



ALL INDIA INSTITUTE OF MEDICAL SCIENCES, VIJAYPUR, JAMMU-184120  
(A Central Autonomous Body under PMSSY, MoH&FW, Government of India)

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F-No.-AIIMS/JMU/BOO/2025/LP/14(1)

Dated: 14.01.2025

Corrigendum-1

**Subject: Corrigendum for procurement of items required for the Department of Oral and Maxillofacial Surgery at AIIMS, Vijaypur, Jammu.**

**Ref.:** 1. CFQ No. AIIMS/JMU/BOO/2024/LP/14 dated 31<sup>st</sup> December, 2024.

In context to the subject and reference cited above, it is to inform that the date for receipt of quotations for aforementioned calling for quotation is hereby extended upto 21.01.2025. Vendors would get their sample check by user department through procurement section before the last date of this corrigendum-1. Rest all the terms & conditions shall remain same.

*Demo is essential*

**Encl.:** As referred above.

*Raksha Kundal*  
*14/1/25*

**Dr. Raksha Kundal,  
Chairperson,  
Store Purchase Committee,  
AIIMS, Vijaypur, Jammu**



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F-No.-AIIMS/JMU/BOO/2024/LP/ 14

Dated: 31 December, 2024

Inviting Quotations for Purchase of Complete Dental Implant Set required for the Department of Oral and Maxillofacial Surgery, at AIIMS, Vijaypur Jammu.

### QUOTATION NOTICE

Sealed quotations are invited from intending registered Stockiest / Distributors having GST and relevant documents for Purchase of Complete Dental Implant Set required for the Department of Oral and Maxillofacial Surgery, at AIIMS, Vijaypur Jammu. The quotation with copy of certificate of GST & other documents should be submitted to Procurement Section at AIIMS, Vijaypur, District Samba, Jammu (184120) up to 13-01-2025 till 03:00 pm. The quotations will be opened on the same day at 04:00 pm. Details of Equipment/Item are given as under:-

S. No.	Name of Equipment/Item	Make/Model	Qty.	Packs Size/Unit	HSN Code	Basic Price	GST %	Total Cost Inclusive of GST
1	<b>Complete Dental Implant Set</b>							
a)	Dental Implants (assorted sizes as requested by the user department)		01 No.					
b)	Dental implant kit with different drills + Torque Wrench		01 kit + 01 No.					
c)	Sinus lift kit		01 kit					
d)	Ridge split kit		01 kit					
e)	Prosthetic kit and / or implant removal kit		01 kit					
f)	Prosthetic components (1 set including impression coping open/closed, implant analogue, healing cap)		01 set					
g)	Prosthetic component (abutment) assorted sizes as requested by the user department		01 No.					
h)	Prosthetic component (cover screw)		01 No.					
i)	Trephine bur kit		01 kit					

### Terms & Condition

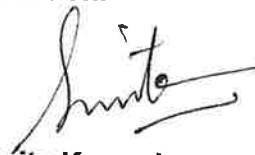
1. Firm to mention Make/Brand name in their quotation.



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2. GST, if any (Kindly mention in above table) should be clearly mentioned in the offer.
3. Document relating to registration of firm i.e., GST number and relevant document should be submitted along with quotation.
4. GST/other taxes please may be included in your quotation with the price in separate column.
5. The aforementioned items must confirm to the specifications attached as Annexure-1.
6. Supply should be made within 15 days from the date of purchase order.
7. Price should be for Destination basis (i.e., concerned department).
8. Payment will be released after certification from HOD of Concerned Department / Inspection committee of AIIMS, Vijaypur, Jammu.
9. **Quotation Name, Name of Department and No. must be mentioned on top of envelope.**
10. Liquidated damage shall be @ 0.5% for delayed supply per week or part of week for delay subject to maximum of 10%.
11. AIIMS, Vijaypur, Jammu reserves the right to place order for full or part quantity to one or more firms. The AIIMS, Jammu reserves the right to increase/ decrease the number of required quantities all other terms & condition.
12. Sealed quotation should be submitted by speed post/ copy courier/ by hand to Procurement Section, AIIMS, Vijaypur, District Samba, Jammu (184120) up to 13-01-2025 till 03:00 pm.
13. **Vendors would get their sample check by user department through procurement section before the last date of quotation opening.**
14. **Validity of quotation should be 90 days from the date of opening.**
15. **Sample to be submitted as and when required by the institute.**
16. **Firm to submit documentary evidence in support of claim of GST at the time of submission of bills.**
17. **All column given in quotation should be filled otherwise quotation will not be accepted.**
18. **Demo of the Item is must for quality check before the last date.**
19. **Please mentioned Email-id and Contact Number in the quotation.**

  
Dr Sunita Kumari  
Member,  
Store Purchase Committee,  
AIIMS, Vijaypur, Jammu

## **SPECIFICATIONS OF DENTAL IMPLANT KIT**

The entire instruments and consumables, every single item of them, should abide by the below-mentioned norms:

1. The vendor must enclose the certificate of the material quality used to make the instrument.
2. Should be European CE with 4-digit notified body no. or US - FDA certified or BIS or equivalent, must enclose the certificate.
3. If manufactured in India, instruments must be produced by an ISO-certified company, with relevant documentation provided.
4. The bidder has to quote all the items as a set; however, the rates of consumables must be mentioned separately.
5. Minimum warranty of all items: 02 years; the vendor must replace the drills during this time period if worn out.
6. All items of the kits must be made up of good quality medical-graded stainless steel and should be autoclavable. The instruments should be corrosion-free.
7. The Consumables (especially Dental Implants and its components) should be made with medical-grade Titanium, and the cost of these items will be locked for the next five years.
8. The vendor must provide the authorisation letter from the Original Equipment Manufacturer (OEM) in the format attached.
9. The vendor/OEM must provide a minimum of two copies of the supply order of the same kit in different government institutes, one of which should be AIIMS or INIs.
10. The OEM/ vendor must be readily available in local Jammu for easy exchange of the implant size or easy availability of the required sizes.
11. The vendor must be ready to demonstrate the kit as and when requested physically.
12. The vendor must send the required documents along with the quotation and should also bring the required certificates on the day of the physical demonstration.
13. The Kit should include the following items:

NAME OF THE ITEM	SPECIFICATION DETAILS
COMPLETE DENTAL IMPLANT SET	<ol style="list-style-type: none"> <li>1) Dental Implants of assorted sizes as requested by the user department</li> <li>2) Dental Implant Kit with different drills and Torque Wrench</li> <li>3) Sinus Lift Kit</li> <li>4) Ridge Split/Spreader Kit</li> <li>5) Prosthetic Kit and/or Implant Removal Kit</li> <li>6) Prosthetic components (1 set including impression coping open/closed, implant analogue, Healing cap)</li> <li>7) Prosthetic component (Abutment) assorted sizes as requested by the user department</li> <li>8) Prosthetic component (cover screw)</li> <li>9) Trepine Bur Kit</li> </ol>