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

D.No........11.5........../MCH
M/S.------------------------
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Sealed tenders along with price list are invited from manufacturer / marketing firm/ authorized dealers having valid Drug License and GSTIN NO. for the following drug items on the terms and conditions printed overleaf.

Quotation should reach this office on or before 27.05.2019 by 3.00 P.M.
Requirement financial year 2019-2020
List of required I.V.Fluids is enclosed herewith.

Note: - Above tender is being issued with the condition that if the drug/medicine /item will be available on GEM Portal then priority will be given to GEM Portal as per GFR 2017. If it is not available on GEM then this tender will be applicable.

Medical Superintendent
MEDICAL SUPERINTENDENT
J.N. Medical College Hospital
A.M.U., ALIGARH
Terms & Conditions of the tender

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 GSTIN 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 GST 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. Annual Turnover of the manufacturer/ marketing firm should not be less than ten crores. Documentary proof must be attached.
17. GMP and ISO Certificates of the manufacturer must be attached.
18. Samples of the drugs supplied by the firm may be sent for testing to the Drug Authority of India to check quality, if any drug supplied by you does not pass parameters of quality check Then firm will take back all supplied drugs and deposit the amount for the same, failing which firm will be black listed.

IMPORTANT- First priority will be given to G E M Portal of the government of India as per GFR 2017. This tender will only be applicable if items/Drugs are not available on GEM Portal.

Medical Superintendent
J.N. Medical College Hospital
A.M.U., ALIGARH
<table>
<thead>
<tr>
<th>S.No.</th>
<th>Name Of Item/ Medicine</th>
<th>Specification</th>
<th>Brand Name</th>
<th>Mfrd./Mktd.by</th>
<th>Unit</th>
<th>Price /unit</th>
<th>GST</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Dextrose 10% I.V.F. FFS Bottle</td>
<td>500ML</td>
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<tr>
<td>2</td>
<td>Dextrose 25% I.V.F. FFS Bottle</td>
<td>100ml</td>
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<tr>
<td>3</td>
<td>Dextrose 5% I.V.F. FFS Bottle</td>
<td>500ML</td>
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<tr>
<td>4</td>
<td>Dextrose+ Sod. Chloride 0.9% (DNS) FFS Bottle</td>
<td>500ML</td>
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<tr>
<td>5</td>
<td>Inj. Mannitol 20% FFS Bottle</td>
<td>100ml</td>
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<td>6</td>
<td>Inj. Paracetamol I/V FFS Bottle</td>
<td>100ml</td>
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<td>7</td>
<td>Isolyte-P I.V.F. FFS Bottle</td>
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<td>8</td>
<td>Normal Saline 0.9% I.V.F. FFS Bottle</td>
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<tr>
<td>9</td>
<td>Ringer Lactate I.V.F. FFS Bottle</td>
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<tr>
<td>10</td>
<td>Sod. Chloride 0.9% (N.S.) I.V.F. FFS Bottle</td>
<td>100ml</td>
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Signature & Seal of Authorized Signatory