

OFFICE OF THE MEDICAL SUPERINTENDENT  
J.N.MEDICAL COLLEGE HOSPITAL  
ALIGARH MUSLIM UNIVERSITY,  
ALIGARH (U.P.)  
Phone No.0571-270016/2721113/2721114

No.Ext.....*8026*...../MCH

Dated.....*30.03-15*.....

M/S.....  
.....  
.....

Sealed quotation/price list are invited from manufacturer or their authorized dealer having valid Drug License and TIN NO. for the following articles on the terms and conditions printed overleaf.

**Quotation should reach this office on or before 10.04.2015 by 3.00 PM**

**AS PER REQUIREMENT DURING FINANCIAL YEAR 2015-2016**


List of required Drugs and drug items is enclosed herewith.



**Medical Superintendent**

**MEDICAL SUPERINTENDENT  
J.N. Medical College Hospital  
A.M.U., ALIGARH**

1. Goods are required to be dispatched F.O.R department i.e. J.N.M.C. Hospital, A.M.U., Aligarh
2. Goods will be supplied in the name of the Medical Superintendent, J.N.Medical College Hospital, Aligarh Muslim university, Aligarh-202002
3. The Hospital has the right to accept the rates of some or all the articles required.
4. The Hospital reserves the right to reject any or all the quotations without assigning any reason or to allot full or part of the supply to one or more firms.
5. Payment shall be made against bill.
6. In case goods are not according to specification, the cost of returning them shall be borne by the supplier.
7. The goods have to be supplied within 15 days from receipt of order of supply.
8. The period of validity of the rates offered may be specified.
9. The firm should mention their TIN No. as well as Valid Drug Licence No.
10. The quotations containing uncalled for remarks are liable for rejection.
11. The discount/rebate admissible if any may be quoted.
12. The rate of Trade Tax including surcharge along with concession admissible to educational Institution/Hospital may be specified.
13. Please send the printed price list of the manufacturer to verify the rates, Authority letter of the manufacturer in case you are the authorised dealer of the manufacturer.
14. Firm /Supplier must itself register in the Central Purchase Office, A.M.U., Aligarh or registered in any Govt. Organisation and a certify copy of such Registration be enclosed.
15. Manufacturer/Marketing Firm and their products must be well known in JNMCH and in Local Market.
16. GMP and ISO Certificates of the manufacturer must be attached.

  
Medical Superintendent  
MEDICAL SUPERINTENDENT  
J.N. Medical College Hospital  
A.M.U., ALIGARH

Office of The Medical Superintendent  
 J.N.Medical College Hospital  
 A.M.U.Aligarh, U.P. 202002  
 Phones (Office) 0571-2720016/2721113  
 Fax-+91-571-2720016

**TENDER FORM FOR DRUG SUPPLY**  
**During 2015-2016**

**Technical Information:**

1. (a) Name of the firm.....
- (b)Year of establishment.....
2. Address: (a) Head Office.....  
 .....
- (b)Branches.....  
 .....
3. Telephonic address
  - (a) Telephone No.....
  - (b) Fax.....
4. Tin No. ....C.S.T.No. ....
5. Drug License No. ....
6. Is your firm an SSI Unit?  
 If yes, please mention registration No. and date and attach attested copy of the certificate to this effect.
7. Have you executed any orders placed by this or other Department of the Government of India/U.P. Government in the past two years? If so particulars of such orders should be furnished. Particulars of important supply executed for Government Department such as Railways, Defence, and Electricity Board etc.during the last two years.
8. Maximum amount up to which orders can be executed in a month.

Authorised Signatory

