



Government Of Maharashtra
Sarpvopchar rugnalya, Dhule
QUOTATION

U.P.C.

DUE DATE : 30 / 12 / 2024

SRD/NON IP Surgical Store / 16085/2024

DATE: 29 / 12 / 2024

Phone- 02562 239407

Fax No. 02562 239207

To.

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Sub:- Quotation for the supply of Non IP Surgical (Open Quotation)

You are requested to submit your lowest bid for Non IP Surgical Instrument items the quotation should be reach this office in sealed envelope or before 30/12/2024 until 5:00 PM . Quotation requirement is also published on and Sarpvopchar Rugnalya, Dhule.

The Dean Sarpvopchar Rugnalya ,Dhule reserve the right to accept, Recall OR Reject any or all Quotations without assigning any reason.

Other instruction and term and condition regarding quotation are mentioned below the Non IP Surgical Instrument items.

Non IP Surgical Items

Sr. No.	Name of Item	Specifications & Packing Size
1	S.S. Tray with cover	S.S. Tray with cover
2	S.S. Kidney Tray	Medium Size
3	S.S. Examinations Bowl	S.S. Examinations Bowl
4	FCG Paper Roll Z. Folder	AT-1G2 Company Name Size 80 mm X 70mm

Instruction and terms and condtion regarding Quotation :-

1. Interested vendors should submit the quotation as per given format only. Vendors need to specify Manufacture and brand in the quotation and same supply need to be supplied.
2. Quotation must be submitted in sealed envelope only.
3. The quotation and envelope should be address to The Dean Sarpvopchar Rugnalya, Dhule.
4. Vendors must write quotation reference number and last date of submission the quotation on the envelop.
5. Any amendments regarding the quotation will be published on website www.sbhgmedhule.org Vendors will not be communicated separately regarding the amendment.
6. However if the vendor fails to check any of these amendment on E website then it will be presumed that the vendor has quoted his/her rates by taking the note of these amendments.
7. Rate should be quoted inclusive of all taxes, GST, etc. rate must be written in both figure and words.
8. Rate should be valid for six months from the date of opening the quotation.
9. Rate must be quoted for official Pharmacopeia standards i.e. IP/Non IP/USP only and same be supplied.
10. Delivery period is 24 hours to 10 (Ten) days from the receipt of order, as per availability of the items.



11. Successful vendors if fails to supply the goods within stipulated delivery period he is liable for the necessary action, which deem may fit.

Note :-

1. Quote this office reference of the top of the envelope with due date
2. Document attached For 1. Valid WHO GMP Certificate and WHO GMP product list or COPP for Qu Items.
3. In House Test report For Purchased Item
4. National Accreditation Board for testing and calibration Laboratories (NABL test report) compulsory.
5. Non Convocation certificate issued from concern FDA for Manufacture/Distributor.
6. For Consumables : ISO 13485 (International Organization for Standardization) ISO 17025, ISO 45001, ISO 14001, GMP (Goods Manufacturing Practices) / Schedule M, Quality management System (QMS) for Medical Devices Central Drug standard control Organization (CDSCO) approved MD License
7. FDA drug license 2. GST registration Certificate 3. PAN card 4. Experience certificate. 5) Shop act (a
8. Last date of submission of quotation 30/12/2024 before 05:00 pm.



DEAN

Sarvopchar Rugnalya, Dhule.

दरपत्रकधारकाचे लेटरहेड

दिनांक- / /२०२४

प्रति.

अधिष्ठता,

श्री. भाऊसाहेब हिरे शासकीय

वैद्यकीय महाविद्यालय व सर्वोपचार रूग्णालय, धुळे.

विषय :- दरपत्रक मागणी पत्रातील सर्व अटी व शर्ती मान्य असल्याबाबत हमीपत्र सादर करणेबाबत..

संदर्भ :- आपले दरपत्रक मागणी पत्र/ जा.क्र.सरुधु/नॉन आयपी शल्यवस्त्रभांडार /दरपत्रके/ /२०२४

दिनांक:- / /२०२४.

महोदय.

संदर्भाकित दरपत्रक मागणी पत्रातील सर्व अटी व शर्ती मी वाचून दरपत्रक दरपत्रकक्रियेसाठी सादर करीत आहे. सर्व अटी व शर्ती मान्य असून तदसंबंधीचे हमीपत्र खालीलप्रमाणे सादर करीत आहे.

हमीपत्र

याद्वारे हमी देतो की, दरपत्रक मागणी पत्रात नमूद असलेल्या सर्व अटी व शर्ती मान्य असून त्यांचे तंतोतंत पालन करण्यात येईल. तसेच दरपत्रक सिलबंद लिफाफ्यात सादर करण्यात आलेली सर्व माहिती, दस्तावेज व करारनामे इ. भविष्यात असत्या/ बनावट/अवैध आढळून आल्यास, त्यास सर्वस्वी जबाबदारी आमची राहिल. नियमानुसार होणाऱ्या कार्यवाहीस मी/ आम्ही पात्र असू. तदसंबंधी माझी/ आमची कुठलिही हरकत राहणार नाही. अशी याद्वारे हमी देत आहे.

अधिकृत व्यक्तित्वे नाव, स्वाक्षरी

शिकका आणि स्वाक्षरी

