No.NVBDCP/DHS/Quot-12/2014-15/ 36 |

Administration of Daman & Diu, O/o. Dy. Director, NVBDCP, Opp. Primary Health Centre, Moti Daman – 396 220.

Dated: (3/09 /2014.

TENDER NOTICE

Sealed Tender is hereby invited on behalf of the UT Administration of NVBDCP, Daman & Diu for following item.

Sr. No	Particulars	Quantity Required	Rates
1	Dengue ELISA NS1 Kits	10	

Sealed Tender from the registered supplier are invited on behalf of President of India by the District Programme Officer (NVBDCP) Fort Area, Moti Daman for supply of "Elisa NS1 Kits" for use of NVBDCP Department, Moti Daman for the year 2014-15. The prices should be quoted as wholesale rate, packing rate if the quantity supplied and also the price should be quoted for full for destination including of taxes, as applicable by the Government. The final tender cost will be accepted on total price offered.

Attested photo copy of PAN No., TAN No. & copy of registered supplier dealer (Mandatory) need to be attached with the limited Tender and should reach this office on 26/09/2014 at 3.00 pm and same will be opened on the same day at 3.30 pm if possible.

The tender should be submitted along with the terms and conditions on payment of Rs. 200/- (non-refundable) to the District Programme Officer (NVBDCP), Fort Area Moti Daman, during the office hours upto 26/09/2014 till 3:00 p.m. Also, the EMD of Rs. 5010/- (Rupees Five Thousand & Ten only) in form of FDR of Nationalized/Schedule Bank to be drawn in favour of District Programme Officer (NVBDCP), Fort Area Moti Daman payable at Daman branch is to be submitted along with the tender.

The supply of items ordered will have to be supplied to the office within a week period of the receipt of the Supply Order and the payment will be made immediately.

The items which are not found as per specification / standard given in the limited tender will have to be replaced at the cost of the suppliers.

The bill in duplicate, original being pre-receipted with due revenue stamp should be submitted to this office for payment.

The undersigned has the right to accept or reject any of items therein.

Yours faithfully,

(**Dr. K. G. Rathod**)
District Programme Officer,
District Health Society,
Daman.