



ASSAM UNIVERSITY: SILCHAR

Expression of Interest

No: Med/1/2016 dated 13.12.2016

Expression of Interest (EOI) invited from the reputed medicine/chemical/pharmaceutical consumables Distributor/ Stockiest for empanelment of vendor for supply of medicines, chemicals, reagents and other pharmaceuticals consumables items for the Assam University Health Centre, Silchar. Interested vendors/parties may contact the Sr Medical Officer, Assam University Health Centre, Silchar 788011 for details and or visit University website www.aus.ac.in. Last date of submission of EOI is **09.01.2017 upto 3.00 pm**

Registrar



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Assam University, Silchar invites Expression of Interest (EOI) from the reputed medicine/chemical/pharmaceutical consumables Distributor/ Stockiest for empanelment of vendor for supply of medicines, chemicals, reagents and other pharmaceuticals consumables items for the University Health Centre, Silchar. The interested vendors having Permanent Account Number (PAN), VAT registration and valid Drug License/ Stockiest License issued by the appropriate authority may submit their duly signed & sealed proposals with profiles and experiences in annexure-I to **the Sr. Medical Officer, Assam University Health Centre, Silchar-788011** on or before **09.01.2017 upto 3.00 p.m.** and will be opened on **09.01.2017 at 4.00 pm** Interested parties may contact the Sr. Medical Officer, Assam University Health Centre, Silchar for details.

Terms and conditions of submission of EOI & supply of medicine etc:

1. The medicine being supplied should be of latest lot and should have sufficient time for expiry.
2. The medicines shall be sold/ supplied as per distributors/ wholesalers rate with admissible discount/ bonus, if any.
3. The medicines supplied must be as per the requirement places by the Medical Officer of the University Health Centre.
4. Ordered items are required to be delivered free of freight charges in Assam University, Silchar campus in good condition within seven days and during emergency within three days from the date of issue of supply order.
5. TAX shall be deducted at source. However, supplier may submit Tax payment certificate from the competent authority, if already paid.
6. Distributor's price list duly signed by the supplier is to be submitted along with the bill.
7. The EOI should reach to **the Sr Medical Officer, Assam University Health Centre, Silchar-788011** on or before **09/01/17** up to 3.00 PM duly superscribe with EOI No. and date in a sealed envelope. **The EOI** will be opened on **09.01.2017 at 4.00 pm**. In

case last date of submission and opening happens to be a closed holiday for any unforeseen reason, the process will take place on next working day.

8. The rates should be kept open /valid for a period of 90 days from the date the EOI are opened.
9. Tentative amount of purchase of medicines/chemicals/reagents/pharmaceutical consumables in one year shall be approximately Rs 12.00 lakhs.
10. The shortlisted vendors shall be required to enter into an agreement with the University before commencement of the contract in Non-Judicial stamp paper of Rs 100.00 valid for one year .The cost of stamp paper is to be borne by the party/supplier.
11. Each EOI should be accompanied with an EMD/Bid security amounting to Rs 5,000.00 by way of demand draft/FDR drawn in favour of Assam University, Silchar failing which the EOI shall not be considered for acceptance and will be out rightly rejected. The EMD/bid security of the approved vendor will be retained in the form of performance security till agreement period, as applicable.
12. Terms and conditions of EOI and supply will be also a part of the agreement as stated at sl no 10 above.

No. 28/AUS-HC/Drugs/15-16/ Vol-IV

Copy to:

1. The Director, Computer Centre, Assam University, Silchar with a request to upload the same in the University website.
2. Notice Board
3. File

Registrar

Date: 13.12.2016

Registrar

[Annexure-I]

VENDORS PROFILE

[To be submitted in original letter head/original stationary]

DETAILS OF THE DISTRIBUTOR/ STOCKIEST:

1. *Name of the distributor/ stockiest* :
2. *Name and Address of the Proprietor* :
(including Phone/Mobile no.)
3. *Office address & contact person name* :
(including Phone/Mobile no.)
4. *Details of Past Experiences of similar nature of supply*
, if any :
5. *Drug License details* :
6. *TIN No/ CMR No/CIN Regn.* :
7. *VAT Registration Certificate* :
8. *Permanent Account Number (PAN)* :
9. *Bank A/C Number with Bank details* :

10. E-mail ID _____ :

11. Name of companies authorised for distributorship/stockiest:
(Copies of authorisation letter must be enclosed)

12. Rate of discount offered on companies/manufacture approved price list (in % percentage):

13. Details of EMD/Bid security amounting to Rs 5,000.00:

Date: _____

(Vendor Seal)

Signature : _____

Name : _____

Mobile No : _____

[Use separate sheets if necessary]