

# Ref No: MM/E.O./HOSP/LAB RE AGENT/NIQ-083/25-26

Date: 25/06/2025

### NOTICE INVITING QUOTATION

Sealed Quotation are therefore invited from Manufacturer/Authorized agent, the rate should be quoted as per pack size as mentioned in the list and should inclusive GST. The Quotation should be submitted in Quotation form duly sealed covered super scribing "Quotation of rate for supply of LAB Items" in 'Netaji Subhas Chandra Bose Specialised Hospital & Research Centre', addressed to the Chairman, Madhyamgram Municipality, so as to reach this office within 12.30 Hrs. on 04/07/2025. The Quotation received after due date & time will not be considered. The Quotation will be opened on 04/07/2025 at 1.30 Hrs. and the Quotation are requested to remain present or send their suitable authorized persons to be present at the time of opening and offer clarification required if any.

#### Terms & Condition:-

- 1. Quotation forms will be available at the store of the NSCBSHOSPITAL & RC under Madhyamgram Municipality.
- 2. The last date of collecting Quotation From on 04/07/2025 within 12.30hrs.
- 3. Supply against order to the successful Quotation is to be made as when as per requirements.
- 4. Supplier should remain bound to follow all other terms & condition as will be specified in the supply order.
- 5. Supplier must be submitted up to date Xerox copy of their up to date trade license, GST Registration, Pan Card, P. Tax Certificate & Income Tax.
- 6. Authority reserve the rights of accept or reject or every tender without assigning reason whatsoever.
- 7. First priority first brand name.
- 8. Quotation dropping address at Finance Officer's Room (Madhyamgram Municipality)
- 9. The above Quotation is also available on our website, www.madhyamgrammunicipality.org.

Executive Officer Madhyamgram Municipality

Executive Officer Madhyamgram Municipality North 24 Parganas



: 2538-2664/0203

Fax: 2538-6442 MADHYAMGRAM MUNICIPALITY P.O.: Madhyamgram, Dist.: North 24 Parganas

## Kolkata - 700 129

Vide NIQ No. MM/EO/HOSP/LAB RE-AGENT/NIQ-083/25-26. Date-25/06/2025

### ANNEXTURE-I

SL NO	Name of Articles	Pack size	Brand
01	RA- Factor	35Test	TULIP
02	Rubber Tunicate	1MTR	LOCAL
03	Widal	1x20ML	BEACON
04	SYRINGE 2 ml	PER BOX	DISPOVAN
05	SYRINGE 5 ml	PER BOX	DISPOVAN
06	Triglycerides	(4 X25) ML	PATH
07	SYRINGE 3 ml	PER BOX	DISPOVAN
08	SYRINGE 10 ml	PER BOX	DISPOVAN
09	UREA( BERTHLOT)	(4X 100) ML.	PATH
10	VDRL (SYPHILS DEVICE)	50 TEST	RAPHA

THANKING YOU,

Executive officer Madhyamgram Municipality Executive Officer Madhyamgram Municipality North 24 Parganas