Revised format

# PT. B.D.SHARAMA POSTGRADUATE INSTITUTE OF MEDICAL SCIENCES ROHTAK

E-mail:- equotations.pgims@uhsr.ac.in Invitation of e-quotations for PPI (DDDR)

**Inquiry No: To be decided by concerned department** → ~~No.~~ Cardio/26/4644

**Inquiry Issue Date: To be decided by concerned department** → Dated - 01/10/2026

**Last Date of Submission: To be decided by concerned department** → 05/10/2026

**Rate quotation in** password protected quotation are hereby invited from the valid firms and suppliers by the undersigned on behalf of the Director, PGIMS, Rohtak for supply of consumables as per Annexure-I for the Institute as per terms & conditions mentioned below. The filled e-quotations must receive through registered e-mail (Password protected) on or before 05/10/26 at 3.00 PM & quotation opened on 05/10/26 at 3.30PM

"QUOTATION FOR"

Item Name :- Permanent Pacemaker Implantation (DDDR)

**Closing Date :-** 05/10/26 **Time 3.00PM**

1. **Terms & Conditions:-**

a. **The quotations received** online after the deadline shall not be entertained under any circumstances whatsoever. In case of any delay this institute will not be responsible.

**The online submission though password protected mode will be restricted**

b. Quotations must be in online prescribed Performa on the letter head of the firm duly signed by the Proprietor/ Partner/ Director of their authorized representative. In case of signing of quotation by the authorized representative letter of authorization must be attached with the quotation.

c. Quotations must be submitted in the office of the undersigned **through email** before deadline of submitting the quotation.

d. Rates must be quoted in Indian Rupees and as per the format specified taxes extra if any must be written separately.

e. Rates must be quoted F.O.R. basis (including Freight charges).

f. No overwriting or cutting is permitted in the rate. If found, the quotation shall be summarily rejected.

g. The rates quoted must be valid for 90 days minimum or as per State Govt. instructions issued from time to time from the date of opening and silence of any tendered on this issue shall be treated as agreed with this condition.

h. Becoming L1 will not be the criteria for awarding of purchase order unless the rates are reasonable & justified

i. Any conditional quotations shall be rejected summarily.

j. **Delivery period – As per supply order on issuing by the office.**

k. **Liquidated Damages: -** If the supplier falls to deliver the material on or before the stipulated date, then a penalty at the rate of 0.5% per week of the total order values shall be levied subject to maximum of 10% of the total order value on which amount when there is no EMD.

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PGIMS, Rohtak

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l. **Payment terms:** - Payment will be only after satisfactorily complete delivery/ commissioning of material and after inspection by Inspection committee.

m. Pt. BDS PGIMS, Rohtak reserves the right to increase or decrease quantity and / or amount of work. Decision of quantity of material in the Pt. BDS PGIMS, Rohtak will be final in this regard.

n. Pt. BDS PGIMS, Rohtak reserves the right to reject any quotation or part or the whole of inviting quotation process without assigning any reason. Decision of the Pt. BDS PGIMS, Rohtak will be final in this regard.

o. **Colum (O) is not required.**

**Special Terms and Conditions:-**

1. **Bidder must quote the product as per specifications provided in Annexure-1.**
2. **The supplier may be asked to submit the sample of quoted make for technical evaluation, to the Pt. BDS PGIMS, Rohtak , if required. The expenditure incurred for demonstrating the items will be borne by the supplier.**
3. **Inspection committee will check the products thoroughly, if somehow inspection committee found any discrepancy and is not satisfied with the final product ( final product should be same as reviewed ones at the institution) then Pt. BDS PGIMS, Rohtak has the right to reject the supply and cancel the order, and no claim for payment in this regard will be entertained.**
4. **Jurisdiction: The jurisdiction will be district Rohtak only.**
5. **It is directed to IT Cell that requisition of above item may also be placed on website of Pt. BDS PGIMS, Rohtak for vide publicity to invite a competitive manner of purchase.**
6. **Samples will be provided by the firm with quotations, otherwise quotation not accepted for the institute. (To be decided by concerned deptt.)**

**Encl: Annexure-I (Specification)**

**Annexure –II (Format of Quotation)**

**Committee**

**Dr. ASHWANI KUMAR**
**Sr. Prof. & Head, Cardiology deptt.,**
**PGIMS, Rohtak**

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**Annexure-I**

**Department of Cardiology, Pt. B. D. Sharma, Post Graduate Institute of Medical Sciences, Rohtak**

- **Inquiry No. : Cardio/26/ 4644**
- **Inquiry date : 01.10.2026**
- **Last date for E-quotation submission: 05.10.2026 (03:00PM)**
- **E-quotation Opening date : 05.10.2026 (03:30PM)**

**Consumables/implant required for Permanent Pacemaker Insertion (PPI) :-**

| Sr. No. | Name of consumable items/ implants/ medicines | Qty. | Specifications | Remarks |
|---|---|---|---|---|
| 1. | Dual Chamber Pacemaker (DDDR) - Pulse Generator + Atrial lead & Ventricular lead of reputed make. | One | Dual Chamber Pacemaker (DDDR) - Pulse Generator + Atrial lead & Ventricular lead of reputed make. | Immediately procurement required |
| 2. | Silk Reverse Cutting Suture - 2.0 | One | Silk Reverse Cutting Suture - 2.0 | |
| 3. | Introducer Sheath 7F | Two | Introducer Sheath 7F | |

Sr. Prof. & Head,
Deptt. of Cardiology,
PGIMS, Rohtak.

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Annexure-II

(On the letter head of the firm)

Price Bid Form

To,

The Director,
Pt. B.D. Sharma PGIMS,
Rohtak.

1. I/ We _____Submitted the quotation for enquiry No "quotation for supply _____ against the inquiry No. _____ due on dated _____ at Pt. BDS PGIMS, Rohtak.

2. I/ We thoroughly examined, understood and accepted terms and conditions given in the enquiry document, failing which my quotation will be rejected our rightly.

3. The Vendor should also certify that the rates quoted in the quotation are not more than the MRP of the manufactures.

4. I/ We hereby offer to supply at the following rates.

| Sr. No. | Particular | Quantity | Quoted make If Any | Price/Unit Exclusive of Tax (INR) | GST/CST/IST |
|---|---|---|---|---|---|
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |

Date: _____

Place: _____

Phone : _____

(Signature of Authorized Person)

Name _____

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