

Sassoon General Hospital, Pune – 1

Tel : 26128000 Surgical Store Ext : 2374 E-mailsurgicalstoresassoon@gmail.com

Quotation Form

SGH/SUR/MJPJAY/LP/34 /2021

Date : 03/01/2022

Sub:- Quotation for Surgical Item Dept. of Medicine as given below.

Sir,

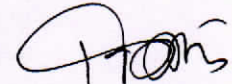
You are requested to furnish your quotation for the following items to the

DEAN SASSOON GENERAL HOSPITAL, PUNE

- 1) Dialyzer F6 (Size – 1.3 m2)
- 2) Dialyzer Tubbing

- Note :-**
- 1) Rate should be quoted inclusive of all taxes & valid upto SIX months.
 - 2) Strength of Surgical Item MRP Cost & Mfg Company Packing must be mentioned
 - 3) The delivery of the material must be at surgical Store.
 - 4) Delivery period 24 hours from the date of receipt of the order.
 - 5) The quotation and envelope should be addressed on the name of (Attention Surgical Store)
DEAN, SASSOON GENERAL HOSPITAL, PUNE -1 and it should be submitted at SURGICAL STORE
 - 6) Quotation envelope should mention Quotation Reference No.along with name & strength of material.
 - 7) Rates must be mentioned in figure as well as in words.
 - 8) Rates should be quoted for, & Material should be supplied as per official PHARMACOPEAL STANDARDS.
 - 09) Conditional Quotations will not be accepted.
 - 10) Right to Accept ,Recall or Reject above Quotations lies solely with Dean, Sassoon General Hospitals Pune.

Last Date Of Submission: 14-01-2022
5:00 PM



अधिष्ठाता,
ससून सर्वोपचार रुग्णालय,पुणे