ANNEXURE-I-A







DEPARTMENT OF PHYSICS, IIT(BHU), VARANASI QUOTATION ENQUIRY

Ref: IIT (BHU)/Physics/QTN/2020-21/170

Date: 05-02-2021

Posting Date: 05-02-2021 Tender Closing Date: 26-02-2021 Tender Opening Date: 01-03-2021

Dear Sir,

Please submit your lowest quotation for supplying the under mentioned items. Quotation in **duplicate** must reach us before the date marked above and should contain the following information:

- 1. Full specification and make of the item offered and its rate F.O.R. Varanasi/CIF New Delhi.
- 2. Sales tax at concessional rate as applicable to educational institution.
- 3. Your VAT/CST registration number, PAN and TIN number.
- 4. Conditions of supply and terms of payment.
- 5. If you are a manufacture of the item or if you have proprietary right over it, please mention it in the quotation and provide a certificate.
- 6. Please mention your agency commission in Indian Rs., if applicable (in case of imported items).
- 7. Please give undertaking as per annexure-I-B

Quotation must be sent in a **sealed envelope** with word "**QUOTATION**", our reference number, and due date as given above, clearly marked over it.

Sl. No	Name of Items	Name of Items Description/Technical Specification			
1.	Gamma Ray Spectrometer	Details specification is attached	01		
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N.B.: Other terms & conditions pertaining to item mentioned above shall be mentioned below:

The	Sealed	quotations	will	be	opened	on	<u>01-03-2021</u>	at	4.00	PM	in	the	office	of
							.(This is mand	atory	in case	e of e-p	oublis	hing).		

Head of the Department HEAD/ विभागाध्यक्ष भौतिकी विभाग/Deptt. of Physics भा०प्री०सं०/ (काबहिलवि०)/भग (BHU) वाराणसी/Vara#asi-221005

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Specification:

S. No.	Description and Specifications							
1.	 NaI scintillator detector : a) 2 " X 2 " well type with built in preamplifier. b) Operating voltage : 600 - 1000 V c) Resolution : 8-10% or better at 500 -700 keV gamma energy d) Stand for detector 							
2.	 Mini Bin and power supply : a) Should accommodates atleast 6 Standard modules b) Regulated DC output: ±12 V @ 1.5 A, ±24 V @ 0.75 A, and may be more (for example ±6 V @ 4 A) c) Noise and Ripple : less than 3 mV d) Power supply (High voltage module) : Output voltage should be continuously variable and should range up to atleast 2000 V with output ripple less than 10 mV -20 mV rms value. Output polarity may be positive or negative. e) Linear Amplifier : Input polarity can be positive or negative. e) Linear Amplifier : Input polarity can be positive or negative. f) Single Channel Analyzer : Input may be of unipolar or bipolar type. Output pulse polarity may be positive or negative depending upon the specifications. Should have variable window width with at least 0-1 V window mode and 0 - 10V normal mode. g) Counter/Timer : Should be in compliance with the above modules. 							
3.	Lead Shielding for 2 " X 2 " detector system : Should be in compliance with the provided detector dimension and peripheral components like connectors and cables.							
4.	Gamma ray sources : one each of Cs-137, Co-60, Ba-133, C0-57 and Na-22 with activity in accordance to the government norms.							
5.	Necessary connectors and cables							

5.2.2021

HEAD/विभागाध्यक्ष भौतिकी विभाग/Deptt. of Physics भार्व्योव्संo/(कार्वहेव्विर्व)/IIT (SHU) वाराणसी/Varanasi-2210 Diwowiest oslos (zost

ANNEXURE-I-B

INDIAN INSTITUTE OF TECHNOLOGY (BHU) VARANASI

TO BE RETURNED

Following proforma should be filled in and duly signed by the firm and sent alongwith the quotation. (Please refer to the detailed instructions/notes before filling this proforma).

