

Sassoon General Hospital, Pune - 1

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

SGH/SUR/MJPJAY/LP /u893 /2021 **Quotation Form**

Date : 23/7 / 2021

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

Sir,

You are requested to furnish your quotation for the following items to the
DEAN SASSOON GENERAL HOSPITAL, PUNE

S.no	Name of Material
1	2.5 mm Recon plate
2	2.5 mm Angled Recon plate
3	2 mm Continuous 20 hole plate
4	2.5 mm screw 8 mm length
5	2 mm screw 8 mm length
6	2 mm screw 10 mm length
7	Plate cutter
8	Plate Bender
9	SS wire 24
10	SS wire 26
11	ARCH BAR

- 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 of this hospital
 - 4) Delivery period 24 hours from the date of receipt of the order.
 - 5) The quotation and envelope should be addressed in the name of (Attention Surgical Store)
DEAN, SASSOON GENERAL HOSPITAL, PUNE -I and it should be submitted at Administrative Office
 - 6) Quotation envelope should mention Quotation Reference 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: 26-7-2021

Urgent

3:00 PM

(Signature)

Dean

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