



(Previously Known as Mother Dairy, Gandhinagar)

## Request for Quotation (RFQ)

AFD: PUR: HSG: MCC for UF

04 Dec., 2025

To,

Dear Sir,

Sub: **Request for Quotation (RFQ)** for “MCC for UF” as mentioned in annexure.

We invite your most competitive offer for **MCC for UF Plant** 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: **Technical due date December 11, 2025 before 16:00 hours.**

**Commercial due date December 16, 2025 before 17:00 hours.**

3. The offer should be submitted in portal only.

4. Offer received after due date for whatsoever reason may be rejected.

5. Offer should valid for acceptance for 90 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 after successful installation and commissioning of MCC within 30 days of invoice receipt. If the payment term is document through bank, all banking charges shall be borne by the suppliers.

13. **Please find below link to register your firm on Purchase Portal. Without completing registration process on portal can't submit offer. First of all, register your firm on shared link so can send inquiry through portal only. Vendors need to submit technical first. Only after technical clearance you will be able to submit commercial figures/values.**

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](http://www.amul.com)



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Interested bidders have to register your firm in our Purchase portal.

Website for our portal is as >>>: <http://afdpurchase.amul.in/>

Click Below links for Guidelines :

1. [Guide for VRF - MANUFACTURERS](#)

**14. Eligibility criteria: Must have executed similar type of order in last 5 year. Share credentials of the same. Bidder has valid electrical contractor licence. CPRI approved.**

We are an ISO 9001: 2015, ISO 14001:2015, ISO 22000:2018, ISO 50001:2018 and ISO 45001:2018 company; we follow sustainable eco-friendly processes in our organization and expect the same to be followed at your end. We emphasis on energy efficient system and utilization of renewable energy systems in eco-friendly and sustainable way.

**Rates must be inclusive of installation & commissioning.**

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.

: We may go for reverse auction/negotiation. If required we may ask for PBG.

Mail id as mentioned below.

Shri Hardik Gajjar : [hardik.gajjar@amul.coop](mailto:hardik.gajjar@amul.coop)

Shri Bhargav Kanabar : [bhargav.kanabar@amul.coop](mailto:bhargav.kanabar@amul.coop)

Shri Gaurav Desai : [Gaurav.desai@amul.coop](mailto:Gaurav.desai@amul.coop)

Yours Faithfully,

For AmulFed Dairy,

Purchase Depart.



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TECHNICAL SPECIFICATION

A) SUPPLY, INSTALLATION, TESTING AND COMMISSIONING OF NON-  
COMPARTMENT- MCC FOR UF PLANT

Sr. No.	Description	Type	Rating
1	Incomer	MCCB -Four Pole ,50 kA with ROM with MP based OC, SC & EF protection released with RS485 multi-function meter. R/Y/B/ON/OFF/TRIP INDICATION	630 A
2	UF plant	MCCB -Four Pole ,50 kA with ROM with MP based OC, SC & EF protection released with RS485 multi-function meter. R/Y/B/ON/OFF/TRIP INDICATION	400 A
3	Protein dispatch pump	DOL-MPCB + Contactor, Auto/Manual Switch. On-Off PB With Indication, Trip indication, Relay for Run Command, Run Feedback, Trip Feedback	4 KW
4	Lactose transfer pump to 60/ 150 TPD	DOL-MPCB+Contactor, Auto/Manual Switch, On-Off PB With Indication, Trip indication, Relay for Run Command, Run Feedback, Trip Feedback	5.5 KW
5	Lactose tank CIP return pump	DOL-MPCB+Contactor, Auto/Manual Switch, On-Off PB With Indication, Trip indication, Relay for Run Command, Run Feedback, Trip Feedback	4 KW
6	Protein tank CIP return pump	DOL-MPCB+Contactor, Auto/Manual Switch. On-Off PB With Indication, Trip indication. Relay for Run Command, Run Feedback, Trip Feedback	4 KW
7	Lactose tank 1 agitator	DOL-MPCB+Contactor, Auto/Manual Switch. On-Off PB With Indication, Trip indication. Relay for Run Command, Run Feedback, Trip Feedback	3 KW
8	Lactose tank 2 agitator	DOL-MPCB+Contactor, Auto/Manual Switch, On-Off PB With Indication, Trip indication, Relay for Run Command, Run Feedback, Trip Feedback	3 KW
9	Protein tank agitator	VFD-DANFOSS FC-302 with Display Including Coated PCB and 1 no General-purpose IO card, MPCB+VFD, ON/OFF/TRIP indication, Control MCB Auto/Manul Switch, Relay. Run Command, run feedback, Trip feedback	3 KW

