



Government Of Maharashtra

Shri Bhausaheb Hire Govt. Medical College Dhule

U.P.C.

QUOTATION

DUE DATE : 30 / 09 / 2024

SBHGMCD/Chemical Store /Chemical & Reagents/ 11255/2024

DATE 25/09/2024

Phone- 02562 239407

Fax No. 02562 239207

To,

Open Notice

Sub:- Quotation for the supply of Chemicals kits, Glasswear & Reagents (Open Quotation)

You are requested to submit your lowest bid for Chemicals kits, Glasswear & Reagents items the quotation should be reach this office in sealed envelope or before 30/09/2024 until 5:00 PM . Quotation requirement is also published on and Shri Bhausaheb Hire government medical college ,Dhule.

The Dean Shri Bhausaheb Hire government medical college ,Dhule reserve the right to accept ,Recall OR Reject any or all Quotations without assigning any reason.

Other instruction and trem and condition regarding quotation are mentioned below the Chemicals kits, Glasswear & Reagents items.

Chemicals kits, Glasswear & Reagents items list

Sr. No.	Name of Item	Specifications
1	Deionized water	10 Liter Jar PH 7.0 TDS Less Than 1.5 Conductivity 8.75us/cm colorless Bacteria Nil High grade water
2	Hand wash Solution	1500 ml Packing Size
3	Powder free Nitrile gloves	Powder free Large size Violet color gloves

Instruction and terms and condtion regarding Quotation :-

1. Intrested vendors should submit the quotation as per given format only. Vendors need to specify Manufactire 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 Shri Bhausaheb Hire government medical college and Hospital, Dhule.
4. Vendors must write quotation reference number and last date of submission the quotation on the envelop.
5. Any amedments regarding the quotation will be published on website www.sbhgmcdhule.org <https://www.med-edu.in> Vendors will not be communicated sepreatly regarding the amendment.
6. However if the vendor fails to check any of these amendment on ebsite 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 Pharmacopia standards i.e. IP/ USP only and same be supplied.
10. Delivery period is 24 hrs 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 further necessary action,which deem may fit.

Note :-

Quote this office reference of the tp of the envelope with due date

1. Manufactures authorization letter inmanatory for all above material
2. Demo sample required to be submitted to Shri Bhausaheb Hire government medical college, Dhule at Chemical store for quoted all material for its testing. The submitted demo material will be not return back to the vendor irrespectiveof its qualification or disqualification.
3. Document attached For 1. FDA drug licence 2. GST registration Certificate 3. PAN card 4. Experience certificate. 5) Shop act
4. Last date of submission of quotation 30/09/2024 before 05:00 pm.

DEAN,

Shri Bhausaheb Hire Govt.
Medical College, Dhule.

दरपत्रकधारकाचे लेटरहेड

दिनांक- / /२०२४

प्रति,

अधिष्ठता,

श्री. भाऊसाहेब हिरे शासकीय
वैद्यकीय महाविद्यालय, धुळे.

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

संदर्भ § आपले दरपत्रक मागणी पत्र/ जा.क्र.शावैमधु/भांडार क/दरपत्रके/ /२०२४
दिनांक:- / /२०२४.

महोदय,

संदर्भाकित दरपत्रक मागणी पत्रातील सर्व अटी व शर्ती मी वाचून दरपत्रक दरपत्रकक्रियेसाठी
सादर करित आहे. सर्व अटी व शर्ती मान्य असून तदसंबंधीचे हमीपत्र खालीलप्रमाणे सादर करित 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 लिफाफयात सादर करण्यात आलेली सर्व
माहिती, दस्ताऐवज 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 व्यक्तिचे नाव, स्वाक्षरी
शिक्का आणि स्वाक्षरी