

Tele: 26194800
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Dte Gen of Naval Armament Inspection
Integrated Headquarters
Ministry of Defence (Navy)
West Block V, RK Puram
New Delhi – 110 066

AI/9101/AIIMS

05 Nov 21

**ACCORD OF ACCEPTANCE OF NECESSITY (AoN) FOR IMPLEMENTATION OF
ARMAMENT INSPECTION INFORMATION MANAGEMENT SYSTEM (AIIMS)**

1. Refer to:-

(a) IHQ MoD(N)/DGNAI Letter AI/9101/AIIMS dated 30 Jul 21.

(b) Request for Information (RFI) (Ref. No. AI/9101/AIIMS dated 22 May 19) for shortlisting of vendors/ system integrators for implementation of Armament Inspection Information Management System (AIIMS).

2. Consequent to accord of Acceptance of Necessity (AoN) by Competent Authority in Jul 21, response of vendors or System Integrators (SI) for participation in RFP process was sought vide IHQ MoD(N)/DGNAI letter at Para1(a).

3. Interested vendors who have not responded to either IHQ MoD(N)/DGNAI letter at Para1(a) or RFI may respond quoting this document. Details of the project have been published vide RFI under reference. Copy of RFI and other details may be obtained from the address mentioned at Para 4(b) below.

4. Procedure for Response.

(a) Vendors must respond and fill the forms at enclosure of this document (two copies).

(b) The response must be made to the following address:-

The Commodore (NAI)
Directorate of Naval Armament Inspection
Wing-1, FF
West Block-V
RK Puram
New Delhi – 110 066
Email: dgnai-navy@nic.in
Phone:011-26194800
Fax:011-26194273

(c) **The last date of acceptance of filled forms is four weeks from the date of publishing of this document.** The vendors shortlisted for issue of RFP would be intimated.

5. The Government of India invites responses to this request only from authorised agencies. *The firms having proven credentials, technical expertise, financial soundness, credibility and requisite know-how for execution of large scale projects would only be shortlisted for issuing RFP.* The end utilisation of the services is by Indian Navy.
6. This information is being issued with no financial commitment and the Ministry of Defence reserves the right to change or vary any part thereof at any stage, the Government of India also reserves the right to withdraw it, should it be so necessary at any stage.
7. The acquisition process would be carried out under the provisions of DAP-2020.



(MAK Shetty)
Commodore
Cmde(NAI)
for DGNAI

Encl:- As above

FORMAT FOR RESPONSE

COVERING LETTER

Company Letter Head

The Commodore
(for Project Officer – AIIMS)
Directorate of Naval Armament Inspection
Wing-1, FF
West Block-V
RK Puram
New Delhi – 110 066

Reference: IHQ MoD(N)/DGNAI letter AI/9101/AIIMS dated 20 Oct 21

Dear Sir,

1. This is to notify you that our company intends to participate in the RFP for "Implementation of Armament Inspection Information Management System (AIIMS)".
2. Primary and Secondary contacts for our company are:-

	<u>Primary Contact</u>	<u>Secondary Contact</u>
Name		
Designation		
Company Name		
Address		
Telephone		
Mobile		
Fax		
E-Mail		

3. We confirm that the information contained in this response or any part thereof, including its exhibits, and other documents and instruments delivered or to be delivered, are true, accurate, verifiable and complete. The response includes all information necessary to ensure that the statements therein do not in whole or in part mislead MoD in its shortlisting process.
4. We fully understand and agree to comply that verification, if any of the information provided here is found to be misleading the short listing process or unduly favors our company in the shortlisting process, we are liable to be dismissed from the selection process.

5. We undertake that we will deploy only persons of Indian Passports or Citizens of India in the execution of this project in the event our company gets selected for the execution of this project.

6. It is hereby confirmed that I/ We are entitled to act on behalf of our corporation/ company/ firm/ organisation and empowered to sign this document as well as such other documents, which may be required in this connection.

Date:

**(Signatory)
(In capacity of)**

Duly authorized to sign the RFI response for and on behalf of

Sincerely,

Signature:

Name:

Designation:

Name and Address of Company:

Date:

(Seal/ Stamp of Company)

Certificate as to Authorised Signatories

I, Certify that I am _____ of the _____, and that _____ who signed the above response is authorized to bind the corporation/ company by authority of its governing body.

(Company Seal)

Date:

INFORMATION PROFORMA

<u>Ser</u>	<u>Details</u>	<u>Document Required</u>	<u>Response/ Compliance</u>	<u>Remarks</u>
<u>General</u>				
1.	Name, Address and Unique ID (if any) of the Vendor/ Company/ Firm	Certificate of Incorporation – from RoC, MoA and AoA		-
2.	<u>Type</u> (a) Original Equipment Manufacturer (OEM) (b) System Integrator (SI) (c) Authorised Vendor of foreign Firm (d) Others (give specific details)	- - Attach details Attach details	Yes/ No Yes/ No Yes/ No Yes/ No	- - - -
3.	<u>Contact Details</u> Postal Address Telephone Fax Email URL/ Website	-		-
4.	<u>Local Branch/ Liaison Office at Delhi (if any)</u> Name & Designation Postal Address Telephone Fax Email	-		-
5.	Details of operating locations	-		-
<u>Financial Details</u>				
6.	<u>Category</u> Category of Industry (Large/ Medium/ Small Scale)	-		-
7.	<u>Turnover</u>	Audited/ certified		-

