



UNIVERSITY OF ALLAHABAD
Limited Tender Enquiry (LTE)

Quotation Ref. No.: SPC/22 /2022

Date: 10 .01.2023

To, _____

Dear Sir/Madam,

We intend to purchase following materials/items for TATA Winger BLS (Basic Life Support) Ambulance (01 qty) for **University Health Centre, University of Allahabad.**

Technical Specification of Ambulance is as under:

Specification	Sub-Spec	Value
Description	Description	Road Ambulance or Ambulance is a specially equipped and ergonomically designed vehicle for transportation / emergent treatment of sick or injured people and capable of providing out of hospital medical care during transit /when stationary, commensurate with its designated level of care when appropriately staffed
	Type of Ambulance	Type B (as per clause 3.3.2 of AIS:125 Part-1)
	Category of Vehicle	M2
	Vehicle Engine Capacity	2179
	Type of Fuel	Diesel
	Vehicle Emission Complainece	BS VI
	Colour of the Vehicle	White
	Vehicle Mileage (declared by OEM as certified by Test Agency under Rule 115of CMVR 1989) (Kmpl)	13.5
	Top Speed	110
	Acceleration(0-70Kmph)	34.5
	Gradeability of Vehicle	14.5
	Air Conditioning	Whole Ambulance
	Engine BHP	99
	Rated RPM at Max Engine BHP	3750
	Engine Torque Max (N-m)	200
	Rated RPM at Max Engine Torque	1000
	Type of Vehicle Body	Monocoque
	No of Doors	3
	Fuel Tank Capacity	60

Generic Vehicle parameters	Length of Vehicle Body	4940
	Width of Vehicle Body	1905
	Height of Vehicle Body	2670
	Ground Clearance(road Clearance from floor)	180
	Wheel Base	3200
	Kerb Weight	2053
	Gross Vehicle Weight	3033
	Type of Tyre and Tube	BIS marked Pneumatic Tyres and tubes for both front and rear
	Size Of Tyre	195R15-Radial
	Vehicle Transmission System	Manual
	No of Speed/ Forward Gears	5
	Type of Wheel drive	Two Wheel drive
	Drive Axle	Front
	Type of Steering	Power
	Turning Radius	6400
	Front Vehicle Brake	Disc Brake
	Rear Vehicle Brake	Drum Brake
Ambulance Body	Vehicle Air Intake System	Turbocharged
	Vehicle features	Vehicle Brake ABS Fitted, Day & Night View Mirror, Low Fuel warning Light
	Patient Compartment	As per cl. 4.5 of AIS 125 Pt I
	Overall Length of Patient Compartment	2650
	Overall Width of Patient Compartment	1630
	Overall Height of Patient Compartment	1900
	Construction of Patient Compartment	The ceiling, the material of floor and side shall be non-permeable and resistant to disinfectant
	Body Main Structure Shape and Material	NA for Monocoque
	Size of Section	NA for Monocoque
	Exterior Panel of side body and roof	NA for Monocoque
	Interior Panel of side body	GI sheet of thickness 0.8 mm min, FRP paneling, ABS paneling with Anti bacterial material
	Interior Panel of roof	GI sheet of thickness 0.6mm ,min
	Flooring Material	Flooring Made Out from ISI Marked 12 mm thick FR grade plywood covered with vinyl sheet

	Openings (Doors, Windows, Emergency Exits)	AS per cl. 4.4.5 of AIS 125 Pt I
	Number of Seats (including driver)	11
	Number of stretcher	1
	Min Number of Patient and Attendant Seats	1
Main Equipments	Features of Main Stretcher	Stretcher with minimum of two quick-release patient restraints.
	PROVISION FOR MEDICAL DEVICES	Mounting for portable Oxygen cylinder of 2.2 L water capacity, Hook for infusion mounting, Storage for keeping first aid and nursing kit
	Type of Patient Handling Equipment	Main stretcher with undercarriage, Oxygen Cylinder Bracket, I.V. Bottle Hanging Hook, First Aid Box in side of rear saloon
	Ambulance Features	Medical cabinet in side of rear saloon, Roof revolving light, Siren, Fire Extinguisher as per AIS 125 PT I
Electrical Requirement	Additional Electric Load of Medical Equipment ϵ^{TM} s permissible (Watts) as per AIS 125 (Part-1)	120
	Number of battery(ies) provided other than the vehicle battery	NA
	Additional Battery Capacity	NA
	Alternator Power	NA for type B
	Min no of 12V connections for medical devices in patient's compartment	NA
	Min number of 220V AC power supply connections for medical devices in patient compartment	NA
Environment Testing	Environment Testing Compliance	Flammability Test as per IS 15061: 2002 (as applicable), Interior fitting compliance as per AIS-047 established, Air conditioning and Heating Performance Tests (Clause 4.5.4 as per AIS 125 Pt I) Compliance, Acceleration Test (Clause 4.2.1 per AIS 125 Pt I and IS:11851-2002) Compliance, Water Proofing Test (IS:11865-1995) Compliance, Dust Ingress Test (IS:11739-1997) Compliance
	Additional Features for COVID 19 Ambulance	NA

