



(Previously Known as Mother Dairy, Gandhinagar)

Request for Quotation (RFQ)

MDG: PUR: HSG: Filler unit

01 April, 2017

To,

Dear Sir,

Sub: **Request for Quotation (RFQ)** for "Filler unit "as mentioned in annexure.

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

1. The offer should reach:-AmulFed Dairy (Previously known as Mother Dairy-A Unit Of GCMMF Ltd) Plot No-35, Nr. Indira Bridge, Ahmedabad - Gandhinagar Highway. Village Bhat, Dist - Gandhinagar. Pin - 382 424.
2. Due Date: April 11, 2017 Before 17:00 hours
3. The offer should be submitted in sealed cover super scribing on the top left hand corner offer for MDG: PUR: HSG: "Filler unit "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 against successful installation & trial run within 20-30 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.**

AmulFed Dairy

A UNIT OF GUJARAT CO-OPERATIVE MILK MARKETING FEDERATION LIMITED

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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: If required please visit premises with prior confirmation before quote. Please arrange visit between 2:00 P.M. to 5:00 P.M. in working day.

Mail id as mentioned below.

Shri Hardik Gajjar : hardik.gajjar@amul.coop

Shri Sunil Sharma : sunil@amul.coop

Shri Shailesh Modi : shailesh.modi@amul.coop

Yours Faithfully,

For AmulFed Dairy,

Purchase Depart.

DETAILED SCOPE OF WORK for filler unit

TECHNICAL SPECIFICATIONS OF PBM FILLER-SERVO BASED	
Description	AFD specifications
Output/Hour	2000 Lits/HR
Direction of Movement	Left to Right
Number of head/Nozzle	4 Nos
Fill Control	Servo and PLC control thro HMI
FILLING ACCURACY	+/- 0.5% for 200ml, +/- 0.2% for 500ml & 1000 ml
FILLING SYSTEM-NO BOTTLE NO FILLING	Required
Hose Pipe	Food Grade (Certificate Required)
Height of Conveyor	Approx. 900 mm
Machine Dimensions	As per design to which occupy minimum space
Container Neck Diameter	35mm
Pnuematic actuator for filling	Spirax(Forbes Marshall)
Container Size	Bottle (200ml-1lt)
Electrical supply	3 phase - Neutral
Electrical load	As minimum possible
Air Pressure	will Provide 6BAR
control panel	Seperate Control Panel-SS-304
sensor	P&F or Omron
pnuematic items	FESTO/SMC
SERVO AND PLC-MAKE	DELTA
GEAR BOX & MOTOR	Bonfinglioli
ELECTRICAL SWITCHGEARS	L&T/Siemens
CIP SYSTEM	Close Loop with water recover Facility
SAFETY GUARDS	Covers for Gear Box/Motor and other Moving Parts
Gear BOX Position	Vertical Mounting (Motor on Top)
Balance Tank	Seamless
Machine Design	Sanitary type
All food product contact area	As per FSSC (Certificate required)

Remarks

1 - supplier has to ensure that filler operation should synchronize with existing rinser and capper.

TRIAL :

1. Change over of 200 ml / 500 ml and 1000 ml
2. Weight variation trial with 500 bottles in each variants

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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
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(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
- (15) Last 03years sales (business) of your firm (Average in Rs. Lacs)
2012-13
2014-15
2016-17

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- (16) List of leading buyers from you for the products (services) offered to us.
- (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 Diary
(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

OSD