

To,

The Dean, PPF

BYL Nair Ch. Hospital

Mumbai – 400008

**Subject: Purchase of Intra-Aortic Balloon Pump (IABP) Machine for the Department of CVTS**

I/We \_\_\_\_\_ (Address \_\_\_\_\_) as per the Expression of Interest advertised by B.Y.L. Nair Hospital, Mumbai regarding the purchase of an Intra-Aortic Balloon Pump (IABP) machine for the Department of CVTS. The IABP machine is essential for perioperative cardiac support in high-risk cardiac surgeries and postoperative management. Approximately 450 cardiac surgeries are performed annually in the CVTS department, necessitating availability of advanced circulatory support equipment.

We will comply with all the rules and conditions of MCGM regarding the procurement process and are willing to supply the equipment with 3 years warranty and 7 years CMC. Enclosed below are the company details:

Name of the Company: \_\_\_\_\_

Address & Contact No.: \_\_\_\_\_

GST No.: \_\_\_\_\_

Company PAN No.: \_\_\_\_\_

Name of Equipment: Intra-Aortic Balloon Pump (IABP) Machine

Name of the Manufacturing Company: \_\_\_\_\_

Company Bank Details:

- Bank Name: \_\_\_\_\_
- Account No.: \_\_\_\_\_
- IFSC Code: \_\_\_\_\_
- Branch Address: \_\_\_\_\_

I/We have carefully gone through the instructions provided in the application form and the relevant documents to be uploaded in both packets and are ready to participate in this process. The terms and conditions mentioned therein are acceptable and agreeable to me/us.

**Name of the Company:**

**Authorized Person Name & Contact Details:**

**Full Signature of the Tenderer:**

**with Official Seal**

## **General Instructions**

### **Documents to be submitted in Packet A:**

- 1 A copy of Expression of Interest with sign and stamp
- 2 Duly filled application form with sign and stamp
- 3 Details of the equipment along with accessories without disclosing the rates (Annexure I)
- 4 Quotation in the prescribed format without disclosing the rates (Annexure II)
- 5 Authorization letter in case of bidder quoting for the equipment
- 6 Technical brochure of the equipment
- 7 Copy of CE certificate or valid US FDA certificate

### **Documents to be submitted in Packet B:**

- 1 Quotation in the prescribed format (Annexure II) with rates

## **Annexure I**

### **Details of the Equipment along with Accessories (To be uploaded with packet A)**

<b>No.</b>	<b>Description of Item</b>	<b>Make &amp; Model</b>	<b>Qty</b>
1	Intra-Aortic Balloon Pump (IABP) machine with standard accessories		1 No.
2A	Monitor/Display unit (if separate)		1 No.
2B	Starter kit/essential disposables		As required

**Full Signature of the Tenderer:**

**with Official Seal**

**Annexure II**  
**Quotation Format**  
**(To be uploaded in Packet A on company letter head without disclosing the rates)**

No.	Description of Item	Qty	Rates (INR)
1	IABP machine with standard accessories and 3 years warranty	<b>1 No.</b>	
2	GST		
	<b>Total Cost</b>		

No.	Description of Item	Rates (INR)
	Cost of CMC after completion of three year warranty for the next 07 years	
	GST	
	Total Cost	

**Terms and Conditions**

- 1 Validity
- 2 Payment Terms
- 3 Delivery
- 4 Warranty: 3 years
- 5 CMC: Charges for 7 years (@5% of cost of instrument) to be provided in the above table
- 6 Installation charges
- 7 Transportation charges
- 8 Any other charges (if any)
- 9 Training:

**Full Signature of the Tenderer:**

**with Official Seal**

**Annexure II**  
**Quotation Format**  
**(To be uploaded in Packet B on company letter head with the rates)**

No.	Description of Item	Qty	Rates (INR)
1	IABP machine with standard accessories and 3 years warranty	<b>1 No.</b>	
2	GST		
	<b>Total Cost</b>		

No.	Description of Item	Rates (INR)
	Cost of CMC after completion of three year warranty for the next 07 years	
	GST	
	Total Cost	

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