



thsti

ट्रान्सलेशनल स्वास्थ्य विज्ञान
एवं प्रौद्योगिकी संस्थान

TRANSLATIONAL HEALTH SCIENCE
AND TECHNOLOGY INSTITUTE

(An autonomous Institute of Dept. of Biotechnology, Ministry of Science & Technology, Govt. of India)
Bioscience cluster 3rd mile stone Faridabad Gurgaon Expressway Faridabad
PHONE No. : 0129-2876421 FAX: 0129-2876 402 Web Site : www.thsti.res.in

NOTICE INVITING QUOTATION

Ref. of NIQ:- THSTI/Engg./Faridabad/NABL-CAL/24-25/01

Dated: -22/07/2024

Name of work:- Annual Rate Contract for NABL Calibration of Scientific Lab Equipments installed under THSTI Faridabad, Haryana.

Sealed quotations are invited on behalf of the Executive Director, THSTI from reputed firms/ agencies for the of work of "**Annual Rate Contract for NABL Calibration of Scientific Lab Equipments installed under THSTI Faridabad, Haryana**" as per enclosed schedule of work and terms & conditions as below:

| S. No. | Name of Work | EMD | Tender Fees | Estimated Cost | date of upload of quotation | Last date/time of submission of quotation | Date/Time of opening of quotation | Completion Period |
|--------|---|-----|-------------|----------------|-----------------------------|---|-----------------------------------|-------------------|
| 1 | Annual Rate Contract for NABL Calibration of Scientific Lab Equipments installed under THSTI Faridabad, Haryana | Nil | Nil | Rs.3,50,000/- | 22/07/2024 | 02/08/2024 2:00 PM | 02/08/2024 3:00 PM | 01 year |

Terms & conditions: -

1. The agency should have NABL authorization for the execution of calibration of scientific equipments and copy of same enclosed in Annexure-2
2. The agency will execute the work by calibrated and validated master equipments and provide the valid certificate, copy of same enclosed in Annexure-3
3. The work shall be carried out as per direction & recommendation of the Engineer-In-Charge.
4. The rates are Net inclusive of all taxes; duties etc. and nothing Extra shall be paid.
5. Income Tax etc. will be deducted as applicable on the value of work done.
6. The deviation limit shall be $\pm 10\%$.
7. The contractor is required to follow all labour laws, Minimum Wages Act and other provision to labour welfare applicable from time to time. Nothing extra shall be paid for the same.
8. The work shall be executed without any loss/damage to THSTI properties etc.
9. Any damages occur during the execution of work, the same should be rectified by the contractors on their own cost.
10. Contractor shall be fully responsible for safety of his workers and in case of any misshaping the entire responsibility shall be on the contractor.
11. The Contractor shall clean the site after completion of work in all.
12. The dismantled material shall be returned to THSTI if any.
13. Liquidated damages shall be lived on the Contractor @1% per week of delay to the maximum up to 10% of the contract value after expiry of completion period as stipulated in NIQ
14. The rates are inclusive of 1 Year.
15. Terms of Payment: 90 % of Contract Value after Completion of Work
16. 10% Security deposit on work done value shall be deducted from the bill which shall be refunded as below after satisfactory completion of work of warrantee period i.e. 1 Year.
17. MSME supplier will be exempted EMD or tender fees.

Note: - The agency should quote their rate in their original letter head along with signature & seal of agency.

Thanking You,

Yours faithfully

Contractor sign with Seal

Engineer (IEE)

CERTIFICATE FOR SITE INSPECTION

Certified that we..... (Name of agency) have inspected all make of biosafety cabinets installed on site on dated..... and assessed the nature and amount of work involved before submitting our offer. We will be able to complete the works of all make of biosafety cabinets within the stipulated time and also certified that we will be able to supply the material/executing the work as per specification to suit the site conditions.

**Address of site: - NCR-Biotech Science Cluster at THSTI
3rd mile stone Faridabad Gurgaon Expressway
Faridabad Haryana-121001**

**ENGINEER IN- CHARGE,
THSTI**

Signature of tenderer with Seal & Date

NABL Registration Certificate

Annexure-3

Validation Certificate of Master Equipment used for Validation and Calibration of Equipments.

Annexure-4

The tenderer provides the following detail along with their quote/bid-:

Details of Firm

1. Name of the Firm / Company:
2. Registered Address:
3. Address for Communication:
4. Contact Information
5. Office Phone Number:
6. Residence Phone Number:
7. Mobile Number:
8. Fax:
9. E-Mail:
10. The detail of electrical licence (Copy attached)
10. Status of the Firm:

(Please tick appropriate box & attach proof)

Company

Partners

Year of Establishment:

Registration Details

Companies / Firm Registration Number & Date:

Income Tax PAN No.:

Goods & Service Tax No.:

(attach proof)

Signature of tenderer with Seal & Date

Detail of Similar Work Experience

Undertaking for non-blacklisting