	Warranty Time	36
	Warranty Distance (or warranty time, whichever earlier)	300000
	Battery Warranty	12
	No Of Free Service during warranty	3
Certification	Applicable GSR 287(E), Central Motor Vehicles(4th Amend) Rules, 2015 and Ambulance CODE (Latest)	Compliance to AIS 125(Part I) : Constructional and Functional Requirements for Road Ambulances with all amendments till date.
	Certification	Complete vehicle
	Vehicle Certification	ARAI
	Vehicle Certification ARAI/VRDE/ICAT/CIRT No	AAPN-0282-F01
Other Detail	Class Of Vehicle	UV_VAN
	Chassis No.	MAT557022MUG01929
	Engine No.	VARICOR11 GYXJ09324
	Horse Power or Cubic Capacity	2179
	Number of Cylinder	4
	Month and Year of Manufacturing	07/2021
	Seating Capacity (incl. driver)	8
	Maximum axle weight and number and description of tyres: A. Front Axle B. Rear Axle C. Any Other Axle D. Tandem Axle	NA 0493 1540 NA NA
	Type of Door	3-Door High Roof

Kindly send your QUOTATIONS giving lowest rates per unit along with terms and conditions in Sealed Covered envelope addressed to “**Purchase Officer, Purchase & Stores Department, University of Allahabad, Prayagraj, (UP), Pin-211002**”. This has to reach to the office on or before **23-01-2023 till 5.00 PM**. The word “**Quotation for Patient Handling**”, Our Reference No & date of LTE should be clearly mentioned on the sealed envelope.

A) Fabrication of Ambulance

Fabrication of TATA WINGER High Roof Ambulance, WB-3200, Air Conditioned, BSIV & Power steering with listed specification of instruments

S/N.	Description of Fabrication	Req. Qty	Quoted Rate (Inclusive of Taxes)
	1. Fabrication of Interior 2. Electricals 3. Oxygen Therapy-complete gas pipe lining with tubing on common rail with 2 oxygen outlets. 4. Interior design. 5. Emblem and Marking on the Ambulance Body		

Equipments for Ambulance

S/N.	Description with specification	Req. Qty	Quoted Rate (Inclusive of Taxes)
1.	Scoop Stretcher <ul style="list-style-type: none"> • Lightweight, portable Aluminum Scoop Stretcher • Communally used for spiral bone fractured patients • Folded into two parts • Adjustable length • (LxWxH) 164x43x8 cm (Min) • (LXWXH) 201x43X8 cm(Max) 	1	
2.	Spine Board <ul style="list-style-type: none"> • Made of High strength engineering plastic • Portable and anti-aging, comfloat in water • Suitable for all Radio-diagnostic X-Ray procedure • 2 belts to strap patient • (LXWXH) 164X43X8 cm 	1	
3.	Head Immobilizer <ul style="list-style-type: none"> • Water proof plastic coating to prevent bacterial growth • Unique head straps to confirm patient's for head • Minimal interference with X-Ray • MRI & C.T. • Will not absorb blood and body 	1	
4.	Wheel chair cum stretcher <ul style="list-style-type: none"> • Made of high quality Aluminum • Adjustable Telescopic handles for easy carriage in stairs, narrow lanes etc. 	1	
5.	Suction Pump Model <ul style="list-style-type: none"> • AC/DC and foot operated • Ergonomically designated for easy operation • MS powder coated cabinet • Oil free electrical pump • Wide mouth Autoclarable jel • Automatic overflow motor shut off system 	1	

	<ul style="list-style-type: none"> In build maintenance free battery 		
6.	<p>Emergency Bag</p> <ul style="list-style-type: none"> Ambu Bag 2 no's (1 Adult & 1 Paed) OPA, Set of 5 (Oropharyngeal Airways) Un-cuffed disposable Tube set of 6 Laryngoscope (4 Blades) Oxygen mask 2 no's- 1 Adult & 1 Paed. Magile Forceps- 1 no. Artery forceps - 1 Toothed forceps- 1 Universal scissor- 1 Stethoscope - 1 Cervical cotton Adjustable Glucometer Fingertip pulse oximeter Ancoid blood pressure unit- 1 no. (Sphygmomanometer- Dial type) Examination gloves—1 box Stenle gloves- 5 pairs Disposable syringes 2, 5 & 10 ml- 2 no's each Disposable delivery kind- 5 no's Micro pore surgical tape 1"-1 box Carrying case 		
7.	<ul style="list-style-type: none"> D- Type Oxygen cylinder 	1	

