

No. SSS/SSH/WS/BME/538/2026

Date:

11:7 AUG 2026

To.

Sub: Request for Quotation for Calibration of Blood Bank Equipment's for Shri Sainath
 Blood Bank Shirdi.

Dear Sir,

Please Send Sealed Quotation for Calibration of Blood Bank Equipment's for Shri
 Sainath Blood Bank Shirdi till date 31/08/2026 for bellow listed Equipment's on mentioned
 address.

SR.NO	DESCRIPTION	QTY	SR.NO	DESCRIPTION	QTY
	CALIBRATION CHARGES FOR			CALIBRATION CHARGES FOR	
1	Apheresis	1	15	Incubator With Agitaor	1
2	Architect-Plus	1	16	Laminar Air Flow	1
3	Autoclave	1	17	Oven	1
4	Blood Collection Monitor	6	18	Plasma Expressor	2
5	Blood Refrigerator	2	19	Refrigerator	4
6	Central Monitoring System	1	20	Refrigerated Centrifuge	2
7	Centrifuge	3	21	Rotary Shaker	2
8	Cooling Centrifuge	2	22	Stop Watch	1
9	Cooling Incubator (4-37)	2	23	Thermometer	4
10	Deep Freezer	8	24	Tube-Sealar	6
11	Elisa Plate Reader	2	25	Walk In-Cold Room	1
13	Gel Centrifuge	3	27	Weighing Balance	1
14	Incubator	3	28	Weighing Machine	2
			29	Cell Counter 3- Part	1

Terms & Conditions:

- 1) Kindly send quotation including all taxes (e.g. GST, Packing & forwarding, Transportation, courier charges etc.) for F.O.R. Shirdi
- 2) Calibration to be performed every Six Months. Twice in a year.
- 3) GST and PAN Number should be strictly mentioned in quotation & Our GST No.27AAATS2581C1ZN
- 4) Sub name - (Sealed Quotation for Calibration of Blood Bank Equipment for Shri Sainath Blood Bank Shirdi) should be strictly mentioned on Envelope.

Note- If taxes are not mentioned then rates quoted will be considered as including all taxes & F.O.R. Shirdi.

Thanking you with blessings of Shree Saibaba.

o/c

Yours Faithfully,

Digitally signed by
PRITAM SUBHASH WADGAVE
Date: 13 08 2026 16:14:37

Dr Pritam Vadgave.
Medical Director,
Shree Saibaba Sansthan Hospitals, Shirdi

Address-
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