



महाराष्ट्र शासन

शासकीय दंतमहाविद्यालय व रुग्णालय, नागपूर

Government Dental College & Hospital, Nagpur

Govt. Medical College Campus, Medical Square, Nagpur - 440003, M.S. (INDIA)

Telephone No. 0712- 2743400 /2744496

Fax No. 0712- 2743400

Email - dean.gdcngp@gmail.com

GSTIN 27AAAGD1499M1Z1

जा.क्र.शादंमरुना/खरेदी विभाग/ Fellowship/ दरपत्रके / ३६८६ /२०२६

दिनांक :- ०९/०९/२०२६

Quotation Notice

To,

M/S.....

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Subject :- Enquiry for Supply of Fellowship Dental Instrument/Equipments

Govt. Dental College & Hospital, Nagpur.

Ref's :- This Office Approved Notesheet Dated 27/08/2026

Dear Sir,

The undersigned invited sealed quotations for the items mentioned below/on/reverse or as per enclosed statement for the use of the Govt. Dental College & Hospital, Nagpur on the following terms & conditions.

१) The prices quoted should be free delivery to College & Hospital premises for local dealers and F.O.R. Nagpur for outsiders.

२) The Price quoted by inclusive of all taxes, duties if payable like customs, excise, CST, ST, and GST & inclusive transportation, installation, commissioning. The break-up of the taxes should also be shown separately where necessary. The sales tax & registration number should be quoted in your letter. Exemption of taxes, if on A.F. Forms etc.be separately stated.

३) The serial number of the items should not be changed while quoting rates. You may drop the item if not interested.

४) Rates should be quoted strictly for the item specified in the list and for standard quality of goods. In case of alternate offer, the detailed specifications, name of manufacturer or make etc must invariably be stated. Specifications other than specified in the schedule may be liable for rejection on even though lowest.

५) The quotation submitted will be valid for a period of six (६) months only from the date of acceptance.

8) The delivery of goods should be invariably be made within 2 weeks for indigenous items and 8 weeks for imported items from the date of confirmed order. **PENALTY ON LATE DELIVERY:** In the event of late delivery of goods, the purchaser will recover from contractor by way of penalty, a sum of equal to half percent of price of goods (The case of an order not exceeding Rs. 2.00 Lakh in Value subject to max. 90% and In case of an order of Rs. 2.00 Lakh and above subject to max. 4%) delivered late per week calculated from the next day after the agreed delivery period is over.

9) The quotation received after due date will not be accepted. The quotation should be submitted in sealed cover. Unsealed quotations which is not properly sealed will not be accepted. The last or receiving date of the quotation is 30/08/2024 upto 4.00 p.m.

10) Supply of stores should be made in one installment unless otherwise ordered place meal supply will not be accepted. Condition of advance payment through Bank, part payment etc. will not be accepted.

11) The price quoted is inclusive of all taxes, duties if payable like Customs/ Excise/CST/ST/GST the break up of the taxes should also be shown separately where necessary. The sales tax, GST and registration number should be quoted in your letter. Exemption of taxes on 'AF' / Octroi exemption form etc be separately stated.

12) Quotations if asked with samples if not accompanies with sample will be liable for rejection even they are lowest. Samples should be sent with a labels attached quoting our ref.no of enquiry and item no etc.

13) You are also required to submit the security deposit at the rate of 3 % of the cost of equipment in the form of Bank Guarantee for two years (the name of Dean, Govt. Dental College & Hospital, Nagpur) and 5 % performance Bank Guarantee for 8 year (after warranty period) for equipment above one lakh only.

14) The tenderer will have to agree to enter into annual maintenance contract (AMC) @ of 9% of the ordered value of the equipment. Where required tenderer will have to agree for comprehensive maintenance contract (CMC) inclusive of all spares @4% of the ordered value of the equipment. The period of such AMC/CMC will be of 2 years after completion of warranty period. In case of non-compliance of AMC/CMC the supplier will be liable to pay a penalty. Such penalty shall be recovered from the amount of bank guarantee.

