

AIIMS RISHIKESH

INDENT FOR PURCHASE OF STORES

(FORM P-2)

1. Please fill a separate form for each item
2. 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)
Karl- Storz Laproscopy Set Camera head Repair	(01) ONE	455,102.40	455,102.40

3. For equipment, please provide the following information

Detailed description of the actual use of the equipment.

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

Is this/ similar equipment already available in the department? **NO**

When purchased? **2015** Cost at that time: **Supplied by HLL** Present functional status: **Not Working**

Tests/ procedures done on this equipment in last year: **Out of order for last 3 yrs**

Revenue generated by this equipment in last year: **— do —**

If yes, what is the justification for this purchase? **NA**

Is this/similar equipment available in any other department in the Institute? **No idea**

If yes, what is the justification for this purchase? **Need it for ped. Surgery**

4. For Consumables, please provide following information:

Description of stocks available

When was it last purchased? In what quantity? Cost;

Source: **422, 105-40 (10) Kailash Nagar, New Delhi**

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

Signature..... **Intezar Ahmed**

Name..... **Dr. Intezar Ahmed**

Designation..... **Professor (Adi)**

Date..... **25.07.24**

डॉ० इन्तेजार अहमद
Dr. Intezar Ahmed
 अपर-आचार्य/ Additional Professor
 बाल शल्य चिकित्सा विभाग
 Department of Paediatric Surgery
 एम्स ऋषिकेश /AIIMS, Rishikesh

HEAD OF DEPARTMENT/SECTION

Signature..... **B. Satya Sree**

Name..... **B. SATYA SREE**

Designation..... **Prof & HOD**

Stamp **डॉ० बी० सत्या श्री /Dr. B.Satya Sree**
 प्राचार्य एवं विभागाध्यक्ष /Professor and Head
 बाल शल्य चिकित्सा विभाग
 Department of Paediatric Surgery
 एम्स ऋषिकेश /AIIMS, Rishikesh

P-3 FORM

(to be attached with P-2 form for Proprietary items)

AIIMS Rishikesh

PROPRIETARY ARTICLE CERTIFICATE

It is certified that the items (Karl Storz Laparoscopy camera head repaired) required in the P-2 form should be purchased from M/s. Life care Medisurg. To the best of my knowledge M/s. Life care medisurg DDN are the sole manufacturer/agents of the sole manufacturers M/s. Karl Storz

Similar items manufactured by other firm(s) shall not be suitable for our purpose for the following reasons:-

Item should be repaired by authorized dealer of the company.

Intezar Ahmed
(Sign of Indenter)

Dated 25.07.2024

Designation Professor (Addl)

Department Ped Surgery

Recommendat on: डॉ० इन्तेजार अहमद
Dr. Intezar Ahmed
अपर-आचार्य/ Additional Professor
बाल शल्य चिकित्सा विभाग
Department of Paediatric Surgery
एम्स ऋषिकेश /AIIMS, Rishikesh

B. Satya Sree
25/7/24

डॉ० बी०.सत्या श्री /Dr. B.Satya Sree
आचार्य एवं विभागाध्यक्ष /Professor and Head
बाल शल्य चिकित्सा विभाग
Department of Paediatric Surgery
एम्स ऋषिकेश /AIIMS, Rishikesh

Signature of Head of Department/Section

N.B.: The indenter before recording the above certificate should satisfy himself that the article is genuinely of proprietary nature manufactured under patent laws.