



ଅତିରିକ୍ତ ଜିଲ୍ଲା ସହରାଞ୍ଚଳ ଜନସ୍ୱାସ୍ଥ୍ୟ ଅଧିକାରୀଙ୍କ କାର୍ଯ୍ୟାଳୟ, ରାଉରକେଲା
OFFICE OF THE ADDITIONAL DISTRICT URBAN PUBLIC HEALTH OFFICER, ROURKELA
ନଗରକାର୍ଯ୍ୟକ୍ରମପରିଚାଳନାୟକ, ଜାତିୟସହରାଞ୍ଚଳସ୍ୱାସ୍ଥ୍ୟ ବିଭାଗ, ରାଉରକେଲା
(Department of Health & Family Welfare, Govt. Of Odisha)



Letter No: 3925 / CPMU-NUHM-RKL/2024-2025

Date: 17/09/2024

Tender Call Notice (CORRIGENDUM)
(ଠିକା ପତ୍ରାବ)

Sealed Tenders are invited from the interested registered firms / agencies / organization for **SUPPLY OF GAZELLE HB VARIANT TEST MULTIPACK** to CPMU , CHS NUHM, **under XV-FC under CHS NUHM Rourkela for a period of one year** Rourkela as per the term & conditions as per Annexure "A"

**TERMS & CONDITIONS & SPECIFICATION FOR
SUPPLY OF GAZELLE HB VARIANT TEST MULTIPACK**

**Name of the District / Health Institution: CHS NUHM Rourkela
(HEALTH & F.W. DEPTT., GOVT. OF ODISHA)**

1. Date of Publishing of Bid : 11.09.2024
2. LAST DATE & TIME OF Submission of BID : 30.09.2024 till 5.00 PM
3. LAST DATE & TIME OF RECEIPT OF BID : 30.09.2024 till 5.00 PM
4. DATE & TIME OF opening of (Technical Bid) : 01.10.2024 ,11.00 AM
5. ADDRESS FOR COMMUNICATION / RECEIPT OF BID DOCUMENTS: **Office of the ADUPHO ,
City Programme Management Unit ,NUHM Rourkela
SUB Divisional Hospital Panposh
Rorukela-769004
Dist.: Sundargarh,Odisha**
6. PURCHASER& INDENTER: ADUPHO ROURKELA
7. CONSIGNEE: ADUPHO ROURKELA
8. DELIVERY: Door Delivery & within 30 days from issue of the work order

Memo No.....3.9.2.6...


Additional District Urban
Public health Officer, Rourkela.
Date: 17.9.2024

Copy to the Office Notice Board, Rourkela Municipal Corporation, Rourkela/ Sub-Divisional Hospital, Panposh, Rourkela/ Additional District Magistrate, Rourkela for general publication.


Additional District Urban
Public health Officer, Rourkela.



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(Department of Health & Family Welfare, Govt. Of Odisha)



Letter No: _____ / CPMU-NUHM-RKL/2024-2025

Date: ___/___/___

Memo No....3.9.2.7....

Date: 17.1.09.2024

Copy Submitted to the Municipal Commissioner, RMC, Rourkela for favor of information.

[Signature]
**Additional District Urban
 Public health Officer, Rourkela.**

Memo No....3.9.2.8

Date: 17.1.09.2024

Copy Submitted to the CDM&PHO Sundargarh for favor of information.

[Signature]
**Additional District Urban
 Public health Officer, Rourkela.**

Memo No...3.9.2.9

Date: 17.1.09.2024

Copy submitted to the Mission Director, NHM, Odisha for favor of information.

[Signature]
**Additional District Urban
 Public health Officer, Rourkela.**



Letter No: _____ / CPMU-NUHM-RKL/2024-2025

Date: ___/___/___

Annexure: A

TERMS & CONDITIONS OF THE BID

1. Eligibility Criteria and documents required with Technical Bid

- (i) OEM should have valid manufacturing license of the manufacturer / Import License of the Importer.
- (ii) Bidders should submit the valid drug license/Challan Copy of renewal of Drug license photocopy (self-attested) from the Drug Controller.
- (iii) CDSCO Licenses, EU CE must be submitted along with technical documents
- (iv) The OEM/Bidder of the product should be ISO 9001: 2015 Certified.
- (v) OEM/Bidder should have Valid ISO certificate (as applicable with reference to the technical specification of item.)
- (vi) OEM/ bidder should be under MSE Udyam registered category.
- (vii) Bidder should submit authorization from OEM as per annexure.
- (viii) Bidder should have minimum 3 years past experience of supply of the quoted instruments (any) (s) to any Govt. organization / Corporate Hospitals / PSU Hospitals / UN Agencies.(have to submit work orders only)
- (ix) Proof of annual average turnover (Bidder) of Rs.1 Crore or more in the last three (3) financial years (2020-21,2021-22,2022-23)
- (x) The OEM/Bidder has not been blacklisted either by the Tender inviting authority or by any state Govt. or Central Govt. organization for the quoted item. Declaration should be submitted as per annexure-I in Non-Judicial Stamp Paper with appropriate value (i.e Rs.20/-).
- (xi) Copy of GST Registration certificate and last 3 months GST payment challan.
- (xii) Copy of PAN

