

Basic Details - BHELHYD/MED/IMM TESTS/22-23
(To be given in bidder's letter head)

SI No	Description	Details
1	Name of the Vendor	
2	Regd. / Head office Address	
3	Regd. / Head office Address contact person details: Name, Designation, Ph no., Mobile No., email, etc.,	
4	GSTIN	
5	PAN	
6	Local Office / Branch Address	
7	Local Office / Branch Contact person details: Name, Designation, Ph no., Mobile No., email, etc.,	
8	Distance of the Local Office / Branch from BHEL General Hospital, RC Puram in KM	

Technical Bid: RFQ No – BHELHYD/MED/IMM TESTS/22-23

Name of the Vendor				
Quotataion Ref & Date				
SI No.	Item Description	Qty.	Quoted/Not Quoted	GST %
1	Rate Contract for IMMUNOASSY TESTS FOR HIV, HbsAg & HCV required for BHEL General Hospital, Ramachandrapuram, Hyderabad for a period of two years.	5000		

Requirment mentioned above is tentative. It may increase or decrease depending upon actual requirement.