



# 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 Purple Top 2 ML for lab on Quotation Basis.

M/s. \_\_\_\_\_

Quotation No. ED/KIHD/ 107-02/25

\_\_\_\_\_

Date of Published: 27-1-02/25

NTN/SRB No. \_\_\_\_\_

Date of Opening: 08/03/25

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	Quantity	Rate	Amount
01.	Purple Top 2ML.	15000 Pcs		
<b>Total Amount</b>				

I, agree the condition mentioned below:

Receipt No. \_\_\_\_\_ Rs. 300/-

Date of Bank Deposited: \_\_\_\_\_

\_\_\_\_\_  
Signature of Contractor with Stamp

**Note:**

01. NTN and CNIC must be attached otherwise the quotation will be considered cancelled.
02. The total amount of the procurement will be accepted offering the lowest price.
03. Over-writing, cutting, erasing in the document should be avoided.
04. Conditional bids will not be considered.
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Executive Director  
Karachi Institute of Heart Diseases

**Copy to:**

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



# 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 Plumbing Material for old Building General Washroom on Quotation Basis.

M/s. \_\_\_\_\_

Quotation No. ED/KIHD/ 0123/25

Date of Published: 25 / 02 /25

NTN/SRB No. \_\_\_\_\_

Date of Opening: 01 / 03 /25

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Sr. #	Description Specification	or	Qua nti ty	Rate	Amount	Sr. #	Description Specification	or	Quant ity	Rate	Amount
01.	Commod		02 Pcs			21.	Tee 4"		03 Pcs		
02.	W.C		04 Pcs			22.	Elbow 45 deegree		04 Pcs		
03.	Tee Cock		06 PCS			23.	Solution 250 gm		03 Pcs		
04.	B Cock		06 Pcs			24.	Daga		06 Pcs		
05.	Double b- Cock		03 Pcs			25.	Tyfon		05 Pcs		
06.	Muslim Shower Tube set		03 Pcs			26.	Main Hole cover 18"x18"		01 Pcs		
07.	Brass Elbow 3/4 & 1/2		06 Pcs			27.	Valve		03 Pcs		
08.	Rubber Connection		10 Pcs			28.	Bush 1x3/4		03 Pcs		
09.	Brass Tee 3/4 & 1/2		06 Pcs			29.	Flash Band		04 Pcs		
10.	Brass Socket 3/4 & 1/2		06 Pcs			30.	Jali 6"x6"		04 Pcs		
11.	Valve Socket 3/4 & 1/2		06 Pcs			31.	Cement (Black)		06 bags		
12.	Valve Socket 2/4 & 1/2		06 Pcs			32.	Cement (White)		02 bags		
13.	Elbow 3/4 PVC		18 Pcs			33.	Bajri (Moti)		02 Suzuki		
14.	Tee 3/4 PVC		24 Pcs			34.	Binding Wire		01 01 kg		
15.	Socket 3/4 PVC		12 Pcs			35.	SBR Chemical 01 Kg		03 Pcs		
16.	Gas pipe Clip G.I		48 Pcs			36.	Aluminum Sheet 2 1/2		40 Fit		
17.	Pipe 3/4		06 Nali			37.	Solution 01 kg		02 Pcs		
18.	Pipe 4"		04 Nali			38.	Wood door handle		04 Pcs		
19.	P Trip 4"		08 Pcs			39.	Kundi Wood door		08 Pcs		
20.											

