

## अखिल भारतीय आयुर्विज्ञान संस्थान, ऋषिकेश- 249203 ALL INDIA INSTITUTE OF MEDICAL SCIENCES, RISHIKESH- 249203

#### Form P-3

(To be attached with form P-2 for purchase of Proprietary Articles)

#### PROPRIETARY ARTICLE CERTIFICATE

It is to certify that the item(s) SUBJOD Migration Luparadolion to SUALOD (item name) as mentioned in Form P-2 may be purchased from M/s Longan Entrophises. (manufacturer/supplier name), as to the best of my knowledge, M/s Longan Entrophises are the sole manufacturer/ supplier of the sole manufacturer M/s. NEC Technologies. (manufacturer name) of above said equipment/ item.

Further, it is to certify that similar items manufactured by other firm(s) shall not be suitable for our purpose because of below mentioned reasons:

our purpose decidese or deron memories reasons.	
1 Existing device i.e. SUB300 is End of Life   E 2 EPABN-NEC SUB300 can be migrated to 3.	nd of Services as confirmed b
2. EPABO-NEC SUB300 can be migrated to	sv9100 using NEC (
3	Opgrade spares/Licences.
Indenter Signature 0	
Indenter Signature (	
Indenter Signature Tal Prayash Balow	
Indenter Name: Lai TrayaM Galow	
Designation: Storeleper	
Department: IT Stese	

Recommendation:

Signature of Head of Department/Section (Momber Secretary)

**Note**: The indenter, before recording the above certificate should satisfy himself that the article is genuinely of proprietary nature and is manufactured under patent laws.

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## Annexure (To be attached with form P3)

#### PROPRIETARY/ SPECIFIC BRAND GOODS CERTIFICATE:

SV9100 with migration of existing 1		
YES, It's part it cutension		
NEC Technologies Subplier: M/s Longan Enterprises.		
Summet e Lougan . in		
yes.		
Not Compatible		
MAF Cutificate to Layour by NEC Fechnologies		
11		
MAF Cuttivite by DEM		

Signature of Indenter (Demanding Officer)

Date: 17-6-2020

Signature of HOD / Mcruber

(Concerned Department)

I certify that the item at Sr. no. 4 above is required to be procured at single tender basis as the source of supply is definitely known/of the specified brand proposed as it is advantageous and is meeting our functional requirements and limited tender system could be dispensed with as they would serve no useful purpose in this particular case.

(Strikeout whichever is not applicable)

(Store Keeper)

## AIIMS RISHIKESH

# INDENT FOR PURCHASE OF STORES (FORM P-2)

1. Please fill a separate form for each item

 Please fill completely in triplicate. Incomplete forms and those with illegible writing may not be accepted.

Name of items with full specifications & required accessories	Quantity(in figures and words)	Cost per unit (approx) in foreign currency and Rupees	Total cost (approx)
(1) Mignation of NEC 5V8300 to NEC 5V9100 with Expansion existing configuration		₹11,77,800.00	Ø 308,57,11 ₹
PRI Card	OL		
Analog Trunk	56		
SIP Trunk Digital Ext.	16		
Analog Ext.	512		
SIP Trunk for PRI	10 No.		
IP Mobile Licence with Mobile APP ST'500	200 Nos.		
Digital Expansions Port	16 Nos.		
Rack 420 with Accessories	01 Nos.	₹ 22,000.00	₹ 22,000.00
Data Cable Cat 5 (DLink-305 mtr)	02 Box	Z 45,00.00	7 9000.0p \
Installation charges	of Job.	₹ 35,000.00	£ 35,000 W
			₹ 12,43,800

3. For equipment, please provide the following information had all communications, we Detailed description of the actual disc of the equipment. In all the terms of mitospilal, academics and administration.

Is the equipment to be used for patient care of research:

Yes, it may have been yes, it may have been have been and the following the send of the line of the

Analogue GPBAX is availab Is this/ similar equipment arcaic, svailable in the department? Present

When purchased?

Tests/ procedures done on this equipment in last year. MA

Functional.

Revenue generated by this equipment in lest year.

If yes, what is the justification for this purchase? - communication is backtone of what Is this/similar equipment available in any other department in the Institute? (in the Institute? No

If yes, what is the justification for this curchase?

# For Consumables, please provide following information: -N.A

Description of stocks available

When was it last purchased?

In what quantity?

Cost;

Source

Test/ procedures done in this period:

Revenue generated in this period:

Average annual consumption

Shelf life

Period for which this purchase will last Number of tests likely to be done with this quantity:

## 5. For furniture, please provide the following information:

Exact location and use

Existing furniture at that place

Justification for this purchase

Possible sources (name all sources you know) from where item may be obtained (name, address, phone no, fax no, email, etc of contact person)

INDENTOR

Name. Alw Goel

Designation, MRC

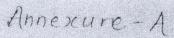
Date... 11/06/1820

Designation Menber Semetany

Stamp.....

डॉ. गीरव चिकारा Dr. Gauray Chikara

सहायक-आचार्त, औषधि विज्ञान Assistant Professor of Pharmacology एस, ऋषिक A MS, Rishikesh





ALL INDIA INSTITUTE OF MEDICAL SCIENCES, RISHIKESH-249201 अखिल भारतीय आयुर्विज्ञान संस्थान, ऋषिकेश- २४९२०१

## ATTACH WITH FORM- P2

Please ensure following points with Form-P2 along with your request lett

SI. No.	Required fields	Whether fulfilled the	Remark
1	Manpower availability	(Yes/No)	The second secon
2	Space availability	(Yes/No)	
3	Whother specifications are generic, not of some company or brand specific (should have priority for make in India products)	(Yes/No)	Buanded! Buand specific because of compatibility
4	USEDA and European CE should be replaced with equivalent Indian Standards that is ISO or BIS or same may be written as ISO BIS USEDA European CE or equivalent	(Yes/No)	promse of comparison
	Approved in Assessment Committee or Not.	(Yes/No)	Mentioned in HEFAList on Pg-16 are point 1 and 6.2.
	If here cost is above or equal to 30 lacs, specifications should be duly vetted by DGHS nonnince/External expert	(Yes/No)	1 and 6.2.
	t ener to External Expert & DGHS Should be routed through Director Office only (BMF will help in this process).	(Yes No) NA	
	Mode of Purchase- GeM availability non availability should be ensured & verified before procurement by LPC/Tender (Specification should be same).	(Available/Not available)	GreM can't puoude internation with each houldhave, software ar installation

INDEX FOR

Signature

Atul Goel

Designation MRC

Department Telecom

Date 11/06/200

Mobile No Parce 963492924

HEAD OD DEPARTMENT/ SECTION

Name: Gaurav Clikara

Designation Member Secretary Telecon

Department Telecom

Date 11/06/2020

Mobile Payer - gaurav phar ailms richikesh