

Admin/ H. Store/Purchase/Schedule 7D-IV/2016-AIIMS.RPR

Date: 12/09/2016

Inviting Quotations for Purchase of Drugs & Medicines for IPD and OPD against Schedule-7D-IV, AIIMS Raipur.

## **QUOTATION NOTICE**

Sealed quotations are invited from intending registered Stockist / Distributors having TIN and relevant documents for Purchase of Drugs & Medicines for IPD and OPD against Schedule-7D-IV, AIIMS Raipur. The quotation with copy of certificate of TIN & other documents should be submitted to office of **Stores Officer**, **Room no. 51**, **Ayush PMR Building**, **2**<sup>nd</sup> **floor**, **Gate no.-1 AIIMS**, **Tatibandh**, **Raipur** up to 19/09/2016 before 3:00 pm. The quotations will be opened on the same day at 3:30pm. Details of item are given as under:-

S.No.	NAME	REQUIREMENT	UNIT	UNIT RATE IN Rs.
1	Inj.Ciprofloxacin (0.2% w/v),100 ML,FFS Polyethylene bottle	50	Bottle	
2	Inj.Dextrose 25 % 100 ML, FFS polyethylene bottle	100	Bottle	
3	Inj.Dextrose 5% 500 ML,FFS Polyethylene bottle	300	Bottle	
4	Inj.Isolyte P, 500 ml, FFS Polyethylene bottle	100	Bottle	
5	Inj.Metronidazole (0.5% w/v) ,100 ML,FFS Polyethylene bottle	1200	Bottle	
6	Inj.Normal Saline (0.45% w/v) 500 ML,FFS Polyethylene bottle	100	Bottle	
7	Inj.Normal Saline (0.9% w/v) 100 ML, FFS Polyethylene bottle	2500	Bottle	
8.	Inj.Normal Saline( 0.9% w/v) 1000 ML, FFS Polyethylene bottle	180	Bottle	
9	Inj. Sterile Water 10 ML	600	Amp.	
10	Inj.Heparin 5000 U	50	Vial	
11	Inj.Heparin 25000 U	50	Vial	
12	Inj.Adrenaline 1 mg/ml, 1ml	200	Amp	

## **Terms & condition**

- 01. Firm to mention make/ brand Name in their quotation.
- 02. Taxes, if any (kindly mention in above table) should be clearly mentioned in the offer.

- 03. Document relating to registration of firm i.e. Tin number/all relevant document should be submitted along with quotation
- 04. Supply should be done within 15 days after Placement of PO.
- 05. Price should be FOR Destination basis (i.e. concerned department)
- 06. Payment 100% payment will be released after certification from pharmacy stores department.
- 07. Quotation name /No. & due date of opening must be mentioned on top of envelops.
- 08. LD @ 0.5% of delayed supply per week or part of week for delay of supply of Material subject to maximum up to 10% of delayed supply should be deducted.
- 09. AIIMS Raipur reserves the right to increase/decrease the number of required quantity.
- 10. All other terms & condition as per GCC applicable.
- 11. Material to be delivered at Gate No-01, Hospital Pharmacy ,AYUSH PMR Building, 2<sup>nd</sup> Floor, Room No- 43.

**Stores Officer (H)** AIIMS, Raipur (C.G)