Total

Amount in words: -

I, agree the condition mentioned below:

Signature of Contractor with Stamp

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Receipt No. \_\_\_\_\_ Rs. 300/-

Date of Bank Deposited: \_\_\_\_\_

Executive Director  
Karachi Institute of Heart Diseases

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# KARACHI INSTITUTE OF HEART DISEASES

## KARACHI METROPOLITAN CORPORATION

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



Subject:  
Basis:

R.F.Q. of Electrical Material for Phase-1 Wards & Corridor on Quotation

M/s. \_\_\_\_\_

Quotation No. ED/KIHD/ **0124** /24

Date of Published: **25 / 02** /24

NTN/SRB No. \_\_\_\_\_

Date of Opening: **01 / 03** /24

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

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Sr. #	Description or Specification	Quantity	Rate	Amount
01.	Cutting Disk 5"	02 Packet		
02.	Granding Disk 4 "	02 Pcs		
03.	Welding Road 12 Nos	02 Packet		
04.	Goti Set	01 Pcs		
05.	Ring Pana Set	01 Pcs		
06.	Plair	01 Pcs		
07.	Katia	01 Pcs		
08.	Wise 6"	01 Pcs		
09.	Stretcher Wheel 5"	05 Set		
10.	Havey Loding Wheel 5"	02 Set		
<b>Total Amount</b>				

I, agree the condition mentioned below:

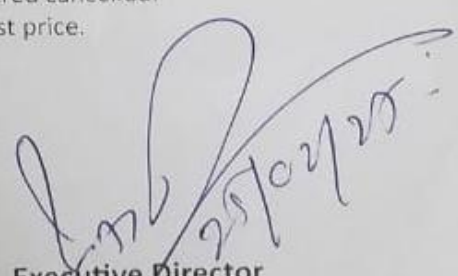
\_\_\_\_\_  
Signature of Contractor with Stamp

Receipt No. \_\_\_\_\_ Rs. 300/-

Date of Bank Deposited: \_\_\_\_\_

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Karachi Institute of Heart Diseases

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# 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 Bracket Fan, Tube light on Quotation Basis.

M/s. \_\_\_\_\_

Quotation No. ED/KIHD/ 0125 /25

Date of Published: 25 / 02 /25

NTN/SRB No. \_\_\_\_\_

Date of Opening: 01 / 03 /25

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.

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Sr. #	Description or Specification	Quantity	Rate	Amount
01.	Bracket Fan 18" (SK)	10 Nos		
02.	LED Tube light 40w	10 Nos		
03.	Wire 02 core 23/76	40 meter		
04.	Connector 30A	12 Pairs		
05.	Female plug	10 Nos		
<b>Total Amount</b>				

I, agree the condition mentioned below:

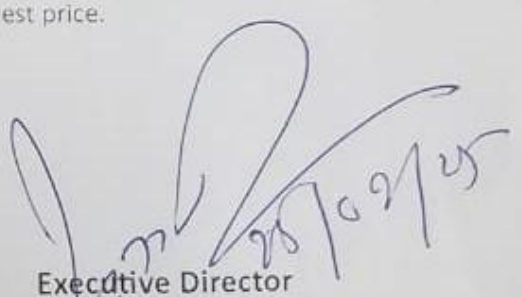
Receipt No. \_\_\_\_\_ Rs. 300/-

Date of Bank Deposited: \_\_\_\_\_

\_\_\_\_\_  
Signature of Contractor with Stamp

### Note:

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Executive Director

Karachi Institute of Heart Diseases

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# 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 STATIONERY ITEMS for Lab on Quotation Basis.

M/s. \_\_\_\_\_

Quotation No. ED/KIHD/ 132 / 25

Date of Published: 27 / 02 / 25

NTN/SRB No. \_\_\_\_\_

Date of Opening: 08 / 03 / 25

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

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Sr. #	Description or Specification	Quantity	Rate	Amount
01.	Permeant Marker (Bule/Black)	15PCs/15 Pcs		
02.	Ball Pen (Bule/Black)	06Pcs/06Pcs		
03.	Whito correction bottle set	12 bottles		
<b>Total Amount</b>				

I, agree the condition mentioned below:

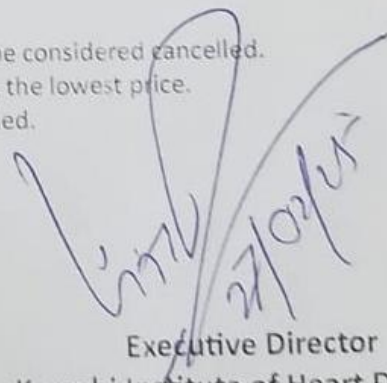
Receipt No. \_\_\_\_\_ Rs. 300/-

Date of Bank Deposited: \_\_\_\_\_

\_\_\_\_\_  
Signature of Contractor with Stamp

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KARACHI METROPOLITAN CORPORATION

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



**Subject:** R.F.Q. of Sky Bule Sodium 1.8 ML Vaccume Tube for Lab on Quotation Basis.

M/s. \_\_\_\_\_

Quotation No. ED/KIHD/ 129 /25

Date of Published: 07 / 02 /25

NTN/SRB No. \_\_\_\_\_

Date of Opening: 08 / 03 /25

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

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Sr. #	Description or Specification	Quantity	Rate	Amount
01.	Sky Bule sodium 1.8 ML Vaccume Tube Citrate	05 Pkts		
<b>Total Amount</b>				

I, agree the condition mentioned below:

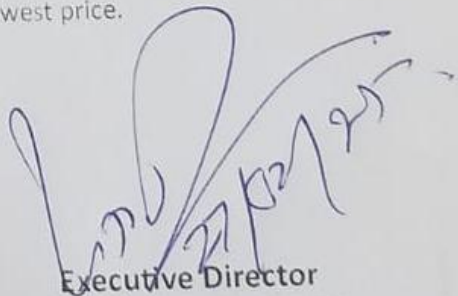
\_\_\_\_\_  
Signature of Contractor with Stamp

Receipt No. \_\_\_\_\_ Rs. 300/-

Date of Bank Deposited: \_\_\_\_\_

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Executive Director  
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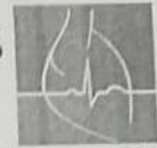
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# KARACHI INSTITUTE OF HEART DISEASES

## KARACHI METROPOLITAN CORPORATION



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

**Subject:** R.F.Q. of Treatment Chart on Quotation Basis.

M/s. \_\_\_\_\_

Quotation No. ED/KIHD/ 131 /25

\_\_\_\_\_

Date of Published: 27 / 02 /25

NTN/SRB No. \_\_\_\_\_

Date of Opening: 01 / 02 /25

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Sr. #	Description or Specification	Quantity	Rate	Amount
01.	Treatment Chart (As Per Sample)	300 Pads		
<b>Total Amount</b>				

I, agree the condition mentioned below:

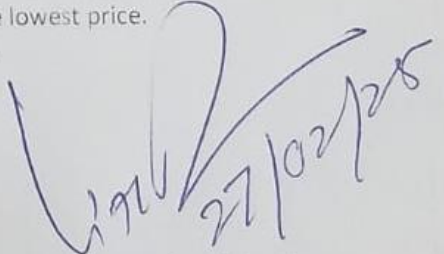
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KARACHI METROPOLITAN CORPORATION

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



**Subject:** R.F.Q. of Vital Sing Sheet on Quotation Basis.

M/s. \_\_\_\_\_

Quotation No. ED/KIHD/ 130 /25

NTN/SRB No. \_\_\_\_\_

Date of Published: 07.10.25

Date of Opening: 01/02/25

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Sr. #	Description or Specification	Quantity	Rate	Amount
01.	Vital Sing Sheet (As Per Sample)	300 Pads		
<b>Total Amount</b>				

I, agree the condition mentioned below:

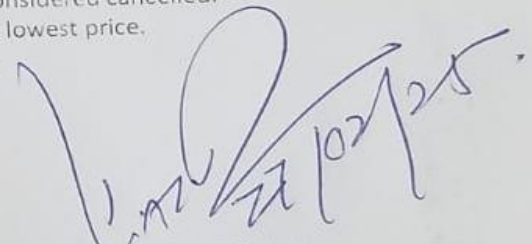
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Signature of Contractor with Stamp

Receipt No. \_\_\_\_\_ Rs. 300/-

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