2. Tender Cost & EMD: The bidders will download the tender from the District Web Site: www.sundargarh.odisha.gov.in . by Tender cost of Rs.3000/- (Rupees Three Thousand Only) and Bidder have to provide an amount of Rs.20,000/- (Rupees: Twenty thousand Only) as Earnest Money Deposit in the shape of demand Draft only in favour of "XV-FC A/C CHS Rourkela "from any Nationalized Bank payable at Rourkela, along with bid.

3. Liquidity Damages: If the successful bidder/ bidders fail to supply within the stipulated period i.e.,30 (thirty) days from date of receipt of order from ADUPHO, Rourkela, liquidated damage @0.5 % of the tender value per week of delay shall



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be deducted from the final payment. The maximum delay time acceptable is 10 weeks. Hence, the maximum liquidated damage shall be up to 5% of purchase order. If the bidder fails to supply within the maximum delay time his order stands cancelled automatically.

4. Performance Security: The bidder has to submit Performance Security @5 % of the order value in shape of DD/Bank Guarantee in favour of "XV-FC A/C CHS Rourkela" after selected as L1 the EMD submitted will be refunded to the L1 bidder after submission of Performance Security. The Performance Security will be refunded after one year from the date of "order without any interest.

5. Other Terms & Conditions

- I. OEM Authorization Format in Annexure –I (In case the bidder is not the manufacturer)
- II. The declaration form in Annexure - II duly signed by the bidder before Notary Public / Executive Magistrate.
- III. Certificate duly filled by the Auditor / Chartered Accountant (as per Annexure – III) that the annual average turnover of the manufacturing firm is Rs. 1 Crore or more in the last 3 (three) financial years. Attach copy of Audit report (Profit & Loss Account with balance sheet) with the turn over certificate
- IV. Authority reserve the right to cancel the bid In this regard the decision of the purchase committee will be final.
- V. The EMD will be forfeited if the bidder withdraws the tender or doesn't supply the items (in case of successful bidder) within the stipulated time period.
- VI. The rate quoted by the bidder should be inclusive of all (GST/ET/Freight/insurance etc.) and sample testing if any.



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- VII. Conditional tenders are liable to be rejected. All Disputes are subjected to District Court, Rourkela, Odisha
- VIII. The Authority will not make any advance payment to the organization. The organization will have to carry out the entire job on its own and the amount will be paid only after satisfactory completion of the job and submission of bill in that regards.
- IX. Under no circumstances shall the organization appoint any subcontractor or sublease the contract. If it is found that the organization has violated these conditions the contract will be terminated forthwith without any notice and security deposited by the organization shall be forfeited.
- X. Rates quoted against this tender notice shall remain valid up to 12 months after the award of contract. No request for an increase in rates, if any, will be allowed or entertained during this period.
- XI. Receiving & Opening of Tender may be changed if required by the under Signed, it will be intimated.

6. Tender Form

- I. The bidder(s) are to submit their tenders in separate sealed covered envelopes for Technical Bid and Financial Bid by superscripting Cover 'A' (Technical Bid) and Cover 'B' (Financial Bid) & both the sealed covers should be put into a third outer cover which should be superscripted as "Tender for Supply of Gazelle HB Variant test multi pack for the year 2024-25" and Tender Reference No.
- II. Format of technical bid shall be submitted on the letter head of the Bidder (annexure-I)
- III. Format for List of Item(s) Quoted for Price Bid (Cover — B) (Annexure-II)



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(Department of Health & Family Welfare, Govt. Of Odisha)



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Date: ___/___/___

**TENDER FORM
PART-I**

(TECHNICAL BID)

(To be submitted on letter pad of the Firm/Agency/organization)

Note: The documents has to be arranged serially as per the order mentioned in the Check List Please put ₹ in the respective box

Particulars	Details	Documents submitted (yes/No)
Name of the firm / agency (Proof of Registration to be Submitted)		
Address of the Firm / Agency		
Name of the Authorized Contact person		
Email of the Authorized Contact person		
Contact Number		
PAN Card No of the organization (Firm/Agency/Proprietor). Copy to be attached		
OEM/ bidders MSE Udyam registered category.		
Manufacturing license of the manufacturer / Import License of the Importer/OEM Authorization as per Annexure-IV		
valid drug license/Challan Copy of renewal of Drug license photocopy (self-attested) from the Drug Controller		
The OEM/Bidder of the product should be ISO 9001: 2015 Certified.		
Copy of GST Registration certificate		
Copy of GST Return and Last three months GST payment Receipt		
Copy of Certificate from CA for Annual Average Turnover : Average Annual Turnover of Rs. 1 crore or more in the last three (3) financial years (2020-21,2021-22,2022-23		
Copy of last three year IT return certificate along with audited financial statement .(2020-21,2021-22,2022-23)		



