Quotation Notice

Sub: IGGGH&PGI – Accts. – Supply of “Ortho Implants & Instruments set” - Quotation – Called for - reg.

Sealed quotations are invited for the supply of following “Ortho Implants & Instruments set” to this Institution, on or before 11/07/2019 upto 4.30 p.m. as per the terms and conditions detailed below.

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Description of Medicines/Materials</th>
<th>Rate to be quoted for the unit of</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Annexure-I</td>
<td>Each</td>
</tr>
</tbody>
</table>

Terms and Conditions

1. Quotation: The Quotation should be in a sealed cover superscribing as “Quotation for the supply of Ortho Implants” & should be addressed to the Medical Superintendent, Indira Gandhi Govt. General Hospital & Post Graduate Institute, Gingee Salai, Puducherry.

2. Insurance: No insurance charges are payable. The Purchaser will not pay separately for transit insurance and the supplier should be responsible until the stores arrive in good condition at the destination and for this purpose the rates quoted should be inclusive of insurance charges Central Sales Tax if applicable may be charged.

3. Payment: Payment will be made through ECS (as Bank A/c details provided) after receipt of the full consignment materials in good condition. If any items are found broken during transit, a replacement or credit note for the value of broken items should be sent immediately on receipt of intimation from this office to avoid the delay of payment in question.

4. Validity: (a) The rates once quoted and approved will be final for 180 days from the date of acceptance and no deviation in rates will be allowed.
   (b) Supply should be made within 10 working days from date of receipt of our supply order. Otherwise supply order may be treated as cancelled and it will be place to the L-2 bidder and the cost difference will be collected.
   (c) The medicines/materials/books should be supplied strictly in accordance with the specifications given in the requirement. The items which are not conforming to the specifications will be returned to supplier at their own cost.
   (d) Quotations received either in person / post after the time prescribed above will be summarily rejected.
   (e) A Certificate to the effect that the conditions mentioned above are accepted should be furnished along with the quotation.

5. Delivery: Delivery should be made in F.O.R., Puducherry.

"No Quotation /Tenders/Invoices will be Entertained unless Income Tax Permanent Account Number (PAN) is prominently quoted."

Yours faithfully,

MEDICAL SUPERINTENDENT

Copy to:

1. The Programmer, DHFWS– With instructions to host this Quotation Notice in the Official Website
2. The Head of the Department-ORTHOPAEDICS
3. Notice Board
4. Spare
<table>
<thead>
<tr>
<th>Sl.No</th>
<th>Name Of the Items</th>
<th>Size</th>
<th>Rate to be quoted for the units</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>'V' Nails 9x32, 10x32, 11x32</td>
<td>---</td>
<td>EACH</td>
</tr>
<tr>
<td>2</td>
<td>'V' Nails 9x34, 10x34, 11x34</td>
<td>---</td>
<td>EACH</td>
</tr>
<tr>
<td>3</td>
<td>'V' Nails 9x36, 10x36, 11x36</td>
<td>---</td>
<td>EACH</td>
</tr>
<tr>
<td>4</td>
<td>POP Cutting Power Saw</td>
<td>---</td>
<td>EACH</td>
</tr>
</tbody>
</table>

Medical Superintendent