

Sarvopchar Rugnalya| Dhule

U.P.C.

QUOTATION**DUE DATE : 13/02/2026**

SRD/Non IP Surgical Store / 1082/2026

Date:- 06/02/2026

Phone- 02562 239407

Fax No. 02562 239207

To,

Open Notice

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

अभिप्राता, सर्वोपचार रुग्णालय, धुळे हे खालील तक्त्यात नमुद करण्यात आलेल्या बाबींची खरेदी करण्याकामी दरपत्रके (Quotation) मागवित आहेत. तरी इच्छुक पुरवठाधारकांनी आपली दरपत्रके दोन शिलबंद लिफाफ्यात खालीलप्रमाणे सादर करवीत.

1. One envelope Attached is as per Terms and condition document.
2. Quoted rate with include all taxes rate as per quotation Items. Quote this office reference of the top of the envelope with due date.

या कार्यालयाच्या आवक शाखेत दिलेल्या अटी व शर्तीस अधिन राहून विहीत मुदतीत सादर करावी.

You are requested to submit your lowest bid for Non IP Surgical items the quotation should be reach this office in sealed envelope or before 13/02/2026 until 5:00 PM. Quotation requirement is also published on and The Dean, Sarvopchar Rugnalya, Dhule.

The Dean Sarvopchar 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 items.


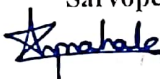


Sr. no.	Name of Item	Specifications
1	Konica CR system cassette with screen 8" X 10"	Konica CR system cassette with screen 8" X 10" Per Piece
2	Konica CR system cassette with screen 10" X 12"	Konica CR system cassette with screen 10" X 12" Per Piece
3	Konica CR system cassette with screen 14" X 17"	Konica CR system cassette with screen 14" X 17" Per Piece

Instruction and terms and condition regarding Quotation :-

1. Interested vendors should submit the quotation as per given format only.
2. The quotation and envelope should be address to The Sarvopchar Rugnalya, Dhule.
3. Vendors must write quotation reference number and last date of submission the quotation on the envelop.
4. Any amendments regarding the quotation will be published on website www.sbhgmedhule.org Vendors will not be communicated separately regarding the amendment.
5. However if the vendor fails to check any of these amendment one website then it will be presumed that the vendor has quoted his/her rates by taking the note of these amendments.
6. Rate should be quoted single item per pair as per specifications and inclusive of all taxes, GST, etc. and rate must be written in both figure and words.

[Handwritten signatures]

7. Rate should be valid for six months from the date of opening the quotation.
8. Rate must be quoted for official Pharmacopeia standards i.e. IP/ USP only and same be supplied.
9. Delivery period is 24 hours to 30 (Thirty Days) days from the receipt of order, as per availability of the items.
10. Successful vendors if fails to supply the goods within stipulated delivery period he is liable for the further necessary action, which deem may fit.
11. Manufactures authorization letter is mandatory.


DEAN
Sarvopchar Ragnalya, Dhule




अत्यावश्यक दस्तावेज पडताळणी सुची (Document Checklist)

Packet No 01 :- Technical Document

Sr. No	Attached documents as per terms and conditions	Document Submitted Yes Or No
1	Valid WHO GMP Certificate and WHO GMP product list or COPP for Quoted Items.	
2	Non-Convocation certificate issued from concern FDA for Manufacture/Distributor.	
3	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.	
4	FDA drug license	
5	GST registration Certificate	
6	PAN card	
7	Experience (Supply Order)	
8	Shop act License and MSME Certificate	
9	Cancel Cheque	
10	Manufactures authorization letter is mandatory.	
11	In House Test report For Purchased Item (Attach Supplied material) and National Accreditation Board for testing and calibration Laboratories (NABL test report supply batch wise compulsory. (Attach Supplied material)	
12	दरपत्रक मागणी पत्रातील सर्व अटी व शर्ती मान्य असल्याबाबत हमीपत्र	
13	दरपत्रकात जोडण्यात येणारे कागदपत्रे स्पष्ट व ठळक छायांकीत प्रतीत सादर करण्यात यावी.	

DEAN

Sarvopchar Ragnalya, Dhule

(Signatures)

दरपत्रकधारकाचे लेटरहेड

दिनांक- / /२०२६

प्रति,

अधिष्ठाता,

सर्वोपचार रुग्णालय, धुळे.

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

संदर्भ :- आपले दरपत्रक मागणी पत्र/ जा.क्र.सरुधु/नॉन आयपी शल्यवस्तु भांडार/दरपत्रके/ /२०२६
दिनांक:- / /२०२५.

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
राहील. 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