15) Comprehensive warranty (Including supply of spares) All inclusive warranty period shall be of 2 years from the date of commissioning of all equipment supplied as certified by the consignee. The successful bidder must ensure 900% uptime during warranty period. In case of down time, warranty period will be extended for period of down time.

१४) Initial payment of १०% of the contract value will be made on delivery, installation and submission of security deposit of ३% (BG) & १०% of the contract value will be paid on satisfactory commissioning of the machinery within ३० days.

१५) The tenderer should install the equipment in the concerned department of the institution, give demonstration free of cost and train the staff of the department (no. as specified by user)

१६) The Decision of the Dean, Govt. Dental College & Hospital, Nagpur will be final and binding. The Dean, Govt. Dental College & Hospital, Nagpur reserves right to reject any or all Quotations without assigning any reason.

१७) Very Important :- In case you are not interested in quoting your rates; in reply to this enquiry a line in reply is must; failing are liable for delisting their names for further enquiries from our list and no further request in this matter will be entertained.

१८) Literature, Instruction manual, working leaflet etc may also be sent with quotation.

१९) Authorization certificate, Brochure, Catalogue, User List may also submit along with quotation. The Photostat copies of the firm registration should be attached with the quotation. Authorization letter: A dealer quoting on behalf of manufacturer must attach authorization letter from the manufacturer to sell the equipment and to do after sales services. Sub dealer certificate will not be accepted.

२०) Technical Specifications – Compliance Chart with variation/deviation.

IMP:- General Terms & Conditions;

a) Bidder should fill the **Technical Bid & Price Bid** in separate envelop.

b) Envelope (Technical & Price bid) consists of authorization letter & compliance chart are mandatory. Firm registration certificate, GST Registration, Product catalogue, ISO or ISI certificate. & price of equipment/machinery

c) Price of equipment must be quoted inclusive of all taxes.

d) A hands on working demonstration is essential before opening envelope

e) Unsatisfactory performance of demonstration will disqualify the tender.

Details as below;

Purchase of Equipments for the year २०२६-२७.

Department :- Periodontics, Pedodontictis

Sr.No.	Name of Machinery & Equipment	Department	Qty	Total Rate (including all Taxes)
1	High volume Suction	Periodontics	1	
2	Surgical Physiodispensor with Reduction handpiece		1	
3	Dental Implant Kit (Advanced)		1	
4	Computerized Multi-Modal Electrotherapy Unit (TENS, IFT, EMS)	Pedodontics	1	
5	Therapeutic Ultrasound Therapy Unit		1	
6	Dental Compressor		1	

NOTE:- Specifications of above equipments are attach.


Dean,

Govt. Dental College & Hospital,
Nagpur.

Specifications

1. Specifications Of High volume Suction

Powder coated heavy MS cabinet, Capacity – 740mmHg $\pm$ 10 at 120 LPM,

- Reusable bacterial filter, Power-220/230V AC, 50 HZ

2. Specifications Of Surgical Physiodispenser with Reduction handpiece

LED , Approx 3200 LUX, Three levels of brightness control Calibration function, 20:1, 16:1 & 1:1 with 80Ncm torque

1. Surgery motor INTRA LUX S600 LED ,
2. Multifunction foot control (Cable length 2.5 m),
3. Motor power for S 600 LED (Speed range 0-40,000 Input rpm max torque 5.5Ncm
4. Motor and instrument holder
5. Bottle holder
6. Integrated peristaltic pump and power supply

Input voltage : 100V-240 V AC

Frequency : 50/60 Hz

Pump flow rate: 0-110ml/min

3. Specifications Of Dental Implant Kit (Advanced)

Surgical Kit includes. Lance drill, Side cut Drills, Parallel pins, Twist Drills, Three cutter Twist Drill, Taper Drill, Taper Cortical drill, Drill Extension, Mount Drill, Mount Extension, Fixture Driver, No Mount driver, Ratchet Wrench, Torque wrench, Hand Driver, Open Wrench, Removal Tool, HG Tissue height gauge, Depth Gauge

4. Specifications Of Computerized Multi-Modal Electrotherapy Unit (TENS, IFT ,EMS)

Should be a microprocessor-controlled digital electrotherapy unit.

