INVITATION LETTER

Package Code: TEQIP-III/2019/mlt/112
Package Name: Hydraulic Pressure Calibrator
Current Date: 26-Nov-2019
Method: Shopping Goods

To,
Address (Firm)

Sub: INVITATION LETTER FOR HYDRAULIC PRESSURE CALIBRATOR

Dear Sir,

1. You are invited to submit your most competitive quotation for the following goods with item wise detailed specifications given at Annexure I,

<table>
<thead>
<tr>
<th>S.No</th>
<th>Item Name</th>
<th>Quantity</th>
<th>Place of Delivery</th>
<th>Installation Requirement (if any)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Hydraulic Pressure Calibrator</td>
<td>1</td>
<td>Department of Mechanical Engineering, NIT Trichy 620015</td>
<td>Yes.</td>
</tr>
</tbody>
</table>

2. Government of India has received a credit from the International Development Association (IDA) towards the cost of the Technical Education Quality Improvement Programme [TEQIP]-Phase III Project and intends to apply part of the proceeds of this credit to eligible payments under the contract for which this invitation for quotations is issued.

3. Quotation

3.1 The contract shall be for the full quantity as described above.

3.2 Corrections, if any, shall be made by crossing out, initialling, dating and rewriting.

3.3 All duties and other levies payable by the supplier under the contract shall be included in the unit Price.

3.4 Applicable taxes shall be quoted separately for all items.

3.5 The prices quoted by the bidder shall be fixed for the duration of the contract and shall not be subject to adjustment on any account.

3.6 The Prices should be quoted in Indian Rupees only.

4. Each bidder shall submit only one quotation.
5. Quotation shall remain valid for a period not less than 60 days after the last date of quotation submission.

GST 5% - as per column (4) II under notification no.45/2017 Central Tax - (Rate), Date. 14.11.2017 Notification no.46/2017 integrated Tax – (Rate), Date. 14.11.2017.

6. Evaluation of Quotations: The Purchaser will evaluate and compare the quotations determined to be Substantially responsive i.e. which

6.1 are properly signed; and

6.2 Confirm to the terms and conditions, and specifications.

7. The Quotations would be evaluated for all items together.

8. Award of contract The Purchaser will award the contract to the bidder whose quotation has been determined to be substantially responsive and who has offered the lowest evaluated quotation price.

8.1 Notwithstanding the above, the Purchaser reserves the right to accept or reject any quotations and to cancel the bidding process and reject all quotations at any time prior to the award of Contract.

8.2 The bidder whose bid is accepted will be notified of the award of contract by the Purchaser prior to expiration of the quotation validity period. The terms of the accepted offer shall be incorporated in the purchase order.

9. Payment shall be made in Indian Rupees as follows:

<table>
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<tr>
<th>Payment Description</th>
<th>Expected Delivery Period (In Days)</th>
<th>Payment Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Satisfactory Delivery &amp; Installation and Satisfactory Acceptance</td>
<td>60</td>
<td>100</td>
</tr>
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</table>

10. Liquidated Damages will be applied as per the below:

Liquidated Damages Per Day Min %: N/A
Liquidated Damages Max %: N/A

11. All supplied items are under warranty of 12 months from the date of successful acceptance of items and AMC/Others is No.

12. You are requested to provide your offer latest by 15:30 hours on 17-Dec-2019. Opening time :-17 December 2019 16.00 hours at TEQIP Office, Administrative Building, NIT Trichy.

13. Detailed specifications of the items are at Annexure I.

14. Training Clause (if any) one Day Training And Demo

15. Testing/Installation Clause (if any) Installation at Department of Mechanical Engineering, NIT Trichy.
Information brochures/ Product catalogue, if any must be accompanied with the quotation clearly indicating the model quoted for.

Sealed quotation to be submitted/ delivered at the address mentioned below, Head of the Department, Mechanical Engineering, National Institute of Technology, Tiruchirappalli, Tamil Nadu- 620015.

Kind Attn: Dr. K. R. Balasubramanian

We look forward to receiving your quotation and thank you for your interest in this project.

Note: The cover should be duly superscribed
(1) Quotation Reference Number
(2) Quotation for the Supply of ___ ___ ___
(3) Date of opening ___ ___ ___

(Dr. S.P. Sivaprakasam)
HoD/ Mech. Engg

Annexure I

<table>
<thead>
<tr>
<th>Sr. No</th>
<th>Item Name</th>
<th>Specifications</th>
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<tbody>
<tr>
<td>1</td>
<td>Hydraulic Press</td>
<td>Specifications Requirement Pressure Range 0 to 10,000 psi (700 bar) Test Port Adapters (2 sets) 1/8, 1/4, 3/8 and 1/2 NPT or BSP Instrument Size (W x D x H) 11 x 11 x 10 in or less Instrument Weight 5 kg or less Reservoir Volume 75 cc Screw Press Displacement 20 cc O ring material Nitrile</td>
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</table>
FORMAT FOR QUOTATION SUBMISSION
(In letterhead of the supplier with seal)

Date: 

To: 

<table>
<thead>
<tr>
<th>Sl. No</th>
<th>Description of goods \ (with full Specifications)</th>
<th>Qty.</th>
<th>Unit</th>
<th>Quoted Unit rate in Rs. \ (Including Ex-Factory price, excise duty, packing and forwarding, transportation, insurance, other local costs incidental to delivery and warranty/ guaranty commitments)</th>
<th>Total Price \ (A)</th>
<th>Sales tax and other taxes payable \ (In %)</th>
<th>In figures \ (B)</th>
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Total Cost

Gross Total Cost \ (A+B): Rs. ____________________

We agree to supply the above goods in accordance with the technical specifications for a total contract price of Rs. ____________________ \ (Amount in figures)
(Rupees ____________________ amount in words) within the period specified in the Invitation for Quotations.
We confirm that the normal commercial warranty/ guarantee of _________ months shall apply to the offered items and we also confirm to agree with terms and conditions as mentioned in the Invitation Letter.
We hereby certify that we have taken steps to ensure that no person acting for us or on our behalf will engage in bribery.

Signature of Supplier
Name: ____________________
Address: ____________________
Contact No. ____________________