

Bhagat Phool Singh Govt. Medical College for Women Khanpur Kalan, Sonipat

Email: bpsgmc.purchase@gmail.com

Invitation of e-quotation for

Consumables items for Blood Bank

Inquiry No: Purchase/2026/ **1938**
Inquiry Issue Date: 24.04.2026.

Last Date of Submission: 30.04.2026 (11:00 AM)

Rate quotation in sealed envelope/Password protected quotation are hereby invited from the valid firms and suppliers by the undersigned on behalf of the Director, BPSGMC Khanpur Kalan for Supply of Consumables as per Annexure-1 for the Institute as per terms & conditions mentioned below. The filled e-quotations must receive through registered e-mail (**Password protected**) on or before 30.04.2026 at 11:00 AM & quotation opened on 30.04.2026 at 11:30 AM.

“QUOTATION FOR”

Consumables items for Blood Bank

Closing Date—30.04.2026 Time 11:00 AM.

1. Terms & Conditions:-

a) The quotations received Sealed/online after the deadline shall not be entertained under any circumstances whatsoever. In case of any delay this Institute will not be responsible.

The online submission through password protected will also be restricted.

- b) Quotations must be in online prescribed Proforma on the letter head of the firm duly signed by the Proprietor/ Partner/ Director or their authorized representative. In case of signing of quotation by the authorized representative letter of authorization must be attached with the quotation.
- c) Quotation must be submitted in the office of undersigned before deadline of submitting the quotation.
- d) Rates must be quoted in **Indian Rupees** and as per the format specified taxes extra if any must be written separately.
- e) Rates must be quoted F.O.R basis (including Freight charges)
- f) No overwriting or cutting is permitted in the rate. If found, the quotation shall be summarily rejected.
- g) The rates quoted must be valid for 90 days minimum or as per State Govt. instruction issued from time to time, from the date of opening of the quotation and silence of any tendered on this issue shall be treated as agreed with this condition.



Annexure—I

Sr. No.	Name of the items.	Req.Qty.	Specification	Remarks
1.	HCV Tridot Card	300 test card	4 th or 3 rd Generation Batch/Lot.of kit which will be supplied to Institute should be NIB Approved Make—J. Mitra, Diagnsotic, Biosensor, Abbot, SHOM Healthcare	1. Qty may be increase or decrease.
2.	HIV Tridot Card	300 test card	4 th or 3 rd Generation Batch/Lot.of kit which will be supplied to Institute should be NIB Approved Make—J. Mitra, Diagnsotic, Biosensor, Abbot, SHOM Healthcare	
3.	HBsAG Rapid Card	300 test card	Make- J.Mitra, Aspen, Meril, tulip & Lordsmad, SHOM Healthcare	
4.	Anti Sera D 10 ml	450 vial	Make—J. Mitra, Tulip, Diagast, Bio Rad, 10 ml per vial	

[On the letterhead of firm]

PRICE BIDFORM Annexure—II

To,

Director,
BPSGMC (W),
Khanpur Kalan, Sonipat

1. I/We Submitted the quotation for EnquiryNo.“**QUOTATION FOR SUPPLY.....AGAINST THE INQUIRY NO:Purchase/2026/....** due on dated.....at BPSGMC, Khapur Kalan, Sonapat.
2. I/We thoroughly examined, understood and accepted terms & conditions given in the enquiry document, failing which my quotation will be rejected out rightly.
3. **The vendor should also certify that the rates quoted in the quotation are not more than the MRP of the manufacturers.**
4. I/We hereby offer to supply at the following rates.

Sr. No	Particular	Quantity	Quoted Make (If any)	Price/Unit Exclusive of Tax (INR)	GST/CST/ST
1.					
2.					

Date _____

Place _____

Phone _____

(Signature of Authorized,Person) _____

(Name) _____

