



कार्यालय-प्रधानाचार्य, राज.स्वा.वि.वि.आयुर्विज्ञानमहाविद्यालय, जयपुर
Office of the Principal & Controller, RUHS College of Medical Sciences, Jaipur
(Constituent College of Rajasthan University of Health Sciences, Jaipur)
Address :Sector-11, KumbhaMarg, Pratap Nagar, Tonk Road, Jaipur -302033(Rajasthan)

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Website : www.ruhscms.org
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No. RUHS.CMS/Store/2021-22/ 5121

Dated: 22/06/2021

प्रस्ताव आमंत्रण सूचना

राज.स्वा.वि.वि. आयुर्विज्ञान महाविद्यालय चिकित्सालय मे स्थापित EPABX SYSTEM के व्यापक वार्षिक रख-रखाव (CAMC) कार्य हेतु प्रस्ताव आमन्त्रण सूचना।

राज.स्वा.वि.वि. आयुर्विज्ञान महाविद्यालय चिकित्सालय मे स्थापित **EPABX SYSTEM** के व्यापक वार्षिक रख-रखाव (CAMC) कार्य हेतु दर प्रस्ताव आमंत्रित किये जाते हैं। जिसमें इच्छुक फर्म ऑनलाईन प्रपत्र डाउनलोड कर कार्यालय में दिनांक 09/06/2021 को प्रातः 11.00 बजे तक व्यक्तिशः अथवा महाविद्यालय केन्द्रीय भण्डार शाखा कार्यालय की ई-मेल आईडी ruhscmsstore@ruhsraj.org पर प्रेषित कर प्रस्ताव के माध्यम से दर प्रस्ताव प्रस्तुत कर सकता है।

नियम एवं शर्तें :-

1. The Request for Proposal shall be effective and valid for the period of One year from the date of work order. It may be extended by written mutual consent of both parties as per rules.
2. Maintenance services shall be provided by the firm at RUHS Medical Hospital, Jaipur.
3. Interested Firm should have adequate technical staff in Jaipur with expertise of successfully operation at least for 2 years experience certificate for dealing in providing good quality services. Principal, RUHS College of Medical Sciences, Jaipur committee shall satisfy itself with regard to the adequacy of available technical staff and their qualifications before opening of the concerned firm's Financial Bid.
4. The scope of coverage of the Request for Proposal for the EPABX System. AMC Should cover all the items related to EPABX System including its accessories and its wiring parts and all other parts also listed in the tender document.
5. The firm shall rectify any defects, faults, physical damage and failures in the equipment and shall repair, replace any worn out, defective parts of the equipment, free of cost to Superintendent RUHS Hospital. If any part of equipment is replaced by the approved firm, the old part must be submitted at Central Stores of RUHS Medical Hospital.
6. The Approved Service Provider shall configure the hardware items as the case may be in the equipment covered under Request for Proposal, at no extra cost to Medical Superintendent, RUHS Medical Hospital whenever the need arises.
7. Necessary technical assistance and advices shall be extended by the firm to resolve problems that may be encountered with regard to EPABX System and peripherals covered under the Request for Proposal.
8. The Approved Service Provider shall, work as per directions of Medical Superintendent RUHS Medical Hospital.
9. The Approved Service Provider should provide management hierarchy for further communication.
10. The Approved Service Provider should submit satisfactory performance along with submission of bill.
11. The Approved Service Provider shall repair/replace faulty parts on -site only. If it is not possible to repair/replace the part on site, then firm can carry the equipment to service center after approval of authority on its own cost. After repair/ replace of equipment/part firm have to install these on their concerned place. Transportation charges should be borne by the Approved Service Provider. If the Approved Service Provider failed to compliance as per terms and conditions **within 2 days** otherwise penalty of Rs. 500/- per equipment/day and if firm carry any hardware to service center for repair, hardware should be repair and install at appropriate place within four calendar days. If Approved Service Provider failed in the same then penalty of Rs. 1000/-per day/equipment will be made by Principal RUHS

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College of Medical Sciences, Jaipur against firm. Approved Service Provider should replace faulty parts with original parts only.

12. The Approved Service Provider shall not sub-contract the Request for Proposal to any organization, person firm or its equipments/parts to franchisee without the prior approval of Principal, RUHS College of Medical Sciences, Jaipur. If, at any time, it comes to the notice of Principal, RUHS College of Medical Sciences, Jaipur that such sub-letting has been done, Principal RUHS College of Medical Sciences, Jaipur at its discretion may terminate the contract without referring the matter further to the firm. Principal RUHS College of Medical Sciences, Jaipur will be at liberty to realize all the expenses it had to incur in this connection, either by adjusting from the payment due to the Firm or through other means.
13. The Payment to successful Approved Service Provider will be done by SMS Medical College up to the official end of COVID-19/re-affiliation of RUHS Medical Hospital, Jaipur with RUHS College of Medical Sciences, Jaipur. No financial liability/obligation will be borne by RUHS College of Medical Sciences, Jaipur till that.

(डॉ. सुधान्त्यु कक्कड़)

प्रधानाचार्य,

राज.स्वा.वि.वि. आयुर्विज्ञान महाविद्यालय,
जयपुर।



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Annexure – 01

कार्य का विवरण:-

| Name of Work:- SITC of EPABX System at RUHS Medical Hospital, Jaipur | | | |
|---|---|---------|------|
| SN | Item Description | Make | Qty. |
| 1. | EPABX System with 16 PT Incoming Lines, 800 Analog Extension Lines & 32 Digital Extension, Make-NEC | NEC | 1 |
| 2. | Digital Phone with 24 Programmable Keys, 04 Soft Keys, 6x24 Character LCD Display with DSS Console of 60 no. Of Keys, Make-NEC. | NEC | 1 |
| 3. | Analog Telephone Instrument, Make- Beetel | Beetel | 140 |
| 4. | 4 to 1 Patch cords (from EPABX to Voice Panel) | | 125 |
| 5. | 1 KVA ONLINE UPS, Make-Numeric | Numeric | 1 |

डॉ. चन्द्रजीत सिंह चन्देल
चिकित्सा अधिकारी प्रभारी
केन्द्रीय भण्डार शाखा
राज. स्वा.वि.वि.आयुर्विज्ञान महाविद्यालय, जयपुर



कार्यालय-प्रधानाचार्य, राज.स्वा.वि.वि.आयुर्विज्ञानमहाविद्यालय, जयपुर
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Annexure – 02

STATUS AND OFFER SHEET

In Reference to RUHS_CMS RFP No.RUHS CMS/Store/2021-22/..... Dated / /2021

| | |
|--|--|
| फर्म का नाम एवं पता | |
| PAN No (Enclosed copy) | |
| GST Registration (Enclosed copy) | |
| Experience Details | |
| Authorised Person's Contact Details | |
| नाम | |
| मोबाईल नम्बर | |
| ई.मेलआई.डी. | |
| अनुलग्नक 01 के अनुसार दर जी.एस.टी. के बिना | |
| अनुलग्नक 01 के अनुसार दर जी.एस.टी. के साथ | |

I /WE have read the all terms and conditions of the RFP (EOI) and accept in all with my faith and belief and abide by them.

डॉ. चन्द्रजीत सिंह चन्देल

चिकित्सा अधिकारी प्रभारी
 केन्द्रीय अण्डार शाखा

राज. स्वा.वि.वि.आयुर्विज्ञान महाविद्यालय, जयपुर

(Signature)

Name of Signatory

Mobile No.

Seal of Company / Firm / Person