

AmulFed Dairy

A UNIT OF GUJARAT CO-OPERATIVE MILK MARKETING FEDERATION LIMITED

(Previously Known as Mother Dairy, Gandhinagar)

Request for Quotation (RFQ)

MDG: PUR: HSG: MCC

05 January, 2018

To,

Dear Sir,

Sub: **Request for Quotation (RFQ)** for "MCC as per annexure ".

We invite your most competitive offer for MCC as per detailed specifications. Your offer should be based on following considerations:

1. The offer should reach:-AmulFed Dairy (A Unit Of GCMFF Ltd), Previously known as Mother Dairy, Plot No-35, Nr. Indira Bridge, Ahmedabad - Gandhinagar Highway. Village Bhat, Dist - Gandhinagar. Pin - 382 424.
2. Due Date: January **17, 2018 Before 17:00 hours**
3. The offer should be submitted in sealed cover super scribing on the top left hand corner offer for AFD: PUR: HSG: "MCC as per annexure". If it is not super scribed it can be liable for rejection.
4. Offer received after due date for whatsoever reason may be rejected. We will not be responsible for postal delays.
5. Offer should valid for acceptance for 45 days from date for submission of offer.
6. The price should be quoted with all details.
7. Specify your tax condition. Non indication of above levies will mean that prices are inclusive of all taxes and above levies.
8. Realistic and earliest completion period should be indicated in offer.
9. It will not be binding on us to accept the lowest offer.
10. Right to accept/reject any/all offers without assigning reason is reserved by us.
11. Offers which are incomplete or not meeting the conditions are liable for rejection.
12. Payment terms within 30 days. If the payment term is document through bank, all banking charges shall be borne by the suppliers.
13. **Herewith this we are attaching vendor registration form please fill it up & provide along with offer, without vendor form offer must not consider.**
14. Offer should be sent through post or courier not by fax or personally.
15. The price should be quoted on F.O.R. basis inclusive of P&F, taxes and duties, freight etc. However if it is separate, it should be clearly mentioned in the quotation.
16. It should cover a warranty of at least one-year against manufacturing defect.
17. No queries regarding the status of the offer will be entertained at any time.
18. All the bidders have to visit site for better understanding of requirements on below mentioned scheduled date and time.

Plot No. 35, Nr. Indira Bridge, Ahmedabad-Gandhinagar Highway, Village: Bhat, Dist.:Gandhinagar, PIN 382428

Tel. No. (+91-79) 23969055 – 58, Fax No. (+91-79) 23969059

Website: www.amul.com

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19. All the bidders have to submit the detailed GA drawing with bid.

We are an ISO 9001: 2008, ISO 14001:2004 and ISO 22000:2005 company; we follow sustainable eco-friendly processes in our organization and expect the same to be followed at your end.

Note: Please visit AmulFed Dairy, Gandhinagar on 11/01/2018 at 3:00 P.M. to understand our requirement and to see old panel.

Mail id as mentioned below.

Shri Hardik Gajjar : hardik.gajjar@amul.coop

Shri Sunil Sharma : sunil@amul.coop

Shri Gaurav Desai : gaurav.desai@amul.coop

Yours Faithfully,

For AmulFed Dairy,

Purchase Depart.

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Annexure - "MCC FOR GHEE PACKING PLANT"

- We have fabricated MCC without switchgear in our plant and size are as under,
Compartment 1: L: 2200 MM,B: 420MM,H:2375MM (Available Near HT)
Compartment 2: L: 1390 MM,B: 420MM,H:2375MM (Available Near HT)
- Bidder has to visit site and check dimension and utilize this MCC box as per our new requirement.For that some minor modifiaction and fabrication work required.
- Bidder has to consider Aluminium busbar and copper cables for outgoing feeders.
- Bidder has to consider all new Swicth gear with Panel Locks,Powder coating with seven tank process,loading unloading cost from our site.
- Control wiring of DOL starter as per given drawing(Auto Manual switch+24V Relay+on feedback contact and Trip contact)
- All switchgear should be L&T /Siemens make.
- All Outgoing and incoming feeder's Start/Stop/Trip Buttons are in front side of MCC.
- In Main incomer equipped Voltmeter with VSS Switch and Multi function meter (L&T) with RS 485 com port, Indication lamp (R,Y,B,Trip)
- New Feeder list are,

