महाराष्ट्र शासन

Chhatrapati Pramila Raje General Hospital, Kolhapur (Surgical Store)

Fax: (0231) 2645279 cprmedstore@gmail.com Tel: (0231) 2641326 Date: 17/6/2020 No. CPRGHK/SS/ ABGLab/

: Quotation for SIMENS Made Close System ABG Machines Lab

Material For CVTC Department.

Reference :1) As per Requirment consion Department.

2) As per Approved Dean Note as on 12.06.2020

Please arrange to give your lowest possible rates for the below mentioned items.

Sr.no.	Product name	Pack size	MRP (in Rs.)	Rates (Including GST) (in Rs.)
01	SAMPLE & REAGENT PUMP TUBING	2 PIECES		
02	BUFFER PACK RL 348	4x90 ML		
03	WASH / CONDITIONING RL 348	4 x450ML		

Terms and Conditions:

- 1) All rights are reserved by The Dean, C.P.R. General Hospital, Kolhapur to reject any or all quotations without assigning any reason.
- 2) Only Authorised SIMENS Dealer are Quote the lowest possible rates for above mentioned items and long Expire Date. Quotation must be given on suppliers letter head. Write the MRP per item and do not chang the sr.no. of item.
- Sealed quotation should reach to this office on or before Date: 24 / 6 /2020 up to 05-00 p.m. positively. Quotation received after above mentioned date and time will not be entertained. This office is not liable for any delay of Post Office or Courier Agency or at any other conditions.
- 4) If you failed to supply the material, after confirm order, the order will be diverted to next lowest rates provider and in this case the difference between first lowest and second lowest should be born by you.
- 5) The rates quoted should be inclusive of service Tax, excise duty, GST, Transportation, Insurance, packing and forwarding charges etc., but not include L.B.T. duty. Rates should be within the market rate limits and should not be more than M.R.P. at any circumstances. At any stage of the quotation process even after completion of the process if it is found that the rates mentioned are more than the M.R.P., the supplier is responsible for refund the difference with interest to this office.
- 6) Attach the self attested photo copies of PAN Card, GST Registration Certificate, Shop Registration Certificate (Shop Act License etc.) or any other registration certificate necessary for operating your business. And Letter of SIMENS Dealership Authorisation.

7) Sample Should be approved by HOD CVTC Department.

8) Please superscript the envelope with "QUOTATION NO. 102/20" (Lab Material)

Dean, 16:06 P. M. Chhatrapati Pramilaraje General Hospital, Kolhapur.

Copy for Publishing on Wetsite

Professor And H.O.D., Dept. of P.S.M. and President,

Website Developement Committee, C.P.R. Hospital, Kolhapur.