

c/o

Administration of
Daman & Diu, U.T,
Office of the Director, Medical
& Public Health Service
Moti Daman

No. GHD/DMN/INJ-COVID/2020-21/10478

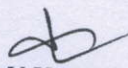
Dated:- 12/10/2020

QUOTATION NOTICE

The Director, Directorate of Medical & Health Services, UT of Daman & Diu, Daman, on the behalf of President of India invites quotation from the Authorized Distributors/ Dealers/ Suppliers for Medicines required for Govt. Hospital, Daman. The list of item placed on **Annexure-1**. The sealed quotation has to reach to the Undersigned's Office on before 19/10/2020 up to 15.00hrs. By Registered Post/Courier or to be deposited in the quotations box kept in the office of undersigned. .

TERMS AND CONDITIONS

1. The rate should be quoted for F .O. R. Govt. Hospital, Daman and it should be valid for period of one year.
2. The rate should be quoted inclusive of material & labour cost and all taxes. No extra charges will be paid for any taxes/packing/forwarding and insurance etc.
3. The bidder should submit copy of PAN Card & GST No.
4. The bidder should submit copy of valid license in the field of supply.
5. The sealed quotation should be super scribed by words "QUOTATION FOR MEDICINES FOR GOVT HOSPITAL, DAMAN".
6. The quotations to be sent to the office of the Director, Medical & Health Services, Daman, CHC/PHC, Moti Daman fort area 396220.
7. Payment will be made only after satisfactory assurance of quality of work done.
8. Quotation received after due date and time will not be taken into consideration.
9. Right to reject or accept any or all quotations is reserved by the undersigned.


(Dr. V.K. Das)

Director, Medical and Health Services

E-mail Id: dmhs-daman-dd@nic.in

Tel No. (0260) 2230470

Copy to:-

- 1) The I/c. Medical Superintendent, Govt. Hospital, Daman.
- 2) The Account Section, GHD, Nani Daman for information.
- 3) All Authorized Distributors/Dealers/Suppliers for information and necessary action.

Annexure -I						
Requirement of COVID - 19 Medicines for Govt. Hospital daman 2020-21						
Sr.No.	Items Name	Mfg. Company	Unit	Required quantity	Comapany Offered	Unit Rate in Rs.
1	Inj. Piperacillin 4gm + Tazobactum 0.5gm	Neon/Cipla/KnollAbbott/ Equivalent	1 inj	500		
2	Inj. Meropenem 1.0gm	Neon/Cipla/knoll/Abbott/ Equivalent	1pic	600		

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