No. MBMA /MLAMP/49/2017/13 (e)  Dated Shillong, the, 15th November, 2017

From
Shri. S.M. Sahai, IFS
Additional Project Director
Meghalaya Basin Management Agency

To: _______________________
_______________________
_______________________

PROJECT: Meghalaya Livelihoods and Access to Markets Programme (LAMP)

REQUEST FOR QUOTATIONS FOR SUPPLY OF EXTERNAL HARD DISK DRIVE & PENDRIVE

Sir/Madam,

Meghalaya Basin Management Agency, Shillong invites your quotation for the items mentioned above and as per the technical specifications and quantity provided at page # 4.

The Government of Meghalaya has received a loan from the International Fund for Agriculture Development (IFAD), and intends to apply part of the proceeds of this Loan to eligible payments under the contract for which this Request for Quotations is issued. This procurement process will be conducted in accordance with the shopping procurement method contained in the IFAD Project Procurement Guidelines (September 2010) and its Handbook in accordance with the procedures described herein.

Preparation of Quotations: You are requested to quote for these items by completing, signing and returning:
- the rate in terms of price for printing, by paper type, size, number of units and add-ons
- the List of Goods and Price Schedule LOT WISE
- the technical specification as offered.
- the documents confirming your eligibility, as listed below;

The standard forms in this RFQ may be retyped for completion but the Bidder is responsible for their accurate reproduction.

Validity of Quotations: The quotation validity required is 30 days.

Sealing and marking of Quotations: Quotations should be placed in a single sealed envelope, clearly marked as Quotation For “Supply of External Hard Disk Drive & Pendrive – LAMP” as reference above and the Bidders Name.

Submission of Quotations: Quotations along with the supporting documents and should be submitted to the address below within deadline (the date and time) as referenced below.

Date of deadline: 21st November, 2017;  Time of deadline: 16:00 hrs. (local time).
Date of opening: Quotations will be opened on the 21st November, 2017 at 16:30 hrs (local time) in presence of bidders who choose to attend. Bidders to make their own arrangements for attending such meeting. No expenses will be paid by MBMA to such effect.
Address: Meghalaya Basin Management Agency Office, MBDA Building, - Meghalaya State Housing Cooperative and Financing Society Campus, Upper Nongrim Hills, Shillong, PIN-793003
Attn:
Eligibility Criteria: Bidders are required to meet the following criteria to be eligible:

a). Have the legal capacity to enter into a contract;

b). Not be insolvent, in receivership, bankrupt or being wound up or subject to legal proceedings for any of these circumstances;

c). Not have had your business activities suspended or debarred from public procurement by the State Government of Meghalaya or Government of India

Documents Evidencing Eligibility: Bidders are requested to submit copies of the following documents as evidence of your eligibility.

a). Valid trading license or equivalent;

b). Valid certificate of VAT/GST registration or equivalent;

c). Self declaration to the effect the bidder is not insolvent, in receivership, bankrupt or being wound up or subject to legal proceedings for any of these circumstances.

d). Self-declaration that the bidders business activities are not suspended or debarred from public procurement by the State Government of Meghalaya or Government of India

Technical Criteria: The specification details the minimum specification of the Goods required. The Goods offered must meet this specification.

Currency: Quotations shall be priced in Indian Rupees only.

Best Evaluated Bid: The best evaluated bid shall be the lowest priced quotation, which is eligible and technically compliant.

Delivery: Prices should be quoted as applicable for Shillong, Meghalaya.

Duties and Taxes: Goods imported into India under this project are not exempt from import duties and taxes.

Rates: Applicable taxes to be quoted separately.

Delivery Schedule: Delivery required should be as per the time prescribed in the Purchase Order. The delivery of these items should be in Shillong at the O/o the Meghalaya Basin Management Agency, MBDA Building, - Meghalaya State Housing Cooperative and Financing Society Campus, Upper Nongrim Hills, Shillong, PIN-793003.

Terms of Payment:
Payment shall be made within 30 days against submission of your Invoice and supporting documents following delivery of the Goods.

Any resulting contract awarded shall be by placement of a Purchase Order.

Any queries should be addressed to the Project Management Team at the address given above. Please prepare and submit your quotation or inform the undersigned if you will not be submitting a quotation.

Yours faithfully
Sd/-
(Shri. S.M. Sahai, IFS)
Additional Project Director
Meghalaya Basin Management Agency
STATEMENT OF REQUIREMENTS
List of Goods and Price Schedule

Procurement Reference: ____________

We offer to supply the items listed below in accordance with the terms and conditions stated in your Request for Quotations referenced above.

We confirm that we are eligible to participate in public procurement and meet the eligibility criteria specified in the Request for Quotations.

The validity period of our quotation is: _______________ days/weeks/months.

We confirm that the prices quoted in the List of Goods and Price Schedule are fixed and firm for the duration of the validity period and will not be subject to revision or variation.

The delivery period offered is: _________days/weeks/months from date of Purchase Order.

CURRENCY OF QUOTATION: ________________

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Item</th>
<th>Total quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>External Hard Disk Drive</td>
<td>6 nos.</td>
</tr>
<tr>
<td>2.</td>
<td>Pendrive</td>
<td>2 nos.</td>
</tr>
</tbody>
</table>

Quotation authorised by:

Signature: ___________________________ Name: ___________________________
Position: ___________________________ Date: ___________________________
Authorized for and on behalf of: (dd/mm/yy)

Company: ___________________________________________________________________
# Technical Specifications

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Item</th>
<th>Required Specifications</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>External Hard Disk</td>
<td>Storage capacity – 1 TB</td>
<td>6 nos.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>USB Interface - USB 3.0</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Pen drive</td>
<td>Storage capacity – 16 GB</td>
<td>2 nos.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>USB 3.0</td>
<td></td>
</tr>
</tbody>
</table>