



महाराष्ट्र शासन

Government Medical College & Hospital, Baramati

Mail ID-medicalstoregmc@gmail.com

Quotation Form

GMCB / MS / MED / QUOT / / 2025

Date: 15/01/2025

Sub: - Quotation for Medicines as given below.

Sir/ Madam

You are requested to furnish your quotation for the following items to the DEAN, GOVERNMENT MEDICAL COLLEGE & HOSPITAL, BARAMATI.

| Sr.no. | Name of Drug |
|--------|--|
| 1 | Clobetasol Propionate Cream 0.05%w/w Cream (15gm Tube) |
| 2 | Clotrimazole 1%w/w Cream (15gm Tube) |
| 3 | Diclofenac Gel (15 gm Tube) |
| 4 | Diclofenac Gel (30 gm Tube) |
| 5 | Dinoprostone 0.5mg Gel (3 gm) |
| 6 | Lignocaine 2%w/v Jelly (30gm Tube) |
| 7 | Miconazole 2%w/w Cream (15gm Tube) |
| 8 | Permethrin 5% w/w Cream (30gm Tube) |
| 9 | Povidone Iodine 5 % w/w ointment (15gm Tube) |
| 10 | Silver Sulfadiazine cream 1% w/w (15gm Tube) |
| 11 | Permethrin 5% w/w Cream (15gm) |
| 12 | Benzyl Nicotinate (2.0mg) + Heparin (50IU) Ointment (20gm) |
| 13 | Black Coal Tar Disinfectant fluid (Grade III) 5 Litre |
| 14 | Liquid Paraffin IP (500 ml Bottle) |
| 15 | Magnesium Sulphate I P (400gm powder) |

TERMS & CONDITIONS

Note:- 1) Rate should be quoted inclusive of all taxes.

2) Rates quoted are valid up to SIX months.

3) The delivery of the material must be at MEDICAL STORE within Office hour (10.00 am to 5.00 pm)

4) The Envelope & Quotation should be addressed by the name of DEAN, GOVERNMENT MEDICAL COLLEGE & HOSPITAL, BARAMATI. It should be submitted within stipulated time at Administrative Office.

5) It is Mandatory to mention quotation reference no. on the envelope of the quotation

6) Rates must be mentioned in figure & only in **digital printed form and not hand written.**

7) Conditional Quotations will not be accepted.

8) Right to Accept, Recall or Reject above Quotations lies solely with DEAN, GOVERNMENT MEDICAL COLLEGE & HOSPITAL, BARAMATI

9) If it is noticed that the mentioned drug is available in local market at the lower rate than the quoted rate, then the claim for the purchase by this quotation will become invalid.

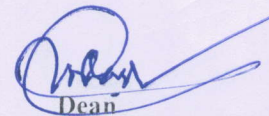
10) Right to Purchase Medicines lies with Dean GMC, Baramati.

11) Submit following documents with quotation:

i) Form 20,20F,21 & intimation letter

ii) Non conviction certificate issued from concern FDA.

Last Date to submit Quotation: 22 / 01 / 2025 before 5.00pm


Dean

GOVERNMENT MEDICAL COLLEGE & HOSPITAL, BARAMATI