Should have minimum 5-inch LCD/TFT color display.

Real-time display of: Frequency, Pulse duration , Intensity, Remaining treatment time

Should have automatic output cut-off: Electrode contact monitoring, Over-current protection, Emergency stop function.

Warranty -2 years

Should have minimum 50 treatment programme

Should be supplied with

Self-adhesive electrodes (50 × 50 mm)

Electrode cables

Facial electrodes (small size)

Electrode gel

Power cord

Should be a Table-top clinical model.

CE/FDA certified or equivalent.

Compliance with IEC safety standard

Should have

TENS Mode

Frequency Range- 1–150 Hz

Pulse Width- 50–400 μ s

Output Current - 0–100 mA

Modes - Continuous, Burst, Modulated

Treatment Timer

Independent Intensity Adjustment

IFT Mode

Carrier Frequency- 2000Hz and 4000Hz,

sweep frequency 0–150 Hz with programmable sweep patterns

Beat Frequency Range- 0–150 Hz

Vector Scan- Vector 45°, Vector 90°

Quadripolar Mode and bipolar mode,

Treatment Timer

EMS Mode

Frequency Range 1–120 Hz

Pulse Width- 50–400 μ s , Adjustable

Ramp Up/Down - Adjustable

Work-Rest Cycle - Adjustable

Output Current Up to 100 mA

Russian current

2500 Hz medium-frequency stimulation

5. Specifications Of Therapeutic Ultrasound Therapy Unit

- Should have microprocessor-controlled therapeutic ultrasound unit.
- Should be a Table-top or portable clinical model
- Continuous and pulsed ultrasound modes.
- Suitable for hospital and institutional use
- CE/FDA certified or equivalent.
- Compliance with IEC safety standard
- Contact monitoring system, Automatic output shut-off.
- Overheating protection, Transducer fault detection.
- Audible treatment completion indicator.
- Should have Real-time display of: Frequency, Intensity, Duty cycle, Remaining treatment time
- Warranty -2 years
- USB port for software updates and data export.
- USB for software upgradation
- Should have minimum 50 treatment programme

Ultrasound Output Specifications

- ◆ Frequency - 1 MHz and 3 MHz
- ◆ Output Mode - Continuous and Pulsed. (pulse frequencies should be programmable)
- ◆ Intensity Range 0.1–3.0 W/cm²
- ◆ Duty Cycles- 10%, 20%, 50%, 80%, 100%
- ◆ Effective Radiating Area (ERA)- 0.8 –4.5 cm²
- ◆ Beam Non-uniformity Ratio (BNR)- ≤ 6:1, preferably 5:1
- ◆ Treatment Time - 1–30 minutes

Applicator/Transducer

- 1 MHz transducer
- 3 MHz transducer
- Preferred small treatment head suitable for: Masseter muscle, Temporalis muscle, TMJ region

Should be supplied with Accessories

- 1 MHz applicator
- 3 MHz applicator
- Ultrasound coupling gel (minimum 250 ml)
- Power cord
- User manual

6. Specifications Of Dental Compressor

9. Dental Compressor

- Should be double head dental air compressor
- Should be oil free with 2 Hp cylindrical tank.
- It should ensure optimal performance
- The oil free should have clean compressed air.
- It should not have oil contamination.

Key Specifications:

- Should have a Power output: $400W \times 2 = 9600W$
- It should have air pressure: 4bar
- Airflow rate: 200L/min.
- It should have Tank capacity of minimum 40-50L.
- Noise level: 92DB
- It should have a motor with copper winding.
- It Should be oil free.
- Dimensions: 60 — 33 — 99.4
- The minimum weight should be 80Kg
- Electrical requirements: 220V 50HZ
- Safety features thermal protector 9347/safety valve 0.66mpa
- Piston: 43.9mm
- Voltage: 220V