



Maharashtra Medical Goods Procurement Authority

Office- 1st Floor, Aarogya Bhawan, Commissionerate of Health Services, Mumbai, D"Mello Road,
St. Georges Hospital Compound, Mumbai 400001

Contact Number- 022-22611471, 022-22717500 E-mail - maha.mmgsa2023@gmail.com

Order No. 1775 /MMGPA/Medicine & Material Section/2025, Dated 21/ 11 /2025

To,

M/s Mehru Mehta Apangodhar Audyogik Society Ltd.,

New Survey No.7. Yeolewadi. Kondhwa(BK),

Pune 411038.

Email ID:-vilasghayal19@gmail.com

Subject: - Supply of Rolled cotton Bandage as per Schedule F-II 10 cm x 4 Mtr Roll

Reference: - (1) Govt. Resolution Dated 1.12.2016

(2) Budget Source: 2025-26/State Budget/2210 K 079, 2210 K 061, 2210 K 088,
2210 K 097

(3) Administrative Approval GR, PHD, Prashama-1225/Prakra No. 139
Dated 12.06.2025

(4) Revised Administrative Approval GR, PHD, Prashama-1225/Prakra No. 139
Dated 29.08.2025

(5) Sanction of Tender Approval Committee, Meeting dated 23.09.2025

(6) Fund Allocation Letter no. 4825, Dated 03.10.2025

(7) Consignee received from Procurement cell Mumbai, letter no. 14253-55,
Dated 08.10.2025

With reference to the above reference no.1, you have been awarded for the supply of following product, w.r.t. approval as per reference no.4. Accordingly you are requested to supply the following goods to the consignees as per details mentioned below. **(Consignee List enclosed separately with this order).**

Sr. No.	Name of the item	Specification of item	Quantity (DHS)	Per Unit Rate with GST	Total Amount including all Taxes
Reserved Item	Rolled cotton Bandage as per Schedule F-II 10 cm x 4 Mtr Roll	Rolled cotton Bandage as per Schedule F-II 10 cm x 4 Mtr Roll	1,17,894 Roll	19.95 Per Roll	23,51,985/-
Total Amount In Words – Twenty Three Lakh Fifty One Thousand Nine Hundred Eighty Five Rupees Only.					

1. **Packing & Forwarding:** Packing as Per Terms & Conditions mentioned separately & **Forwarding Free on Road Destination.** i.e. door delivery basis

Delivery Period: 45 Days from the date of receipt of order by the supplier to the consignee attached.

2. **Risk purchase clause:** If the bidder fails to supply the stores within the stipulated delivery period inclusive of period with penalty, the order will stand cancelled. Undersigned shall be entitled to purchase such stores from any other source at such price which ordinarily should not be more than 10% of the tender price, unless otherwise properly satisfied by purchasing officer. The extra expenditure in such cases shall be recovered by Chief Executive Officer, Maharashtra Medical Goods Procurement Authority, Aarogya Bhawan, St. George's Hospital Compound, Mumbai from the Supplier inclusive of recovery by Revenue recovery procedure.

3. **Payment Terms:** 100 % Payment shall be paid on receipt & acceptance of stores in good conditions by the consignee.

4. **Labeling:** The word **"FOR THE USE OF GOVERNMENT OF MAHARASHTRA (MMGPA) SUPPLY"** should be printed on each unit pack in readable Purple or Green Colors. Bar-coding should be on boxes of Supplied item at Consignee level. **MRP SHOLUD NOT BE PRINTED.**

5. **SHELF LIFE of the supplied drug should not be less than ¾ of total shelf life at the time of delivery to the consignee.**

