



Phone: 2538 0203

MADHYAMGRAM MUNICIPALITY

Madhyamgram, Kolkata – 700 129

Ref. No: MM /CHAIR/HOSP/LAB.REAGENT/NIQ-467/21-22

Date: 15/09/2022

NOTICE INVITING QUOTATION

Sealed Quotation are therefore invited from Manufacturer/Distributor/Authorized, agent, bonafide supplier. **The rate should be quoted as their own different pack size as mentioned in the list and should inclusive of all taxes.** The Quotation should be submitted in Quotation form duly sealed covered super scribing Quotation of rate for supply of **LAB.REAGENT/CONSUMABLE** items etc in 'Netaji Subhas Chandra Bose Specialized Hospital & Research Centre' addressed to the **Chairman, Madhyamgram Municipality**, so as to reach this office within 13.00 Hrs. on **23 /09/2022**. The Quotation received after due date & time will not be considered. The Quotation will be opened on **23 /09/2022** at 13.30 Hrs. and the Quotation are requested to remain present of sent their suitable authorized persons to be present at the time of opening and offer clarification required if any. Who are already submitted the Quotation is not to needed for further participation.

Terms & Condition:

1. Quotation forms will be available at the cash counter of the Municipality on payment of Rs.50/- only.
2. The last date of purchasing Quotation form is on 22 /09/2022.
3. Supply against order to the successful Quotation is to be made as when as per requirements.
4. Supplier should remain bound to follow all other terms & condition as will be specified in the supply order.
5. Supplier must be submitted Xerox copy of their up to date Trade license, GST Reg. No. Professional Tax Payment Certificate, Drug License and Pan Card.
6. Any notice into ended to be served upon the supplier will be treated as served if displayed on the notice board of this office and/ or if by post under certificate of posting.
7. Authority reserve the rights of accept or reject or every Quotation without assigning reason whatsoever.
8. Supplier should be submitted the rate as per SL. NO. In maintain Quotation and hand writing or over Writing not allowed.
09. Quotation dropping address at Madhyamgram Municipality (Finance Officer's Room)
10. The above Quotation is also available on our website
www.madhyamgrammunicipality.org

LIST OF LAB REAGENT ITEMS .

Sl. No.	Items name	Pack size	Brand
1.	Albumin	100 ml.	SPAN
2.	Alkaline Phosphates(IFCC)	2 X 50 ML.	PATH
3.	Amylase	2 x 25 ml.	PATH
4.	Anti ABD (ABORH)	3 x 10 ml.	J. MITRA
5.	Anti ABD (ABORH)	3 x 10 ml.	TULIP
6.	ASO kit	100 test	EURO
7.	Bilirubin	458 ML.	DIASYS (QDS)
8.	CPK (CK--NAC)	2 X 5 ML.	PATH
9.	CPK(CK-MB)	2 X 5 ML.	PATH
10.	Create nine	2 X 125 ML.	(Euro)
11.	Create nine (Single Re- Agent)	2 X 50 ML.	PATH
12.	Calcium(ARACNASO-iii)	50 TEST	PATH
13.	Cholesterol with HDL	2 X 50 ML.	OZONE
14	CRP kit(Plain)	100 test	EURO
15.	Cidex / Tridex	(5 lit.)	JOHNSON & JOHNSON
16.	Carbolic Acid (Phenol)	500 GM.	MERCK
17.	Deionised water	5 LTR.	MERCK
18.	Drab kings solution(Hemoglobin)	1000 ML.	ARKRAY
19.	DHDL	64 ML.	EURO
20.	DLDL	64 ML.	EURO
21	EDTA powder	100 GM	MERCK
22	Formaldehyde Solution (37%--41%)	500 ML.	MERCK
23	Formalin Tablet	100 TAB.	SIGMA
24	Glucose	1000 ML.	ACCUREX
25	Glass slide(75mmX25mm) (Thick-1.1to1.2)	50 NOS. OF 1 BOX	BLUE STAR
26	HbSag card(HEPA CARD)	100 TEST	OZONE
27	HCG CARD(PEG CARD)	50 TEST	ACON
28	Immersion oil	30 ML.	MERCK
29	Lipase	1 X 25 ML.	PATH
30	Mantoux 10 TU PPD	5 ML.	BEACON
31	Mantoux 5 TU PPD	5 ML	BEACON
32	Micro tips 0.2 µl – 10 µl	1 BOX	TERSON
33	Micro tips 2 µl -200 µl	1 BOX	TERSON
34	Micro tips 200 µl -1000 µl	1 BOX	TERSON
35	Multi Strip for Urine (8 P.R.A)	100 TEST	SIEMENS
36	OBT test kit	50 TEST	CREAST
37	P-vivax & P fal antigen	50 TEST	J. MITRA
38	RA-Factor	100 TEST	EURO
39	Rubber Tunicate	1 MTR.	LOCAL
40	S.G.O.T.	75 ML.	EURO
41	S.G.P.T.	75 ML.	EURO
42	TSH Vast	192 TEST	TOSOH

Annexure -II

43	Total Protein	2 X 50 ML.	SPAN
44	Triglycerides	100 ML.	PATH
45	Test tube 12 MM X 75 MM	100 PCS.	BOROSIL
46	Turbilatex ASO	50 ML.	PATH
47	Turbilatex RA	50 ML	PATH
48	Turbilatex CRP	50 ML	EURO
49	Urea (Berthelot)	4 X 100 ML.	PATH
50	Uric Acid	75 ML.	CORAL
51	Urine collection pot(Sterile)	100 PCS OF PKT.	LOCAL
52	Vial(Plain) / Clotted(Non vac Double cap)	100 PCS.	XYNLE
53	Vial(Sugar) (Non vac Double cap)	100 PCS.	XYNLE
54	VIAL(EDTA) (Non vac Double cap)	100 PCS.	XYNLE
55	VDRL(RPR) (Syphilis)	50 TEST	OZONE
56	Widal	1 X 20 ML.	BEACON
57	Syringe 2ml	PER BOX	NIPRO
58	Syringe 3ml	PER BOX	NIPRO
59	Syringe 5ml	PER BOX	NIPRO
60	Syringe 10 ml	PER BOX	NIPRO
61	LIQUID PARAFFIN (LIGHT)	PER BOTT.	LOCAL

Executive officer
MADHYAMGRAM MUNICIPALITY