

**GOVERNMENT OF INDIA
BCG VACCINE LABORATORY
GUINDY, CHENNAI - 32.**

Phone : 2234 4172 (Stores)
2234 1745 & 2234 2976

Fax : 91-44-2234 9947

Dated : 28.02.18

File No. No.D.21027/07/2018-19 (Stores)

M/s.

As per list enclosed

Dear Sirs,

Sub : Disinfectant - Reg

Please forward your "sealed quotation" superscribed on the envelope for supply of the following materials to reach this office **immediately / on or before** 15.03.18

Sl.No.	DESCRIPTION OF ITEMS	PROBABLE REQUIREMENT
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Quotation required for Disinfectant as per list enclosed.

IMPORTANT NOTE:

Our required Materials samples (Wherever necessary) should be seen at BCGVL – Stores before submitting quote; otherwise the quote will summarily be rejected without assigning any reason thereof.

Sample inspection time between 11 AM and 4 PM (1 PM to 2 PM Lunch Hour)

Quotation should be valid for 1 year.
Supply should be made on six monthly basis.

Rate inclusive of all taxes with break up should be given in sealed cover superscribed with enquiry number and date. No Extra to be charged. Payment will be made after successful supply of the materials.

NOTE:

1. Please ensure in your own interest that the envelopes containing the quotations are pasted properly and superscribed with No.D.21027/07/2018-19 (Stores) dated: 28.02.18
2. Final rates should be given and no addition should be made after that.
3. Rates should be given for each item and unit wise.
4. Your quotation should not be pre-conditional. Pre-conditional quotations will be summarily rejected.

Samples wherever necessary shall be submitted along with quotation as per specifications for approval. Supply shall be made according to accepted sample / specification only and within the time limit specified. Prices quoted shall normally be inclusive of delivery charges at this office unless otherwise stated, no additional charges such as packing, forwarding, handling and insurance will be paid unless otherwise stated and confirmed in the supply order. Sales Tax or other Govt. Taxes, if payable shall be clearly stated. CST 4% is leviable on inter-state sales, for which FORM "D" will be issued by this office. TNGST is as applicable. Rates shall normally be valid for a minimum period of 3 months from the date of quotation and shall be specifically conformed.

Normally the supplier is required to pay Security Deposit of 10% of the order value which will be returned after satisfactory completion of the contract. In the event of failure on part of the supplier as per terms of the supply order, the Security Deposit shall be forfeited in full or part thereof at the discretion of the undersigned.

Yours faithfully,



DIRECTOR

Annual Requirement for Disinfectant			
S.No	Product Name	Active ingredient	Finalized Qty
1	Germitol	Benzalkonium chloride 20%, Isopropyl alcohol 5 %, Cetrimide 0.5 %	25 litres
2	Quat	Alkyl (60% C, 30% C, 30 % C, 5% C , 5% C) Dimethyl benzyl ammonium chloride 13.238 %	16 litres
3	Totasep	10 % w/v Didecyl Dimethyl ammonium chloride, 3 % w/v PHMB	95 litres
4	Savlon or Savinox plus	Chlorhexidine gluconate solution I.P 1.5 % v/v and Cetrimide I.p 3.0 % w/v	75 litres
5	Alcomop	74% v/v Ethyl alcohol I.P, 4 % v/v Benzalkonium chloride I.P, perfume	140 litres
6	Nusept	1 % poly (hexamethylene biguanide) hydrochloride (PHMB)	595 litres



DIRECTOR

BCG Vaccine Laboratory