

To,

19 FEB 2026

**Sub: Quotation for Supply of Quality Assurance Test service for Radiology Equipment's**

Dear Sir,

Please send us sealed Quotation for Quality Assurance test service for Radiology Equipment's as mentioned in below chart on or before the date 29/02/2026 on following address.

Sr. No.	Description	Total No of Qty.	Cost in Rs./Unit	Total Amount in Rs. (incl. Tax)
1	Radiography & Fluoroscopy (Xray Machine fixed)	01		
2	Mobile Xray machine	03		
3	C-Arm Machine	03		
Total Machines		07 Nos.		
Total Amount R/o (Incl. of all Taxes) in Rs.				

## Terms &amp; Conditions:

- 1) Kindly send quotation including all taxes (e.g. GST, Packing & forwarding, Transportation, courier charges etc.) for F.O.R. Shirdi
- 2) QA Test Certificate Validity : 1 Year
- 3) GST and PAN Number should be strictly mentioned in quotation & Our GST No.27AAATS2581C1ZN
- 4) Sub name:- (Sealed Quotation for Quality Assurance test service for Radiology Equipment's) should be strictly mentioned on Envelope.
- 5) Work completion period: Within 15 days After receiving clear Work order for above mentioned work at Shri Sainath Hospital, Shirdi 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 Shri Saibaba.

Yours Faithfully  
 Lt. Col.Dr. Shailesh Oke (Rtd)  
 Medical Director,  
 Shree Saibaba Sansthan Hospitals, Shirdi

Digitally signed by  
 SHAILESH KARTIK OK  
 Date: 17-02-2026  
 12:33:24

## Address-

**Biomedical Engineering Dept.**  
**Shree Sainath Hospital, Administrative Office Bldg,**  
**A/p. Shirdi, Tal.Rahata,**  
**Dist.A'Nagar-423109**  
**Tel.No.02423-258514;**  
**Email ID: hospital.biomedical@sai.org.in**