# AmulFed Dairy

A UNIT OF GUJARAT CO-OPERATIVE MILK MARKETING FEDERATION LIMITED

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10	CIP forward pump	VFD-DANFOSS FC-302 with Display Including Coated PCB and 1 no General-purpose IO card. MPCB+VFD. ON/OFF/TRIP indication, Control MCB Auto/Manul Switch, Relay Run Command, run feedback, Trip feedback	11 KW
11	Pump 60 TPD to UF	VFD-DANFOSS FC-302 with Display Including Coated PCB and 1 no General-purpose IO card MPCB+VFD ON/OFF/TRIP indication, Control MCB Auto/Manul Switch, Relay Run Command, run feedback, Trip feedback	4 KW
12	Spare 1	DOL-MPCB+Contactor, Auto/Manual Switch. On-Off PB With Indication, Trip indication. Relay for Run Command, Run Feedback, Trip Feedback	5.5 KW
13	Spare 2	DOL-MPCB+Contactor, Auto/Manual Switch. On-Off PB With Indication, Trip indication. Relay for Run Command, Run Feedback, Trip Feedback	4 KW
14	Welding points	63A-RCCB=1 NO, 63A-MCB=2 NOs, 32A-DP MCB=4 NOs	
15	MARSHILING COMPARTMENT	<ul style="list-style-type: none"> <li>• Communication Protocol Is Profibus.</li> <li>• ET 200SP Station for Marshaling Rack.</li> <li>• Each DOL /VFD has 2 Nos DI Input (Run +Trip),1No. Output DO (Cmd).</li> <li>• VFD has 1 No. Analog Input for Current And 1 Nos. Analog Output for Control.</li> <li>• Dual Power Supply with Diode Module for IM and Field.</li> <li>• Relay Terminal For DO.</li> <li>• Standard Color Code Wiring For DI, DO, AI And AO</li> </ul> <p>Consider 20% Spare Input Output for Future Expansion.</p>	



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- **Loose Supply, Installation, testing and commissioning of VFD with Below details accessories and installation required in another plant panel. (location 100 tpd plant panel)**

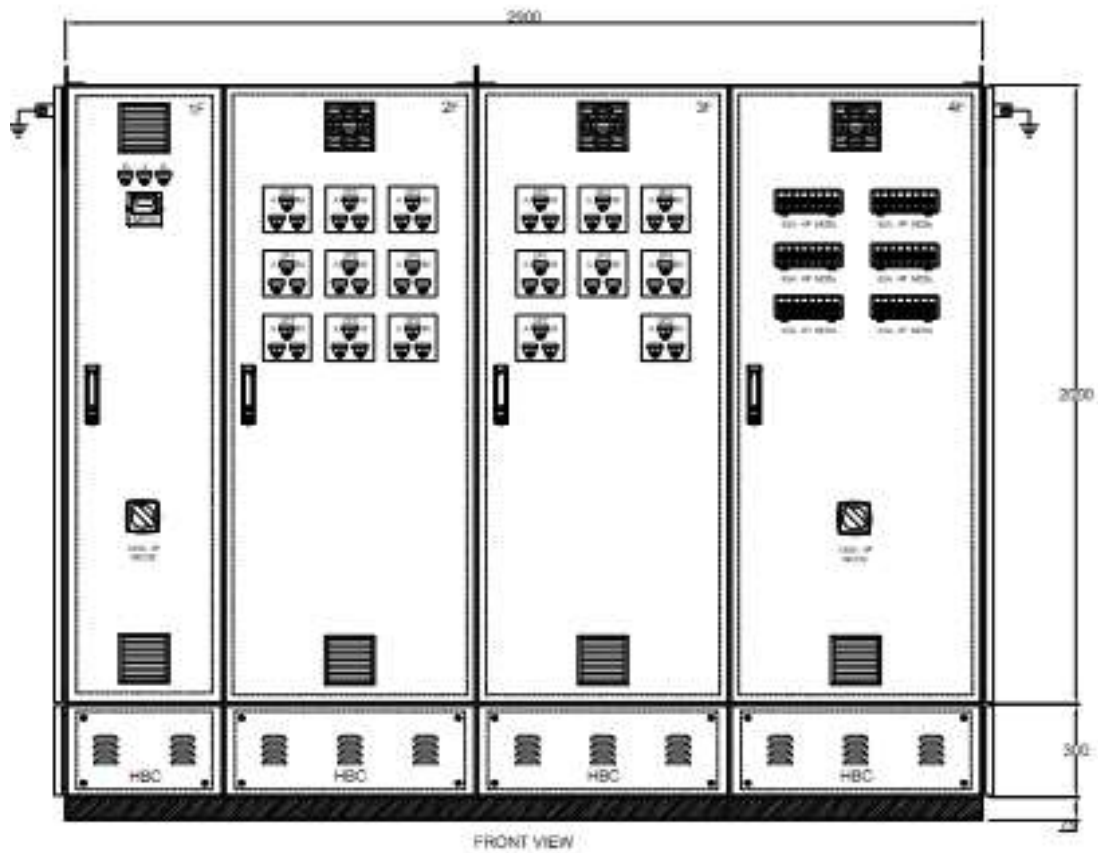
1	Pump 100 TPD to 60 TPD (Feeder Installation in NPP panel)	VFD-DANFOSS FC-302 with Display Including Coated PCB and 1 no General-purpose IO card (With Profibus communication)  MPCB+VFD ON/OFF/TRIP indication, Control MCB Auto/Manul Switch, Relay Run Command, run feedback, Trip feedback	11 KW
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# AmulFed Dairy

