

	महाराष्ट्र शासन SIR J. J. GROUP OF HOSPITALS, BYCULLA, MUMBAI - 400 008 Medical Store/Surgical Store सर ज.जी. समुह रुग्णालये, भायखळा, मुंबई - 400 008 Tel.No. 2373 55 55, 2373 1144 ; Fax No. 2373 55 99; Email id-jjhmedicalstore@gmail.com	
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No.: JJH/MS/Quotation/ A / 44 /2025

Date:- 29/01/2025

Sub : Quotation for the supply of medicines /items (open quotation)

Sir,

You are requested to submit your lowest bid for medicines / items The quotation should reach this office in a sealed envelope or before 06/02/2025 till 5.00 pm. Quotation is also published on www.ggmcejh.com

The Dean, Sir J J Group of Hospitals, Mumbai reserves the right to Accept ,Recall or Reject any or all quotations without assigning any reason. Other instructions and terms & conditions regarding quotation are mentioned below the drug list.

Sr. No.	Name of the Drug	Unit Packing	Rate including GST as per unit Packing	Mfg By	MRP
1	Inj. Adenosine 3mg/ml	2ml amp			
2	Inj. Enoxaparin 40mg/0.4ml	1PFS			
3	Inj. Encxaparin 60mg/0.6ml	1PFS			
4	Inj. Etomidate 20mg/10ml,	10ml vial -			
5	Inj. Hepatitis B 20mcg/ml,	1ml vial			
6	Inj. Tranexamic Acid 100mg/ml	5ml amp			
7	Tab. Diazepam 5mg	1Tab			

Instructions and terms & condition regarding Quotation:-

- Interested vendors should submit the quotation as per given format only. Vendors need to specify Manufacturer & brand in the quotation and the same supply needs to be supplied
- Quotation must be submitted in sealed envelope only
- The quotation & envelope should be addressed to - The Dean, Sir J J Group of Hospitals, Mumbai and marked **Kind attention to- Medical store.**
- Vendors must write quotation reference no & Last date of submission the quotation on the envelope.**
- Any amendments regarding the quotation will be published on website www.ggmcejh.in. Vendors will not be communicated separately regarding the amendments.
- However if the vendor fails to check any of these amendments on the website then it will be presumed that the vendor has quoted his/ her rates by taking the note of these amendments.
- Rate should be quoted **inclusive of all taxes ,GST , etc.**

8. Rate must be written in both figures & words Rates should be valid for six months from the date of opening the quotation.
9. Rate must be quoted for official Pharmacopeial standards i.e IP/BP/ USP only & same goods must be supplied.
10. Delivery period is 24 hrs to 03 (Three) days from the receipt of order, as per vitality of Medicine.
11. **Analysis test reports** need to be submitted at the time of goods supply.(Inhouse and NABL test reports compulsory).
12. For goods supplied under MJPJAY Other scheme ,bills will be passed only after utilization certificate received.
13. Successful vendors if fails to supply the goods within stipulated delivery period he is liable for the further necessary action, which may deem fit.
14. Frequent defaulter bidder will be debarred from participating in the future tenders / quotations called by this office
15. Payment within 120 Days from the Date of Submission of bills after Delivery of goods.
16. Sample needs to be submitted whenever asked.
17. **Following documents need to be submitted along with quotation.**
(All documents need to be self attested).
 - A. Bidders FDA license (manufacturing license OR wholesale stocking & Selling Licence).
 - B. Authorization Letter.
 - C. No conviction certificate from FDA.
 - D. GST registration copy.
 - E. Bidder details as per Annexure A.
 - F. Adata (अदाता) Registration Number at JJ Hospital Mumbai (If Adata Registration number is not taken then documents mentioned in Sr.No. 8 of Annexure A to be submitted by bidder on his letter head along with the attested copies.).
 - G. WHO GMP certificate of manufacturer.
18. **NOTE : Last date of submission of quotation : 06 / 02 / 2025 before 5.00 pm.**



Dean

Sir J J Group of Hospitals, Mumbai -400 008.

	<p style="text-align: center;">महाराष्ट्र शासन SIR J. J. GROUP OF HOSPITALS, BYCULLA, MUMBAI - 400 008 Medical Store/Surgical Store सर ज.जी. समुह रुग्णालये, भायखळा, मुंबई - 400 008 Tel.No. 2373 55 55, 2373 1144 ;Fax No. 2373 55 99; Email id-jjhmedicalstore@gmail.com</p>	
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Annexure – A

(To be submitted on Bidder's Letterhead, Incomplete Annexure is liable for Rejection)

1. Name and address of the firm: -
2. Registered Head Office Postal address: -
3. Telephone No.
4. E-Mail ID : -
5. Ownership status of the firm- (Maharashtra Govt. / Central Govt./Jt. Sector /co - operative /SSI /Private)
6. Whether bidding as a manufacturer / importer / Authorized Distributor
7. Name of the person & Phone no. who should be contacted by this office in case of emergency.
8. Payee (अदाता) Registration Number at Sir J J Hospital, Mumbai.
9. Bank Details: -
 - 1) Bank A/C No. _____
 - 2) IFSC Code: - _____
 - 3) Branch Name & Address: _____
 - 4) Cancelled Cheque: _____
10. PAN number _____
11. GST registration number _____

I / we hereby declare that particulars furnished above are true to the best of my /our knowledge and belief and that if any of the particulars is found to be materially incorrect / misleading, My /Our quotation shall be rejected. I / we accept all term & condition, also I / we are liable for penal action as per terms specified in the " terms and conditions of quotation".

Date: -

Signature of the bidder with official seal and address