6. **Acceptance & Receipt:** In prescribed format enclosed .It should be submitted in Original Certificate copy to the purchasing authority along with triplicate copies of the Invoice.
7. The Consignees upon Receipt of the material should issue acceptance certificate within 7 days of receipt of material in two copies. One copy should handover to Supplier and One Copy should be sent Maharashtra Medical Goods Procurement Authority, Aarogya Bhawan St. George's Hospital Compound, Mumbai by mail or email. (Email ID-maha.mmgsa2023@gmail.com)
8. **Analysis Report:** The drugs and other items shall be subjected for laboratory analysis at manufacturer & "Purchaser & Consignee" level. The bidder shall submit FDA / NABL accredited Drug Testing Laboratory Test report for the said product for every batch supplied at the time of supply to the respective consignee. Post-supply quality assurance testing of supplied drugs and other items will be done by "Purchaser & Consignee" from any FDA / NABL accredited laboratory. For pre-supply testing, suppliers should mandatorily provide the test report issued by any FDA/NABL accredited laboratory & expenditure of pre-supply testing should be borne by the supplier.
9. **Delivery Challan** – Should be sent in the name of consignee in duplicate. It should specify Name of Drugs/ Mfg. by / Expiry Date / packing & quantity.
10. **Penalty Charges** – As per T&C of the Tender and As per GR dated 01.12.2016- Penalty Charges 0.5% per week will be chargeable for the delayed supply.
11. **Invoice Copy** – Should be sent in triplicate on the Name of Chief Executive Officer, Maharashtra Medical Goods Procurement Authority, Aarogya Bhawan St. George's Hospital Compound, Mumbai.
Fall Clause: It is a condition of the contract that all through the currency thereof, the price at which you will the supply stores should not exceed the lowest price charged by you to any customer during the currency of the rate contract and that in the event of the prices going down below the rate contract prices you shall promptly furnish such information to us to enable to amend the contract rates for subsequent supplies.
12. You are requested to submit signed agreement (attached herewith) on Stamp paper within 15 days from receipt of this letter.
13. Submit the Demand Draft of **Rs. 70,560/- (3% of the total value of order)** from Nationalized /Scheduled commercial bank in favor of **Maharashtra Medical Goods Procurement Authority, Aarogya Bhawan St. George's Hospital Compound, and Mumbai** Validity of the Demand Draft should be minimum next 2 months from the date of expiry of warranty or expiry of medicine/item.

Name of Account	Name of Branch	Account Number	IFSC Code
MMGPA/EMD/SD/Late Fees/Delay Supply Penalty Account	Indian Bank, Mumbai Fort Branch, Mumbai	7746585752	IDIB000B027

Consignee : as per List attached

(As per approval of Hon. Chief Executive Officer MMGPA, Mumbai)

JADHAV
SANJEEVKUMAR
MANOHARRAO
Digitally signed by
JADHAV SANJEEVKUMAR
MANOHARRAO
Date: 2025.11.21
12:17:04 +05'30'

(Dr. Sanjeevkumar Jadhav)
General Manager (Technical)

Maharashtra Medical Goods Procurement Authority
Mumbai

- Copy to:** 1) Hon. Commissioner, Health Services & Mission Director, NHM, Mumbai
2) Hon. Director of Health Services, Mumbai
3) Hon. Director (Finance), NHM, Mumbai
4) Hon. Joint Director of Health Services (Hospital Cell), Mumbai
5) Chief Accounts and Finance Officer, Maharashtra Medical Goods Procurement Authority, Mumbai
6) Office File
7) QA Cell, Maharashtra Medical Goods Procurement Authority, Mumbai

Copy to Consignee(s) All: Civil Surgeon(s)/District Health Officer (s)

They should accept Drugs as per order & entry of the said stock is to be taken in stock register as well as in e-Aushadhi online system immediately within 24hrs of actual delivery.

- Copy Submitted to:** 1) Hon. Secretary-1, Public Health Department, Mantralaya, Mumbai
2) Hon. Secretary-2, Public Health Department, Mantralaya, Mumbai .

CONSIGNEE – DETAILS

P.O. No. 1775/ MMGPA/ Rolled cotton Bandage as per Schedule F-II 10 cm x 4 Mtr Roll / 2025-26, Date 21/ 11 /2025

Budget Source: 2025-26/State Budget/2210 K 079, 2210 K 061, 2210 K 088, 2210 K 097

Drug Name -Rolled cotton Bandage as per Schedule F-II 10 cm x 4 Mtr Roll		
Sr. No.	Districts	CS
1	Ahilyanagar	2800
2	Akola	2800
3	Amravati	3733
4	Ch. Sambhajinagar	3733
5	Beed	3267
6	Bhandara	3562
7	Buldhana	3733
8	Chandrapur	3267
9	Dhule	3733
10	Gadchiroli	3267
11	Gondia	3733
12	Hingoli	3267
13	Jalgaon	3733
14	Jalna	3267
15	Kolhapur	3733
16	Latur	3733
17	Nagpur	3733
18	Nanded	3733
19	Nandurbar	3267
20	Nashik	3733
21	Dharashiv	3733
22	Palghar	3267
23	Parbhani	3267
24	Pune	3733
25	Raigarh	3733
26	Ratnagiri	3733
27	Sangli	3267
28	Satara	3267
29	Sindhudurg	3267
30	Solapur	3733
31	Thane	3267
32	Wardha	3267
33	Washim	3267
34	Yeotmal	3266
	Total	117894

