

U.T.ADMINISTRATION OF DNH & DAMAN AND DIU
OFFICE OF THE MEDICAL SUPERINTENDENT
GOVERNMENT HOSPITAL, MARWAD, DAMAN
PH.NO.7574829801, EMAIL ID: ghddmn@gmail.com

No.GHD/DMN/REFILL/MEDICAL GAS/QUOTE/2023-24/ 2547

DATED: 11.01.2023

Sub: Quotation Notice for refilling of Medical Gas Cylinder.....

Quotation is hereby invited by the office of the Medical Superintendent Government Hospital, Daman for the following:

Sr No.	Type of Gas	Cylinder Type (Size)	Refilling Cylinder Qty.	Refilling Rate per cylinder Incl. Transport charges (Incl. GST)	Total Amount for Refilling cylinder Incl. Transport charges (Incl. GST)
1	Medical Oxygen-D Type	7 to 7.5 CM3	900 No's		
2	Carbon Dioxide	4 Kg	3 No's		

TERMS AND CONDITIONS:

01. The rate should be quoted for Government Hospital, Daman and it should be valid for the period of the one year.
02. The rate should be quoted inclusive of all taxes, refilling charge, transport charges, cylinder loading and unloading etc.
03. The rate should be quoted only for the specific items.
04. The bidder should submit copy of PAN card and GST No. along with the quotation.
05. The sealed quotations should be super scribed by words "Quotations for the refilling of Medical Gas Cylinders used at Government Hospital, Daman" and sealed quotations to be sent to the office of Medical Superintendent, CHC. Moti Daman, Fort Area, Daman-396220.
06. Payment will be made after satisfactory refilling of Medical Gas Cylinders as per requirement.
07. Quotation should reach in this office of Medical Superintendent, CHC. Moti Daman, Fort Area, Daman-396220 before 24.01.2024 at 3.00 p.m and same will be opened on the same day at 4.30 p.m if possible.
08. The undersigned has the right to accept or reject the quotation.



(Dr. Shailesh Arlekar)
Medical Superintendent,
Government Hospital, Daman.