1.	Validity of the offer				
2. 3.	Approximate Delivery Period (a) Whether rates have been quoted F.O.R. site and				
	covers packing forwarding and insurance charges.	:	YES / NO		
	(b) If not, please mention the same	:			
4.	(a) Whether the prices are inclusive of Sales Tax and other taxes.	:	YES / NO		
	(b) If not, kindly specify the amount / rate	:			
5.	If the Sales Tax is charged extra, declaration for charging Sales Tax correctly attached.	:	YES / NO		
6.	(a) Whether supply will be made directly or through any Local / Regional / Authorized Dealer / Stockist	:Directly/Stockist/Authorized Dealer			
	(b) If through a Stockist / Dealer: -				
	(i) Name and full address of the Party	:			
	(ii) Whether the order to be placed with the	:	Principal / Stockist / Dealer		
	(iii) Who will raise the bill	:	Principal / Stockist / Dealer		
	(iv) Cheques will be drawn in favour of	:	Principal / Stockist / Dealer		
	(v) Whether any Delivery, Packing and Forwarding		YES / NO		
	Charges will be payable to local Stockist/Dealer:(Plea	se spec	cify the amount/percentage etc, if any)		
7.	Our terms of payment (Please indicate your preference payment terms are likely to be accepted.	e by a ((\checkmark) mark). Please note that no other		

(a) For Local Firms or if the bills are raised by the Local Dealers.

(i) 100% Payment on bill basis

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OR

- (ii) 100% payment against Proforma Invoice after
- receipt of materials in good condition, installation and satisfactory report. (Only under exceptional cases)

	(b) If the bills are raised by outstation Firms		
OR	(i) 100% Payment on bill basis	:	
	0% payment against Proforma Invoice after receipt of materials in good condition, installatio	on	
OR	and satisfactory report	:	
(iii)D.0 OR	G.S. & D. Terms of Payment for D.G.S. & D Rate Contract items	!	
	(iv) 75% against Proforma Invoice (at site) or documents through Bank and 25% after receipt of materials in good condition, installation and		
0.0	satisfactory report.	:	
OR	(v) 90% payment against Proforma Invoice (at site) or documents through bank and 10% after recein of materials in good condition, installation and satisfactory report (Only under special Circumstances).	pt	
1.		t	YES / NO %
2.	Whether any installation charges are payable extra. If yes, amount to be specified.		YES / NO
3.	, service equilibrium motifation	: :	YES / NO
	Please mention the amount / percentage.	: .	
4.	Whether the product is on DGS &D/D.I. Rate contract. If yes, please enclose a photocopy of the same.		YES / NO
5.	Whether the product bears I.S.I. Mark. If yes, please mention the I.S.I. License no.	:	YES / NO
6. If y	(a) Whether the firm is Sales Tax payer. yes, please mention the Sales Tax Numbers. :	:	YES / NO
	 (b) Whether the Local Dealer(s) is / are Sales Tax payer(s) If yes, please mention the Sales Tax numbers of each 	: :	YES / NO
7.	Whether printed / authenticated price list of the Firm's	:	YES / NO

Signature of the Authorised Official with Seal

TO BE RETURNED WITH QUOTATION

UNDERTAKING

WE HEREBY UNDERTAKE THE FOLLOWING:

- 1. We will not sell the product (s) to other institutions, bodies and also in the market on the rates less than those quoted by us to the Institute.
- 2. The goods on which Sales Tax has been charged are not exempted for payment of Sales Tax under C.S.T. Act or U.P.S.T. Act or the rules made there under and the amount mentioned on account of Sales Tax on goods is not more than what is payable under the provisions of the relevant Act or Rules made there under.
- **3.** The rate of Excise Duty mentioned in the quotation is in accordance with the provisions of the rules and the same is payable to the Excise Authorities in respect of the stores.
- 4. The goods / Stores / articles offered shall be of the best quality and workmanship and their supply will be strictly in accordance with the technical specifications and particulars as detailed in the quotation.
- The information furnished by us in the quotation is true and correct to the best of our knowledge and belief.
- 6. We have read and understood the rules, regulations, terms and conditions and agree to abide by them.

Authorised Signatory (Seal)