

Govt. Of Maharashtra
Chhatrapati Pramila Raje General Hospital, Kolhapur - 416002.
Mahatma Jyotiba Phule Jan Aarogya Yojana.

Tel: (0231) 2641583

To, No. CPRGHK/4399

By Regd. A.D / U.P.C.
/ 2026

Date : - / - /2026

12 AUG 2026

M/s. -----

Subject :- Quotation Call For MJPJAY – Ortho

Reference :- As per Sanctioned Notesheet Date :- 11 / 08 /2026.

Suppliers should be submitted two bids, 1st is Technical bid (technical envelope) and 2nd is Price Bid (financial envelope). Only the price bid (financial envelope) of the supplier who is found eligible in the technical bid (technical envelope) will be opened

1st Technical Bid Terms & Condition as follows :-

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1. All The Insutuments Set Required for Should be Provided by the vendor in good condition without any Extra charges applicable for the usage of the instrument set (Example Handling charges etc.)
2. All the prices quoted for the Implant should be on single Unit basis which include the entire construst & components as per the technical spcification.
3. The rate of the unit will be considered as consolidated price of all components of one single unit as per quotation.
4. The order will be on patient to patient basis.
5. The Charges will be paid only for the components used and no other extra charges will be applicable for the billing.
6. Rate should be inclusive of all taxes like GSTetc .
7. Material should be delivered at approprate place and time as instructed by authority (Main OT RCSMGMC & CPR Hospital, Kolhapur)
8. Material should be in good condition as per the specification.
9. Material will be inspected HOD Orthopedic Department and if material is found of inappropriate quality then material will be rejected.
10. Attach Xerox copy of PAN, GST & FDA Drug Licence (attested) .
11. All rights are preserve in favour of The Dean , C.P.R. Hospital, Kolhapur.
12. Don't Quoate Rates of other items except as mention Dont miss serial of above list.
13. Organisation/ Distributor Require Authorization letter for submission of the quatation.
14. Submit printed quotation on your own letter head with duly signed and stamped . Quotation should not be submitted without sample approval from HOD. Hand written quotation will be rejected.
15. Quotation submitted in any other format other than above will be rejected.
16. दरपत्रकासोबत अन्न व औषध प्रशासन विभागाकडील नोंदणी प्रमाणपत्र २० बी व २१ बी (Drug Licences) सोबत जेडण आवश्यक.

17. ज्या Manufacture कंपनीचे Ortho Surgery Implant set with implant करणार आहे त्या Manufacture कंपनीची Ministry of Health and family Welfare (Department of Family welfare) Notification, New Delhi Date.31/01/2017 G.S.R. 78E नुसार DCGI प्रमाणित Product List व Manufacturing License copy mandatory

18. Ortho Surgery Implant set with implant उत्पादकाचे डिलरशिप प्रमाणपत्र आवश्यक

19. Ministry of Health and family Welfare (Department of Family welfare) Notification, New Delhi Date.31/01/2017 G.S.R. 78E नुसार DCGI प्रमाणित Product List Non Sterile असेल तर Sterile Loan License DCGI प्रमाणित copy mandatory

20. संस्था / दुकान उपकरणे / विक्री विषयक नोंदणी दाखला

21. यादीमधील बाबी आवश्यकते प्रमाणे Implant पुरवठा आदेश देण्यात येतील जर आवश्यकता नसेल तर पुरवठा आदेश दिला जाणार नाही.

22. ठरवून दिलेल्या कालावधीत साहित्यांना पुरवठा न झाल्यास नियमानुसार दंडात्मक रक्कम पुरवठादारांच्या देयकातून वसूल केली जाईल.

23. दरपत्रक मंजूर झाल्यानंतर पुरवठा केलेल्या मालाच्या बिलामध्ये आपला Drug Licennces 4 no पैनकार्ड व जी.एस.टी. न क्रमांक लिहावा . तसेच आयकर व्यवसायकर इ.तसेच नियमानुसार जे शासकीय करलागु असतील ते सर्व भरण्याची दरपत्रकधारकाची राहिल.

24. एखादे Orthopedic Implant अप्रमाणित अथवा खराब अढळल्यास त्याविषयी होणाऱ्या सर्व शासकीय कार्यवाहीची जबाबदारी दरपत्रकधारकाची राहिल. नवीन बदली करून द्यावे लागल्यास तो पुरवठा बिना शर्त व इतर खर्चाशिवाय पुरवठा करणे हे दरपत्रकधारकास बंधनकारक राहिल.

25. Ministry of Health and family Welfare (Department of Family welfare) Notification, New Delhi Date.31/01/2017 G.S.R. 78E नुसार DCGI नुसार इम्प्लांट्सचे स्टिकर देणे बंधनकारक आहे.

26. Sealed Quotations should reach this office i.e. on/before InWord Office, RCSMGMC & CPR Hospital, Kolhapur Dt.: 24/08/2024, Upto 04.00 pm.

2nd Price List Bid Terms & Condition as follows :-

Please arrange to give your lowest possible rate for the items mentioned below. Item are to be supplied only along with all required instrumentation set or sets

Note:- The Specification of Implants and Instruments sets are shown below.

Sr. No.	Name of Item	Packing Size	MFG By	MRP	Quotated Rate Per Unit
1	Right/Left Peri-Prosthesis fumer plate 9 hole	1 nos			
2	Right/Left Peri-Prosthesis fumer plate 10 hole	1 nos			
3.	Right/Left Peri- Prosthesis fumer plate- 14 Hole	1 nos			

Dean,
C. P. R. General Hospital,
Kolhapur.