

Administration of  
UT of Daman & Diu,  
Office of the Director Medical  
& Public Health Services

No. DMHS/DD/NIQ/HWC Pariyari/2020-21/12351

Date:- 02 /12 /2020

**QUOTATION NOTICE**

The DMHS Daman & Diu on the behalf of President of India invites quotation from the Authorized Distributors/ Dealers/ Suppliers for purchase of various items for Health and Wellness Center, Daman. The sealed quotation has to reach to the Undersigned's Office on before **08/12/2020** up to 15.00hrs. By Registered Post/Courier or to be deposited in the quotations box kept in the office of undersigned.

S. No.	ITEMS	UNIT	QTY REQD	UNIT RATE (in Rs.)
1	Printer HP Laser jet Printer 1020	Nos.	1	
2	Desktop Computer HP Dextkop Pro K2 Windows 10 pro Intel Core i3-8100 (4 Core)3.6 Khz 4 GB(1 X4XGB)DDR4 2666 mhz RAM 1 TB 3.5 sata Intel UHD Graphic 630	Nos.	1	
3	3 Nos. CCTV Camera with installation , <ul style="list-style-type: none"><li>• Camera bullet 2 MP , full HD /Color vision/ Day and Night/ Water Proof ,Hik,</li><li>• Cables suitable for CCTV System –CAT-6 – 50 mtrs</li><li>• 8 channel DVR installation, with fitting charges,</li><li>• Piping, cabelling and camera installation.</li></ul>	Nos.	-	
4.	Laboratory Table	Nos.	1	
5.	Panchkarma Table Droni Massage Table Full Fiber body having size of 7.55*2.61 feet measurement with Round fiber base which bears 200+ kg weight capacity with Dark Brown colour	Nos.	1	

**TERMS AND CONDITIONS**

1. The rate should be quoted for F .O. R. Hospital and it should be valid for period of one year.
2. The Supplier must attach copy of Pan Card, GST Registration and valid license.
3. The rate should be quoted inclusive of all taxes no extra charges will be paid for any taxes/packing/forwarding and insurance etc.
4. The sealed quotation should be super scribed by words “QUOTATION FOR HWC PARIYARI”.
5. Rejected article should be replaced by the supplier at his own risk and cost
6. Payment will be made only after receipt of the said material successfully.
7. Quotation received after due date and time will not be taken into consideration.
8. Right to reject or accept any of all quotation is reserved by the undersigned.

**Sd/-**

**Dr. V.K. Das**

Director Medical and Health Services

E-mail Id: [dmhs-daman-dd@nic.in](mailto:dmhs-daman-dd@nic.in)

Tel No. (0260) 2230470

**Copy to fd.wcs.to:-**

- 1) The Store Committee, DMHS, for information.
- 2) The Account Section, DMHS, Daman for information.
- 3) All Authorized Distributors/Dealers/Suppliers for information and necessary action.