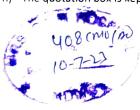
NOTICE INVITING QUOTATION FOR PURCHASE IV Fluid Ringer Lactate, 500 ml Sealed quotations are invited in Mrs. G.L.M. Hospital for purchase of IV Fluid Ringer Lactate. 500 ml from

manufacturer/distributors/suppliers by the undersigned.

Name of the Item/Medicine	Pack Size	Qty.	Last Date and time of submission of Quotations	Date and time of Opening of Quotations
IV Fluid Ringer Lactate Solution for Inj IP (FFS Technology) - Each 100 ml. contains: - Sodium Lactate 0.32 gm. + Sodium Chloride IP 0.6 gm. + Potassium Chloride IP 0.04 gm. + Calcium Chloride IP 0.027 gm. + Water for Inj IP q.s.	500 ml	6000 Nos.	17/07/2023 Up to 02: 00PM	1//07/2023 on 02: 30PM

## Terms & Conditions:-

- 1. The rate must be quoted in figures as well as in words and should be protected with transparent tape, failing which the bid shall be rejected.
- The undersigned reserved the right to reject any quotation without assigning any reason.
- 3. The quote rates should be valid for 6 months from date of opening of quotation.
- 4. Full specification of each item must be given while quotations rates & supported by sample/catalogue (if any) exact amount of GST may be mentioned separately.
- 5. Supply will be received subject to the approval of the Hospital Approval Board.
- 6. Supply is to be arranged by the firm within 30 days after supply order. If delay than penalty of 2 % of the cost of order per week be applicable up to 3 weeks. The maximum up to 6 % of the total cost of order.
- 7. In case the order is placed and firm in not in position to execute the supplies, the material will be purchase from the local market.
- Item should be stamped properly i.e. MCD SUPPLY NOT FOR SALE.
- 9. The firms are also required to submit the certificate on letter head that rates offered are not higher that the rates quoted in any other Govt. institution of NCT Delhi.
- 10. In case the opening date is declared a holiday, the quotation will opened on next working day at same place & same time.
- 11. Firms requested to submit the following documents duly signed and stamped along with quotation:-
- a) Drug License of Bidder.
- b) Black Listing Declaration of Bidder.
- c) Previous experience in Govt. Deptt.
- d) Test Report in form 39 from approved analytical Lab/ In house report with GLP/GMP of manufacturer.
- e) The firms are requested to submit that offer complies with quotation specification.
- Alternate rates in on quotation are not acceptable. If the quote provides more than one offer, their quotations will be treated as invalid.
- g) Any contradiction to the above, terms and conditions, the bid is liable for rejection.
- h) The quotation box is kept in Account Department 1st floor of Mrs. GLMH.



Mrs. G.L.Mty. Hospital

## Distribution:

Copy to for kind information:

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- 2. DOV/ Civic Center
- 3. DC/City SP Zone.
- 4. MS/GLMH, CMO (Admin.)/GLMH
- 5. MS Kasturba Hospital/HRH/KH/Director cum MS RBIPMT, MVID Hospital
- 6. Addl. Director IT for upload
- 7. HOD/Spl/Obs. & Gynae.
- 8. Account Officer / GLMH
- 9. Office Copy
- 10. Notice Board