



**Govt. of Maharashtra**  
**Civil Surgeon, General Hospital, Wardha.**

Telephone :- 07152-245449  
email :- [cswardhamedstore@gmail.com](mailto:cswardhamedstore@gmail.com)

No. GHW/Med Store/E-Quot.Not/ BloodBag/ /24  
Office of the Civil Surgeon,  
General Hospital, Wardha  
Date :- **23 DEC 2024**

**Health Services**

**E-Quotation Notice**

To,  
To Whomsoever it may concern.

**Sub :- Invitation of E-Quotations .**

**Date of Publication :- 23.12.2024**

As per the subject cited above, this office hereby invites E-quotations for Supply of following items.

Sr. No.	Name of Item	Specification	Unit	Approx. Quantity	Remark
1	Double CPDA Blood Bag	350 ml Bag	1	50	
2	Triple CPDA Blood Bag	350 ml Bag	1	50	

Your Quotations (Sealed envelope) must reach this office on or before **30/12/2024** upto 4.00 PM. Envelop should be marked as " **QUOTATION FOR BLOOD BANK CONSUMABLES**" in Block letters & Due date on the top. Quotations will be opened on **31/12/2024** at 11.00 AM. Bidders may remain present at the time of opening. In case of any official reason, date & time of opening quotations may be changed.


**Terms & Conditions :-**

1. Goods should be delivered on Door Delivery basis, with unloading & proper arranging in destination store/ department.
2. Rates should be inclusive of all Taxes. Transportation, loading, unloading, installation & all other charges, please note, No extra charge will be paid for any reason.
3. Supply should be done within 30 days from receipt of order.
4. Conditional Quotations will be summarily rejected.
5. Quantity of purchase may be increased or decreased as per requirement.
6. Sample of each item with COA (quantity each two) must be submitted along with quotations.
7. Payment will be made as per availability of budget grants under various programs. However any interest will not be paid if payment is delayed due to any technical reason.
8. **Please enclose following documents.**
  - (a) Annexure A (On Firm's Letter Head)
  - (b) Annexure 1, 2 & 3 On Non Judicial Stamp paper of Rs. 100/- (Use separate Stamp for each annexure)
  - (c) GST Registration Certificate

- (d) GSTR 3B Clearance up to Sept. 2024**
- (e) Shop Act License**
- (f) Drug License (20B, 21B) obtained by FDA**
- (g) Copy of PAN Card**

9. Acceptance of Rates will be subject to approval of sample by the purchase committee, purchase committee's decision about approval or rejection of samples will be final & binding to the supplier.

10. Civil surgeon, General Hospital, Wardha, reserves all rights to accept or reject any or all quotations or complete quotation process without assigning any reason.

  
**Civil Surgeon**  
**General Hospital, Wardha**

**Annexure – A (On Firm's Letterhead)**  
**(In case of incomplete information, Quotation will be summarily rejected)**

1. Name and address of the Firm :-
2. Registered Head Office Postal Address :-
3. Telephone No., FAX & E-Mail :-
4. In case of Proprietorship / Partnership firms, Names of Proprietors / Partners/ Directors with address and percentage of share :-
5. Ownership Status of the Firm :-  
(Maharashtra Govt. / Central Govt./Jt. Sector /Co - Operative /SSI /Private)
6. Whether tendering as a Manufacturer / Importer :-
7. Name of the Person & Phone No. who should be contacted by this office in case of any required communication.
8. Full Address with Email ID, Phone Numbers and Location of Original manufacturing work/Factory/

I / we hereby declare that particulars furnished above are true to the best of my /our knowledge and belief and that if any of the particulars is found to be materially incorrect / misleading, my /our tender shall be rejected and I / we are liable for penal action as per terms specified in the " term and conditions of tender".

Date:-

Full Signature of the Tenderer  
with official seal and address

On Non Judicial Stamp paper of Rs.100/- (use separate stamp for each annexure)

Annexure-1

हमीपत्र

जिल्हा शल्य चिकित्सक सामान्य रुग्णालय वर्धा यांचे ई-कोटेशन सूचना पत्र क्र.

.....  
च्या अनुषंगाने या हमीपत्राद्वारे लिहून देण्यात येते कि, खरेदी प्राधिका-या सोबत कोणत्याही प्रकारे हितसंबंधा बाबत संघर्ष नाही. तसेच खरेदी प्राधिका-या कडे सादर करण्यात आलेले दरपत्रक हे एकल असून दुस-या कोणाशीही संयुक्तरित्या अथवा संगनमताने साखळी करुन दरपत्रक भरलेले नाही. असे आढळून आल्यास दंडात्मक कारवाईस पात्र राहू.

दिनांक:

ठिकाण

दरपत्रक धारकाची स्वाक्षरी

संपूर्ण नाव व शिक्का

**On Non Judicial Stamp paper of Rs. 100/-**

**(Use separate stamp for each annexure)**

**Annexure -2**

**Certificate**

The rates quoted to Civil Hospital Wardha against their E-Quotation enquiry letter No. -----  
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----- Date----- are not higher than rates quoted to other  
Govt/ Semi Govt. Institutions. Or any prevailing rate contract.

Date:

Signature

Place:  
vendor

Full Name & Stamp of

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**On Non Judicial Stamp paper of Rs. 100/-**

**(Use separate stamp for each annexure)**

**Annexure-3**

**Certificate**

I the undersigned certify that our Firm -----

Has not been found guilty of malpractice, misconduct, punished or blacklisted /debarred either  
by public health department, Govt. of Maharashtra or by any local authority and other state  
Government/ Central Government department in the last five years.

Date:

Signature

Place:

Full Name & Stamp of Vendor