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INCOMER -MCCB - 4 P ,400A WITH O/L,S/C,E/F PROTECTION (D SINE MCCB)			
SR NO.	FEEDER LST	KW	FEEDER DETAILS
1	1 LTR. REFILL	4.5	40 A TPN MCB
2	1 LTR. REFILL	4.5	40 A TPN MCB
3	500 ML REFILL	4.5	40 A TPN MCB
4	FILL PACK 2500	4	40 A TPN MCB
5	FILL PACK 5000	8	40 A TPN MCB
6	5 LTR SEAMER MACHINE	5	40 A TPN MCB
7	5 LTR SEAMER MACHINE	4	40 A TPN MCB
8	1 LTR TIN MACHINE	7	40 A TPN MCB
9	15KG TIN MACHINE	3.5	40 A TPN MCB
10	SPARE		63 A TPN MCB
11	SPARE		63 A TPN MCB
12	INTERNAL CONVEYOR		40 A TPN MCB
13	SPARE		40 A TPN MCB
14	CONVEYOR	1.7	40 A TPN MCB
15	40ML MACHINE	10	40 A TPN MCB
16	COADING STATION	4	40 A TPN MCB
17	LIGHTING	12	63 A TPN MCB
18	EXCHAUST FAN	16	40 A TPN MCB
19	LIFT	15	63A TPN MCB
20	TETRA PACK -TO MACHING TRANSFORMER		160 A TPMCCB O/L,S/C,E/F PROTECTION
21	TETRA PACK -FROM MACHING TRANSFORMER		160 A TPMCCB O/L,S/C,E/F PROTECTION
22	TBA	39	160 A TPMCCB O/L,S/C,E/F PROTECTION

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23	HELIX	4.7	40 A TPN MCB
24	TCBP	4.1	40 A TPN MCB
25	FEED PUMP FOR 1 LTR/5 LTR TIN	2.2	DOL-MPCB+CONTACTOR(AUTO/MAUAL SWITCH)
26	FEED PUMP FOR 15KG DRUM MACHINE	2.2	DOL-MPCB+CONTACTOR(AUTO/MAUAL SWITCH)
27	FEED PUMP FOR REFILL	1.5	DOL-MPCB+CONTACTOR(AUTO/MAUAL SWITCH)
28	FEED PUMP FOR POUCH	1.5	DOL-MPCB+CONTACTOR(AUTO/MAUAL SWITCH)
29	FEED PUMP FOR 40ML	1.5	DOL-MPCB+CONTACTOR(AUTO/MAUAL SWITCH)
30	FEED PUMP FOR BOTTOM TO TOP	2.2	DOL-MPCB+CONTACTOR(AUTO/MAUAL SWITCH)
31	FUTURE	3	DOL-MPCB+CONTACTOR(AUTO/MAUAL SWITCH)
32	SPARE	3	DOL-MPCB+CONTACTOR(AUTO/MAUAL SWITCH)
33	SPARE	3	DOL-MPCB+CONTACTOR(AUTO/MAUAL SWITCH)
34	SPARE		160 A TPMCCB O/L,S/C,E/F PROTECTION

