



KARACHI INSTITUTE OF HEART DISEASES

KARACHI METROPOLITAN CORPORATION

ST-15, Block-16, Near UBL Sports Complex, Federal B. Area, Karachi-75950



Subject: R.F.Q. of replacement of elevator's necessary parts on Quotation Basis.

M/s. _____

Quotation No. ED/KIHD/ 0122 /26

Date of Published: 20/02/26

NTN/SRB No. _____

Date of Opening: 23/02/26

Request for quotation procurement of following material/services for Karachi Institute of Heart Diseases, KMC. Income Tax will be deducted according to government rules.

Each quotation document can be collected from the Account Department, KIHD on submission of bank deposit receipt in favor of KIHD General Co. (A/c # HABB 0008787900473303) at HBL, payment of Rs. 300 (Non-Refundable). Same can also be download from KIHD website <https://www.kihd.edu.pk> would be paid at the time of submission of quotation.

Sealed envelope should reach in the office of the undersigned by at 12:30pm on date of opening.

The procuring agency reserve the right to ACCEPT or REJECT any or all offers as per SPPRA rules 2010 amended time to time.

Sr. #	Description or Specification	Area	Rate	Amount
01.	Main Steel wire ropes 12mm (196Ft x 05 lengths = 980ft.	980ft.		
02.	Oil Cups	01 Set		
03.	Vinyl Flooring Tiles	01 Set		
04.	Cabin Guide Shoe	01 Set		
Total Amount				

I, agree the condition mentioned below:

Signature of Contractor with Stamp

Receipt No. _____ Rs. 300/-

Date of Bank Deposited: _____

Note:

1. NTN and CNIC must be attached otherwise the quotation will be considered cancelled.
2. The total amount of the procurement will be accepted offering the lowest price.
3. Over-writing, cutting, erasing in the document should be avoided.
4. Conditional bids will not be considered.
5. Quotation on any other form will not be considered.


Executive Director
Karachi Institute of Heart Diseases

Copy to:

- Assistant Director Finance, KIHD
- Main Store, KIHD
- Notice Board



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Sr. #	Description or Specification	Area	Rate	Amount
01.	Main Pulley (locally Casted 500mm)	01 No.		
02.	Gear Oil	10 Liters		
03.	Gear Seal	01 Set		
04.	Buffer Hydraulic	01 Set		
05.	Rope & Pulley replacement Charges	01 Job		
Total Amount				

I, agree the condition mentioned below:

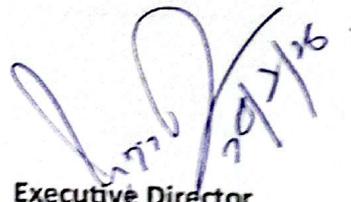
Signature of Contractor with Stamp

Receipt No. _____ Rs. 300/-

Date of Bank Deposited: _____

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Sr. #	Description or Specification	Area	Rate	Amount
01.	Full Length Photo Beam Sensor	01 No.		
02.	Acrylic Milky Sheets for Cabin Lights	01 Set		
Total Amount				

I, agree the condition mentioned below:

Receipt No. _____ Rs. 300/-

Signature of Contractor with Stamp

Date of Bank Deposited: _____

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