

संघ प्रदेश दादरा नगर हवेली एवं दमण एवं दीव प्रशासन
U. T. Administration of Dadra Nagar Haveli and Daman & Diu,
सदस्य सचिव (शासी निकाय) / O/o. The Member Secretary (Governing Body),
रोगी कल्याण समिति / Rogi Kalyan Samiti,
सरकारी अस्पताल, मरवड, दमण / Government Hospital, Marwad, Daman.
PH.NO.0260-2254266 / E-MAIL ID: ghddmn@gmail.com

No. GHD/DNH&DD/RKS/URG.LAB/2025-26/ 1238

Daman

Date: 24 /01/2026

QUOTATION NOTICE

The Quotation is invited by the office of the Member Secretary (GB), RKS, GHD, CHC campus, Moti Daman for procurement of urgently required laboratory materials under RKS as per Annexure-A. The sealed quotation has to reach to the Undersigned's Office on or before 24/01/2026 up to 15.00 hrs. By Registered Post/Courier or to be deposited in the quotations box kept in the office of undersigned.

TERMS AND CONDITIONS

1. Rates Submission:

The rates quoted shall be on **F.O.R. Government Hospital, Daman**, inclusive of all applicable taxes, duties, packing, forwarding, freight, insurance, and any other incidental charges. No additional payment on any account whatsoever shall be admissible beyond the quoted rates.

2. Validity:

The quoted rates should remain valid for a period of **one year** from the date of the contract.

3. Required Documentation:

The supplier must submit a valid copy of the following documents along with the quotation:

- PAN Card
- GST Registration Certificate
- Valid License copy.

4. Self-Declaration:

The supplier must provide a self-declaration stating that their firm has not been debarred by any government or semi-government organization at the central or state level. Failure to provide this self-declaration will result in the disqualification of the quotation.

5. Quotation Submission:

The sealed quotation envelope must be clearly marked with the following:

“PURCHASE OF URGENTLY REQUIRED LABORATORY MATERIALS AT GOVERNMENT HOSPITAL DAMAN UNDER ROGI KALYAN SAMITI, DAMAN.”

6. Late Quotations:

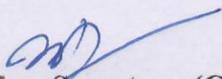
Quotation received after due date and time will not be considered.

7. Payment Terms:

Payment will be made only after successful receipt of the materials in accordance with the terms of the contract.

8. Right to Accept/Reject:

The undersigned reserves the right to accept or reject any or all quotations without assigning any reason.



Member Secretary (GB)
Rogi Kalyan Samiti,
GHD, Daman

Copy to: -

- 1) The Store Section, GHD for information.
- 2) All Authorized Distributors/ Dealers/Suppliers for information and necessary action.
- 3) NIC to upload on website for vide publication.

ANNEXURE-A

Sr. No.	Name of Items	Unit	Required Mfg Company	Offered Mfg Company	Offer Rate in Rupees (including GST)
1	TSH minivididas(1 kit = 60 test) (Compatible with Biomerieux Minivididas)	1 kit	Biomerieux or Equivalent		
2	TNIU minivididas(1 kit = 60 test)(Compatible with Biomerieux Minivididas)	1 kit	Biomerieux or Equivalent		
3	Cover slip (22X22 mm)	1 pkt	Standard		
4	CK-MB minivididas(1 kit = 30 test)(Compatible with Biomerieux Minivididas)	1 kit	Biomerieux or Equivalent		
5	Methanol (1 can = 2.5Ltr)	1 can	Rankem/Merc k/Finar/Acon / Equ.		
6	CaCl ₂ soln. (1 bottle = 10ml)(Compatible with Tulip Hemostarxf1.0)	1 bottle	Tulip or Equivalent		
7	Uniplastin(1 bottle = 5ml)(Compatible with Tulip Hemostarxf1.0)	1 bottle	Tulip or Equivalent		
8	Liquicelin(1 bottle = 3ml)(Compatible with Tulip Hemostarxf1.0)	1 bottle	Tulip or Equivalent		
9	Cuvettes and stirrers for Hemostar XF 1.0/2.0 (1 pack=100 units) (Compatible with Tulip Hemostarxf1.0)	1 pack	Tulip or Equivalent		
10	Sickle Solubility Test(1 pack= 50 test)	1 pack	Beacon/Bhara t Biotech or Equivalent		
11	P.P.D. soln. 2 TU (1 bottle = 5ml)	1 bottle	Beacon/Span /Acon or Equivalent		
12	P.P.D. soln. 5 TU (1 bottle = 5ml)	1 bottle	Beacon/Span /Acon or Equivalent		