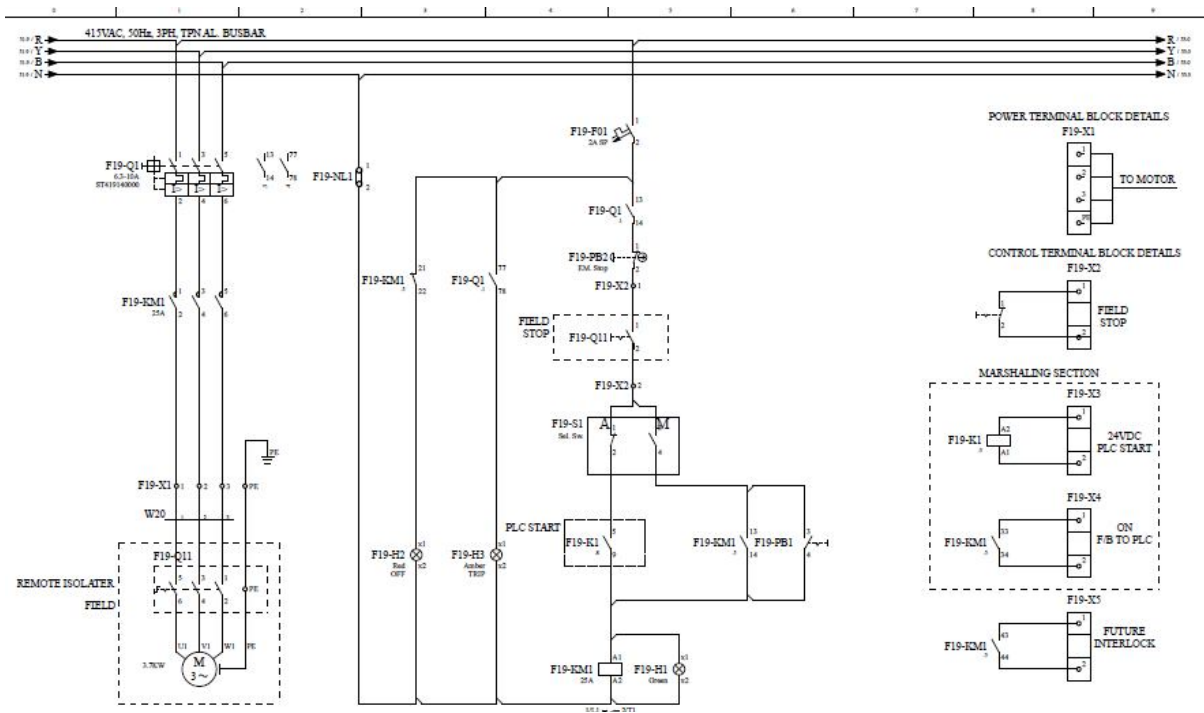
172 KW

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DOL-Sample-Control wiring Diagram





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VENDOR REGISTRATION FORM
(FOR AUTHORIZED DISTRIBUTORS/DEALERS/STOCKISTS/TRADERS/SERVICE PROVIDERS)

- (1) Category of item/Service for Which registration is sought :
- (2) Name Of Firm :
- (3) Add. Of Register Office :
- Phone No. & Fax No. :
- e-mail :
- (4) Name Of Contact Person (A'bad/Gujarat) :
- Status of Firm (outside Gujarat, if any)
- (5) In case of Partnership firm, :
- (a)
- (b)
- (c)
- (6) If Proprietary Concern Name & :
Address of proprietary
- (7) If Private/Public Limited Co. (Memorandum Of Association to be enclosed)
- (8) Year of establishment of firm :
- (9) Category of items to be handled by you and their details
- | Item Catg. | Size | Make | Manufacturer | Nature Of Agency |
|------------|------|------|--------------|------------------|
|------------|------|------|--------------|------------------|
- (Enclose copy of Dealership/Agency approval letter of manufacturer)
- (10) Name and address of the dealer/depot from where you get delivery of item offered to us.
- (11) Please enclose details of manufacturer for the products offered to us.
- (12) Central Sales Tax No.
- (13) If excise applicable, current excise duty and details
- (14) Applicable CST/ST rate
- GST no.
- (15) Last 03years sales (business) of your firm (Average in Rs. Lacs)
- 2015-16
- 2014-15
- 2013-14
- (16) List of leading buyers from you for the products (services) offered to us.

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(17) Item category Name and address of buyer Annual business (Rs. Lacs)

(18) Name Of Bankers

(19) IT clearance certificate no. and date (Photocopy to be enclosed)

(20) Latest Annual Report / Auditors' certificate

(21) In case your are/were a supplier/service provider to co-op. Dairies in Gujarat, please mention

(If then attach purchase order copy with form)

- (a) Name of Dairy
- (b) Item Supplied
- (c) Quantities supplied per year

(22) If the business is discontinued with any of them reasons:

(23) Whether any of your relatives is working with us or with our member dairies, if so, details

(24) Any other information you would like to furnish to us

DECLARATION

THE ABOVE IS TRUE IN ALL RESPECTS AND WE UNDER TAKE TO INFORM YOU IF ANY CHANGE IN THE ABOVE PARTICULARS REGARDING OUR BUSINESS FROM TIME TO TIME

PLACE : _____ SIGNATURE OF AUTHORISED REPRESENTATIVE
OF THE FIRM UNDER PROPER SEAL

DATE : _____

FOR OFFICE USE

VENDOR REGISTRATION NO.

DATE

CATEGORY

VENDOR NO.

INFORMATION RECEIVED

RECOMMENDED

APPROVED

COMPLETELY SATISFACTORY

PURCHASE EXECUTIVE

MANAGER PURCHASE

I/c GM