<u>Ser</u>	<u>Details</u>	<u>Document Required</u>	<u>Response/ Compliance</u>	<u>Remarks</u>
	Annual Turnover (in INR) for last FY	financial statements as per format at Appendix A. Audited Balance Sheet		
8.	<u>Networth</u> Networth of Company as per latest financial statement			-
9.	<u>Insolvency</u> The bidder should not be under insolvency resolution as per IBC.	Undertaking from Authorised Signatory		-
<u>Previous Experience</u>				
10.	<u>Years of Experience</u> Number of years of experience in implementing large scale projects of ERP/ PLM/ EAM/ MRO.	Citations as per format at Appendix B. Work orders/ completion certificates of experience cited. In case of		Citations of projects to be included to show no. of years of experience. May include experience in integration projects.
11.	<u>Cumulative Experience</u> Cumulative experience in ERP/ PLM/ EAM/ MRO resulting in gaining of competence for implementing large scale projects.	unavailability of work order/ completion certificate due to NDA, vendors are allowed to submit an		Citations of projects to be included to show no. of years of experience.
12.	<u>Operations & Maintenance</u> Previous experience in projects involving Operations & Maintenance (Warranty, Technical Support and CAMC).	undertaking by the authorized signatory.		Citations of projects to be included to show no. of years of experience.
13.	<u>Integration</u> Previous experience in projects involving integration.			Citations of projects to be included to show no. of years of experience.

<u>Ser</u>	<u>Details</u>	<u>Document Required</u>	<u>Response/ Compliance</u>	<u>Remarks</u>
14.	<p><u>Turnkey Projects</u></p> <p>Details and value of similar turnkey projects successfully completed within last 05 years.</p> <p>Or</p> <p>Details and value of similar turnkey projects/ contracts currently being executed.</p>			Citations of projects to be included to show details and value of project. <i>In case large number of projects, three projects with highest value may be included.</i>
<u>Quality Control</u>				
15.	CMMI Level for IT/ Software Development Services in India	Copies of relevant certificates and details as per format at Appendix C.		Level of CMMI to be indicated.
16.	ISO 20000 for Service Management in India			-
17.	ISO 27000 for Information Security in India			-
<u>Proposed Solution</u>				
18.	<p>Solution for:-</p> <p>(a) Inspection Life Cycle Management</p> <p>(b) Asset Management</p> <p>(c) Document Management</p> <p>(d) Human Resource Management</p> <p>(e) Reporting & Analysis</p>	Undertaking from the OEM confirming association.		<p>Details of proposed solutions suiting to the requirement of AIIMS may be appended.</p> <p>More than one solution can be proposed.</p>
19.	<p><u>OEM partnership</u></p> <p>Bidder must have authorised partnership(s) with solution/ product OEM(s) proposed.</p>	Copy of MoU with solution/ product OEM or undertaking from OEM confirming association.		
<u>Misc</u>				
20.	<u>Operations & Maintenance</u>	Undertaking from the OEM confirming		-

<u>Ser</u>	<u>Details</u>	<u>Document Required</u>	<u>Response/ Compliance</u>	<u>Remarks</u>
	Warranty for three (03) years post commissioning of system. CAMC for four (04) years post expiry of warranty period. Technical Support for seven (07) years post commissioning of system.	support for seven(07) years.		

FORMAT – FINANCIAL INFORMATION

<u>Financial Information</u>	<u>FY-2020-21</u>
Category of Industry (Large/ Medium/ Small Scale)	
Annual Turnover (in INR crores)	
Annual Turnover from IT related services (in INR crores)	
Profit After Tax (in INR crores)	
Net Worth (in INR crores)	
Number of Employees in the firm:	
Other Relevant Information:	

Note: Please attach relevant sections of the documentary proofs.

(Company Secretary/ Statutory Auditor)

Company Seal

Place : _____

Date : _____

FORMAT – IMPLEMENTATION EXPERIENCE

Assignment Name:	
Country:	
Location within Country:	
Name of Client:	
Address:	
Start Date (Month/year):	
Completion Date (Month/year):	
Project Completion Certificates:	
Acceptances from Concerned Officers:	
Approximate value of the contract:	
Duration of assignment (months):	
Total No of staff-months of the assignment:	
Approx. value of the services provided under the contract (in Current INR):	
No of Months of Professional Staff Provided by Associated Consultants:	
Name of senior professional staff of your firm Project Manager:	
Narrative Description of Project:	
Description of Actual Services Provided by SI/ Vendor:	

Note: Please attach relevant documentary proofs

(Authorised Signatory of company)

Company Seal

Place : _____

Date : _____

QUALITY CERTIFICATION

Name of Certificate	
Valid Till	
Certified Entity	
Units/ Locations Assessed	
Issuing Authority	
Other Relevant Information (Enclose copy of certificate)	

Note: Please attach copy of certificate.

(Authorised Signatory of company)

Company Seal

Place : _____

Date : _____