

# Sassoon General Hospital, Pune – 1

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

## Quotation Form

SGH/SUR/MJPJAY/LP /SG50/18

Date : 01/09/18

Sub:- Quotation for Surgical Item MJPJAY as given below.

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

**DEAN SASSOON GENERAL HOSPITAL, PUNE.**

Sr No	Name of the item
1	Endo illuminator (20 G) Gueder 20,23,25 G
2	Vitreotomy cutter gueder 20,23,25 G
3	Diamond dusted membrane scrapper 20,23,25 G
4	Endolaser probe straight 20,23,25 G

- Note :-
- 1) Rate should be quoted inclusive of all taxes & GST 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 )
  - 6) DEAN, SASSOON GENERAL HOSPITAL, PUNE - 1 and it should be submitted at SURGICAL STORE
  - 7) Quotation envelope should mention Quotation Reference No. along with name & strength of Material
  - 8) Rates must be mentioned in figure as well as in words.
  - 9) Rates should be quoted for, & Material should be supplied as per official PHARMACOPEAL STANDARDS.
  - 10) Conditional Quotations will not be accepted.
  - 11) Right to Accept, Recall or Reject above Quotations lies solely with Dean, Sassoon General Hospitals Pune

Last Date Of Submission: *urgent*

Yours Faithfully,

  
Dean

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