

Govt. Of Maharashtra
Chhatrapati Pramila Rajee General Hospital, Kolhapur - 416002.
Mahatma Jyotirav Phule Jan Aarogya Yojana.

Tel: (0231) 2641583

By Regd. A.D / U.P.C.

No. CPRGHK/ 3477

/2025

Date : 27/11/2025

To,

M/s. _____

Subject :- Quotation Call For MJPJAY – Injection

Reference :- As per Sanctioned Notesheet Date :- 27 / 11 /2025.

Please arrange to give your lowest possible rate for the items mentioned below.

| Sr. No. | Name of Item | Packing Size | MFG By | MRP Rs | Quotated Rate Per Unit with GST |
|---------|---|---------------|--------|--------|---------------------------------|
| 1 | Inj. Anti haemophilic Factor VIII (Esperoct) 1000UI | 1x1 Vial | | | |
| 2 | Inj. Anti haemophilic Factor VIII (Esperoct) 500UI | 1x1 Vial | | | |
| 3 | Inj. Anti Thymocyte Immunoglobulin 250mg/5ml | 1x1 Vial | | | |
| 4 | Inj. Bendamustine 25mg | 1x 1 vial | | | |
| 5 | Inj. Cyclophosphamide 500mg | 1x 1 vial | | | |
| 6 | Inj. Filgrastim 300mcg | 1x 1 vial | | | |
| 7 | Inj. Papaverine HCL 30mg/ml | 1x 2ml | | | |
| 8 | Inj. Pneumococcal Polysaccharide Vaccine | 1x 0.5ml Vial | | | |
| 9 | Inj. Rituximab 100mg/10ml | 1x 10ml | | | |
| 10 | Inj. Rituximab 500mg/50ml | 1x 50ml | | | |
| 11 | Inj. Romiplastim 500mcg | 1x 1 vial | | | |
| 12 | Inj. Tirofiban 100ml | 1x 1 vial | | | |
| 13 | Inj. Sodium Nitropruside 50mg/2ml | 1x 1 vial | | | |

Terms & Condition as follows:-

1. Rate should be inclusive of all taxes like GSTetc .
2. Material should be delivered at appropriate place and time as instructed by authority.
3. Material should be in good condition as per the specification.
4. Material will be inspected by HOD CVTS Department/ Respective User Department and if material is found of inappropriate quality, material will be rejected.
5. Attach Xerox copy of Aadhar Card, PAN, GST & FDA Drug Licence (attested) .
6. All rights are preserve in favour of The Dean , C.P.R. Hospital, Kolhapur.
7. Don't quote Rates of other items except as mention Dont miss serial of above list.
8. Organisation/ Distributor Require Authorization letter for submission of the quotation.
9. Submit printed quotation on own letter head with duly signed and stamped . Quotation should not be submitted without sample approval from HOD. Hand written quotation will be rejected as & when needed unit right reserved, unit HOD of concerned Department
10. Quotation submitted in any other format other than above will be rejected.

11. Valid WHO GMP certificate and WHO GMP Product list or COPP for quoted Items.
12. In House test report for purchase Item Compulsory submit with product.
13. National Accreditation Board for Testing and Calibration Laboratories (NABL test report).
Should be submit with product.
14. Non Conviction certificate issued from concern FDA for Manufacturer/Distributor.
15. For Consumables: ISO 13485 (International Organisation for Standardisation), ISO 17025, ISO 45001, ISO 14001, GMP (Good Manufacturing Practices)/Schedule M, Quality Management System (QMS) for Medical Devices, Central Drug Standard Control Organisation (CDSCO) approved MD
16. Supplier Should be Submitted Three Years Tax returns file
17. It is Mandatory for suppliers to provide any evidence of supplying materials to Govt/Semi Govt institution for minimum 3 years.
18. Supply of goods Should be done within 10 days of purchase order otherwise order will be cancelled.
19. Packing or Before Date :- 03/12/2025 Upto 5:00 Pm freight should be forward positively.
20. Sealed Quotations should reach this office i.e. on/before Inword office Dt. 03/12/2025
Upto pm.

05:00


Dean,
C. P. R. General Hospital,
Kolhapur.