JADHAV
SANJEEVKUMAR
MANOHARRAO

Digitally signed by
JADHAV SANJEEVKUMAR
MANOHARRAO
Date: 2025.11.21
12:17:29 +05'30'

(Dr. Sanjeevkumar Jadhav)
General Manager (Technical)
Maharashtra Medical Goods Procurement Authority
Mumbai

CONTRACT FORM

THIS AGREEMENT made theday of....., 2023... Between (Name of purchaser) of..... (Country of Purchaser) (Hereinafter "the Purchaser") of the one part and..... (Name of Supplier) of..... (City and Country of Supplier) (Hereinafter called "the Supplier") of the other part:

WHEREAS the Purchaser is desirous that certain Goods and ancillary services viz. (Brief Description of Goods and Services) and has accepted a bid by the Supplier for the supply of those goods and services in the sum of..... (Contract Price in Words and Figures) (Hereinafter called "the Contract Price").

NOW THIS AGREEMENT WITNESSETH AS FOLLOWS:

1. In this Agreement words and expressions shall have the same meanings as are respectively assigned to them in the Conditions of Contract referred to.
2. The following documents shall be deemed to form and be read and construed as part of this Agreement,

viz.:

- (a) The Price List submitted by the Supplier;
 - (b) The Schedule of Requirements;
 - (c) The Technical Specifications;
 - (d) The General Conditions of Contract;
 - (e) The Special Conditions of Contract; and
 - (f) The Purchaser's Notification of Award.
3. In consideration of the payments to be made by the Purchaser to the Supplier as hereinafter mentioned, the Supplier hereby covenants with the Purchaser to provide the goods and services and to remedy defects therein in conformity in all respects with the provisions of the Contract.
 4. The Purchaser hereby covenants to pay the Supplier in consideration of the provision of the goods and services and the remedying of defects therein, the Contract Price or such other sum as may become payable under the provisions of the Contract at the times and in the manner prescribed by the Contract.

Brief particulars of the goods and services which shall be supplied/provided by the Supplier are as under:

SR. NO.	BRIEF DESCRIPTION OF GOODS & SERVICES	QUANTITY TO BE SUPPLIED	UNIT PRICE	TOTAL PRICE	DELIVERY TERMS

TOTAL VALUE:

DELIVERY SCHEDULE:

IN WITNESS whereof the parties hereto have caused this Agreement to be executed in accordance with their respective laws the day and year first above written.

Signed, Sealed and Delivered by the

Said..... (For the Purchaser)

In the presence of:

Signed, Sealed and Delivered by the

Said..... (For the supplier)

In the presence of:

SECURITY DEPOSIT FORM

To, (Name of Purchaser)

WHEREAS..... (Name of Supplier)

Hereinafter called "the Supplier" has undertaken, in pursuance of Contract No..... dated, 200.... to supply.....(Description of Goods and Services) hereinafter called "the Contract".

AND WHEREAS it has been stipulated by you in the said Contract that the Supplier shall furnish you with a Bank Guarantee by a recognized bank for the sum specified therein as security for compliance with the Supplier's performance obligations in accordance with the Contract.

AND WHEREAS we have agreed to give the Supplier a Guarantee:

THEREFORE WE hereby affirm that we are Guarantors and responsible to you, on behalf of the Supplier, up to a total of..... (Amount of the Guarantee in Words and Figures) and we undertake to pay you, upon your first written demand declaring the Supplier to be in default under the Contract and without cavil or argument, any sum or sums within the limit of (Amount of Guarantee) as aforesaid, without your needing to prove or to show ground or reasons for your demand or the sum specified therein.

This guarantee is valid until theday of.....202.....

Signature and Seal of Guarantors

.....

.....

.....

Date.....202.....

Address.....

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