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 ନଗରକାର୍ଯ୍ୟକ୍ରମପରିଚାଳନା ଉନ୍ନତି, ଜାତିୟ ସହରାଞ୍ଚଳ ସ୍ୱାସ୍ଥ୍ୟ ମିଶନ, ରାଉରକେଲା
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Works experience in Govt./PSU/Pvt./In similar assignment (copy of work order should be attached)		
Tender Cost of Rs. 3,000/- (Rupees: Three thousand)only and EMD of Rs. 20,000/- (Rupees : Ten thousand) only in the form of Demand Draft in favor of the "XV FC A/C CHS Rourkela "payable at Rourkela		
Affidavit (Notary/Executive Magistrate) of non-black listed Firms for execution of Govt. similar works. As per Annexure:III		

Date:
signature)

(Signature and seal of the authorized

Place:

Name:

Designation:



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Annexure:II

TENDER FORM

PART-II
(FINANCIAL BID)

To be submitted on letter pad of the Firm/Agency/organization

Sl No.	Name of the Items	Model of the Machine (specification)	No. of Kit	No of Pack/Box	Price per kit	Total price including all taxes
1	GAZELLE HB VARIANT TEST MULTIPACK	Model No.S10	10447			



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Date: ____ / ____ / ____

ANNEXURE – III

(To be submitted *with Technical Bid*)

DECLARATION FORM

I / Wehaving My / our
office at.....do
 declare that I / We have carefully read all the terms & conditions of tender of the
 _____, Odisha for the supply of **GAZELLE HB VARIANT TEST MULTIPACK**. I will
 abide with all the terms & conditions set forth in the Tender Reference no.

I/We do hereby declare I/We have not been de-recognised / black listed by any State
 Govt. / Union Territory / Govt. of India / Govt. Organization / Govt. Health Institutions for
 supply of Not of Standard Quality (NSQ) items / non-supply.

I/We agree that the Tender Inviting Authority can forfeit the Earnest Money Deposit and
 or Security Deposit and blacklist me/us for a period of 5 years if, any information furnished by
 us proved to be false at the time of inspection / verification and not complying with the Tender
 terms & conditions.

I / We do hereby declare that I / we
 will supply the quoted items as per the terms, conditions & specifications of the tender
 document.

Signature of the bidder :

Seal

Date :

Name & Address of the Firm:

Affidavit before Executive Magistrate / Notary Public



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Date: ___ / ___ / ___

ANNEXURE – IV
 (To be submitted in *Cover A -Technical Bid*)
MANUFACTURER’S AUTHORISATION FORMAT

To
 The ADUPHO-Rourkela
 Deptt. of Health & Family Welfare
 Govt. of Orissa.

Ref: Tender No. _____ Dated _____

Dear Sir,

We ----- are the manufacturers of -----
 ----- (name of equipment/Instrument (s) having factories at -----
 -----.

1. Messrs ----- (name and address of the agent) is our authorized agent for sale and service of ----- (name of equipment(s))
2. We confirm that Messrs. ----- (name of the above agent) is authorized to submit a tender, and enter into a contract with for the above goods manufactured by us.
3. We also extend our full guarantee / warranty and also full back-up support for AMC/CMC as required by the purchaser.

Yours faithfully,

(Signature with date, name and designation)

(Name & address of the manufacturers)

Seal

Note:

This letter should be on the **letterhead** of the **OEM and** should be signed by a person having the power of attorney to legally bind the manufacturer.



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ANNEXURE – V

(To be submitted in **Cover A -Technical Bid**)

(To be furnished in the letter head of the Auditor)

ANNUAL TURN OVER STATEMENT

The Annual Turnover of M/s _____
 _____ (Manufacturer/Distributor) for the last 3 years are given
 below and certified that the statement is true and correct.

Sl.No.	Year	Turnover in Crores (Rs.)
1.	2020-21	_____
2.	2021-22	_____
3.	2022-23	_____

Average Annual Turnover (for the above three years) (in Rs.) _____

Date:
Place:

Signature of Auditor/
Chartered Accountant
(Name in Capital)

Seal

Membership No.-

Registration No. of Firm

Note:

a) To be issued in the letter head of the Auditor.

Separate certificates should be furnished for different manufacturer in case the bidder is quoting products of different manufacturer