS. OF EXTERNAL HARD DISKS	ITB	

D)

SL. NO.	NAME OF THE ITEM	CONFIGURATION	PRICE/UNIT
	5 NOS. OF UPS	APC-600 AV	
2.	RAM	2GB DDR-2	

Date:

Signati	tre .	
Parent		

Name of authorized person for bidder with scal