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## APPROX. DESIGN ARRANGEMENT





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### MAKE LIST:

MCCB/MCB/MPCB/CONTACTOR/	LK-L&T/SCHNEIDER/SIEMENS
RELAY	PLA/OMRON
LED PUSH BUTTON WITH INDICATION	TEKNIC/ LK-L&T/SCHNEIDER/SIEMENS
MULTI FUNCTION METER/DIGITAL AMETER/DIGITAL VOLT METER	LK L&T/SCHNEIDER/SIEMENS/CONSERVE
POWER-CONTROL CONNECTOR	ELMAX/CONNECTWELL
WIRE-FRLS	RR/KEI/POLYCAB/HAVELLS
AURO/MANUAL SELECTOR SWITCH	SALZER/ LK-L&T/SCHNEIDER/SIEMENS
EPOXY RESIN CURRENT TRANSFORMER	RISHABH/ ASHMOR/VIRAT
PLC MODULE	SIEMENS
POWER SUPPLY	SIEMENS/MEANWELL
PLUG SOCKET-IP 67	LEGRAND/SCHNEIDER
POWER CABLE-COPPER	POLYCAB/KEI/RR KABEL/LAPP
CONTROL CABLE-COPPER SHIELDED	LAPP
VFD	DANFOSS FC-302 WITH DISPLAY



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### GENERAL REQUIREMENTS:

- Required Valid Electrical Contractor License.
- Required CPRI approval for Panel.
- Bidder has to Visit the Location and Area for New Panel Installation Work and entire scope of work.
- Panel Should be Non-Compartmental Type.
- Panel Material Should be MS CRCA Powder Coating Door/Partitions/ Mounting Plate/Gland Plate-2 Mm, With Siemens Grey-7032 Color
- Control Wire-FRLS 1.5 mm<sup>2</sup> Copper, 1.1 KV for Indication Ckt, 2.5 mm<sup>2</sup> or CT, 4 mm<sup>2</sup> for Earthing.
- CT Should Be Epoxy Resin Type.
- Main Busbar -Aluminum with Current Density 0.8 A/M<sup>2</sup>
- Degree Protection IP - 55 (IS/IEC 61439-2: 2011) With PU Gasket and Heavy-Duty Door Locks for All Doors.
- Hardware Zinc Passivated (Golden & Silver Plated) Corrosion Resistance.
- Ferrules Computerized Printed on White Sleeve at Both End of Control & Power Ckt.
- Cable Entry Incoming Top/bottom Side, Out Going Top Side.
- Fault Level 50KA. Rms For 01 Sec. (Is 8623 - Part 1 - 1993)
- Name Plate & Labeling Self Adhesive, Laser Engraved with Black Background & White Letters.
- Inspection call required before final dispatch with all testing of feeders control and power wiring.
- Marshalling RACK communication Protocol is Profibus
- Internal wiring of Marshalling Rack shall be LAPP make cable.
- Power and control EARTHING should be isolated.
- Loading and Unloading of Panel is in the scope of vendor.





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**On Letter Head of Vendor / Customer.**

To,  
General Manager  
AmulFed Dairy (A Unit of GCMF Ltd.)  
Village:- Bhat,  
Near Indira Bridge,  
Gandhinagar-382 428

Dear Sir,

**Sub : Fund Transfer Payments.**

I/we request and authorise you to effect Fund Transfer Payment to my / our Bank account as per the details given below (Please map our account in your SAP):

Vendor Name:- : \_\_\_\_\_  
Vendor Code : \_\_\_\_\_  
Bank Account Name : \_\_\_\_\_  
Bank Account Number : \_\_\_\_\_  
Branch Name & Address of Bank: \_\_\_\_\_  
\_\_\_\_\_  
Email Id : \_\_\_\_\_  
Permanent A/c Number (PAN) : \_\_\_\_\_  
Name of the Auth signatory : \_\_\_\_\_  
Contact Person : \_\_\_\_\_  
Contact Number : \_\_\_\_\_  
IFSC code : \_\_\_\_\_  
MICR Code : \_\_\_\_\_  
Type of Account : Savings / Current / Cash Credit

I, hereby declare that the particulars given above are correct. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I would not hold the user institution responsible. I hereby authorise Bank ( as mentioned above) to credit my above mentioned account with the amount of instalment and I agree to discharge the responsibility expected of me as a participant under the scheme.

Date: \_\_\_\_\_

Signature of Account Holder (s)

- Mandatory fields -cannot be left blank.
- Kindly attach a blank cancelled cheque with this mandate form.

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**Bankers Attestation -**

**CERTIFIED THAT THE PARTICULARS FURNISHED ABOVE ARE CORRECT AS PER OUR RECORDS.**

BANK STAMP \_\_\_\_\_

DATE : \_\_\_\_\_ SIGNATURE OF BANK OFFICIAL