

MGM INSTITUTE OF HEALTH SCIENCES CENTRAL PURCHASE DEPARTMENT (CPD)

Plot 1 & 2, Sector -1 Kamothe, Navi Mumbai 410209

eTender for VAC Machine - Qty 5 Nos

Tenders invited from reputed Manufactures or their authorised distributors / dealers of VAC Machine Machine for supply and Installation at MGM Medical College and Hospital, Kamothe Navi Mumbai in the format given below:

| Name & / | Address of Vendor: | | | | | |
|----------|-------------------------------------|------|-------|--|---|-----|
| Sr. No. | Item Name | Make | Model | Rate per Unit with Standard Warranty (Excluding GST) | Rate per Unit with 5 years Warranty (Excluding GST) | GST |
| 1 | VAC Machine | | | | | |
| | Technical Specification: | | | | | |
| | Year of Introduction: | | | | | |
| | Digital Display | | | | | |
| | Modes: Constant & Cyclic | | | | | |
| | Pressure Range: -20 mmHg - 220 mmHg | | | | | |
| | Bacteria Filter | | | | | |
| | Alarm | | | | | |
| | Battery type or Electrical | | | | | |
| | If, Battery backup | | | | | |
| | Dimensions: | | | | | |
| | Weight: | | | | | |

| Consumable with Price list: | |
|---|---|
| | |
| Terms and Conditions | |
| Payment Terms: (20% with PO, 50% on Delivery, 30% after Installation) | |
| Delivery Period: | |
| Post Warranty AMC (in %) with Escalation: | |
| Post Warranty CMC (in %) with Escalation: | |
| Preventive maintenance | |
| Breakdown Reaponse time needed | |
| Kindly email your lowest quotations for above with | detailed terms and conditions to etenders@mgmuhs.com only |
| Timely email your lowest quotations for above with | , , , , , , , , , , , , , , , , , , , |
| Date: | Signature of Tenderer: |
| | |
| | Signature of Tenderer: |
| | Signature of Tenderer: Vendor Name: |
| | Signature of Tenderer: Vendor Name: Name: |
| | Signature of Tenderer: Vendor Name: Name: Designation: |
| Date: | Signature of Tenderer: Vendor Name: Name: Designation: Email ID: |
| Date: | Signature of Tenderer: Vendor Name: Name: Designation: Email ID: Mobile No.: |
| Date: | Signature of Tenderer: Vendor Name: Name: Designation: Email ID: Mobile No.: GST No. |
| Date: | Signature of Tenderer: Vendor Name: Name: Designation: Email ID: Mobile No.: GST No. PAN No. |