- While submitting the quotation following should invariably be mentioned:
 - Name of the manufacturer of the item quoted along with brand name, if any, Details of specification.
 - Lowest rate F.O.R. destination. Period of validity of quoted prices – **(Minimum Six Months)**.
 - Firm delivery time from the date of receipt of confirmed order, condition of supply and terms of payment.
- If you are manufacturer of the items or if you have proprietary distribution/sales authorization, please mention it in the quotation for items of equipment nature the Instruction Manual, Diagram of the circuit drawing must be supplied along with supply without which the delivery shall be incomplete.
- Please fill in and return the Suppliers Profile Form & Mandate Form. Terms & Conditions as applicable are attached.
- Quotations will be received **only through Speed Post/Register Post in "Purchase & Stores Department, University of Allahabad, Prayagraj-211002 (U.P.)". Quotations received anywhere else other than Purchase Office will not be considered.**
- Quotations received after the due date and time shall not be considered.**

Jyoti Shrivastava
10/01/2023
Purchase Officer

E-mail. purchasecell.uoa@gmail.com

Purchase Officer
इलाहाबाद विश्वविद्यालय
University of Allahabad



UNIVERSITY OF ALLAHABAD

Terms & Conditions for LTE

Terms & Conditions

1. Quotation received after due date and time shall be summarily ignored.
2. Unsolicited / conditional / unsigned tenders shall not be considered.
3. Complete specification with model and manufacturer name and address should be given while quoting. Literature / Pamphlets should also be enclosed wherever applicable.
4. Rates must clearly indicate all taxes and discounts offered, if any.
5. No price negotiation will be entertained in normal course of action.
6. In case the products are available on DGS&D rate contract, may quote DGS&D rate contract rates enclosing a copy of the rate Contract.
7. Delivery shall be given in **30 days** of receipt of purchase order at the University Campus. The offered delivery period shall have to be strictly adhered to incase an order is placed.
8. IT, TT would be recovered as per rules. Kindly furnish your CST, UPTT and TIN Number in your quotation for our records.
9. Payment shall be made on delivery and satisfactory installation of the equipment.
10. After sale, the service will be provided free of cost up to warranty period. Charges after warranty period may be quoted.
11. Tender conditions, if any, or otherwise sent also with the tender shall not be binding on us.
12. The acceptance of the quotation will rest with the competent authority of Allahabad University, who does not bind himself to accept the lowest quotation and reserves the right to himself to reject, or partially accept any or all the quotation & received without assigning any reasons.
13. All the above instructions and our standard terms and conditions must be complied, failing which your offer may be liable for rejection.
14. All suits shall be in the courts of **Allahabad Jurisdiction** only.
15. Terms & conditions of purchase as per University rules shall be applicable.
16. **Vendor must enclose an authorization certificate of the company with tender document.**
17. Successful bidder shall furnish an unconditional PBG / SD valid till 60 days after the warranty period from any nationalized / scheduled bank for 10% of the total amount.
18. Liquidated damages rate for delay in delivery is 0.5% per week & max. 5% of the total amount.
19. Tender should be addressed to the **Purchase Officer, Purchase & Stores Department, University of Allahabad, Prayagraj- 211002 (U.P.)**. Quotations received other than Purchase Office will not be considered.
20. **If required number of quotations will not be received by the last date of the LTE. The date may be extended as per rule.**



UNIVERSITY OF ALLAHABAD

(A Central University)

Supplier Profile Form

1. Firm's Name : _____
2. GST No. : _____
3. Owner's Name : _____
4. Full Postal Address : 1. _____
 _____ PIN _____
 2. _____
 _____ PIN _____
4. E-mail address : _____
5. Website address : _____
6. Contact Person's Name: _____
7. Contact No. : Phone No. _____ Mobile No _____
 : E-mail: _____
 : City: _____ State: _____
8. GST NO : _____
9. PAN NO. : _____
 (Enclose Xerox copy)
10. Shop Act Registration No: _____
 (Enclose Xerox copy)
11. Current Bank Account No : _____
12. Manufacturer or Supplier : _____
 (In case of supplier please enclose authorization of your Principal)

Item wise rate list, with available discount (if any), is attached.

Note: Supplier must print GST No. on their Letter Head / Bill / Quotations.

Signature with Seal

Mandate Form for Payment-2019**Public Fund Management System(PFMS) Facility for receiving Payments****Details of Account Holder/Firm:**

1.	Firm/Contractor/Agency	
2.	Name of Account Holder	
3.	Complete Contact Address	
4.	Telephone Number	
5.	E-mail	

Bank Accounts Details:

1.	Name of the Bank viz. SBI/PNB	
2.	Branch Name with Complete Address	
3.	Telephone Number and E-mail of Bank Branch	
4.	Whether the Branch is computerized?	
5.	Whether the Branch is RTGS enabled? If yes, then what is the Branch's IFSC Code?	
6.	Is the Branch also NEFT enabled	
7.	Type of Bank Account (SB/Current/Cash Credit)	
8.	MICR Code of Bank	
9.	Complete Bank Account Number	
10.	Repeat Bank Account Number	

Date:

Signature of Customer

I hereby certify that all the details mentioned above are true to my knowledge and belief.

Bank Stamp

Signature of Branch Manager

Name.....

Mobile No.....

E-mail.....