



सत्यमेव जयते

GOVERNMENT OF WEST BENGAL

OFFICE OF THE SUPERINTENDENT, DISTRICT HOSPITAL, JALPAIGURI

Administrative Building, Hospital Road, Phone No. 03561-228187, 222574, 230633. Email-

www.super.jalpaiguri@gmail.com

Memo No.1746

Dated, the, Jalpaiguri, 24.11.2017.

Quotation Notice

Sealed quotation is hereby invited from the bonafide suppliers/agencies, for **the supply of Equipment to the District Hospital, Jalpaiguri**. The rate should be quoted on the plain paper/Letter pad of the agency both in words and figures. The following documents to be submitted with the quotation. Quotation to be submitted at the Office of the undersigned not in store. Before quoting must contact with the store. Quantity may be differing

1. Xerox of pan Card.
2. Up to date IT clearance certificate.
3. Up-to date GST clearance certificate.
4. Trade License.
5. Valid Drug License.

Sl. No.	Name of the Equipment	Quantity	Accounting unit	Rate to be quoted with GST
01.	Microtips 02 200 mul	200000 Such	Pack of 1000 such	
02.	Microtips 100 to 1000 mul	100000 Such	Pack of 500 such	
03.	Urine container with label	80000 Such	Pack of 100 Such	
04.	Stool container with label	80000 Such	Pack of 100 Such	
05.	Sterile cotton swab stick	5000 such	Pack of 20 Such	
06.	HIV Kit(Sterile) contain 8 item	100 Pack	01 pack	
07.	Gumboot	200 Pairs	01 Pairs	
08.	Utility Gloves	3000 Pairs	01 Pairs	
09.	Signa lock	400 Such	01 such	
10.	Ampoule cutter	400 Such	01 such	
11.	Finger tips pulse Oxymeter	400 Such	01 such	
12.	Spinal Needle No. 25	2000 Such	Pack of 25 such	
13.	Disposable syringe 3ml	30 Box x 100 such	01 Box x 100 such	
14.	Foetal Doppler(BPL) FD 9713N	100 Such	01 such	

Quotation will be received by this office from 24.11.2017 to 08.12.2017 up-to 3.00 PM and it will be opened on 08.12.2017 at 3.30 PM in the office chamber of the undersigned in presence of quotationers. The undersigned reserves the right to accept or reject any or all quotations without assigning any reasons thereof. Payments of bills will be made as and when fund will be available from the Government. The agreement is given below.

1. All supplies of articles in equipment section should invariably contain the following information or its level. 2. Trade name of the product, if any. 3. Pharmaceutical name. 3. Long Expiry date. Batch No. Name and address manufactory and their manufacturing license no. Good conditioned packaging is desirable.
2. Rate must be hold good throughout the financial year 2017-2019. Order for requirement will be placed with the successful quotationers within that period and supplies thereof will have to make within the stipulated period of placement order as directed by the Superintendent.

Superintendent
District Hospital, Jalpaiguri.

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24/11/18
[Handwritten initials]