



ଅତିରିକ୍ତ ଜିଲ୍ଲା ସହରାଞ୍ଚଳ ଜନସ୍ୱାସ୍ଥ୍ୟ ଅଧିକାରୀଙ୍କ କାର୍ଯ୍ୟାଳୟ, ରାଉରକେଲା

OFFICE OF THE ADDITIONAL DISTRICT URBAN PUBLIC HEALTH OFFICER, ROURKELA

ନଗରକାର୍ଯ୍ୟକ୍ରମ ପରିଚାଳନା ଯୁଗିତ, ଜାତିୟ ସହରାଞ୍ଚଳ ସ୍ୱାସ୍ଥ୍ୟ ମିଶନ, ରାଉରକେଲା

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



Letter no 622/CPMU/NUHM/RKL/2025-26

Date: 16.03.2026

TENDER CALL NOTICE

ଟେଣ୍ଡର ଆହ୍ୱାନ ବିଜ୍ଞପ୍ତି

Sealed Tenders are invited from the Reputed Manufacturers/importers / Authorized Distributors & firm having valid license. Firms for supply of the GB 325, 3 part Hematology Analyzer Reagents & Consumables for Rourkela during the year 2025-26. As per the terms & conditions mentioned below:

1. Date of Publishing of Bid : 17.03.2026
2. LAST DATE & TIME OF Submission of BID : 27.03.2026 till 5.00 PM
3. LAST DATE & TIME OF RECEIPT OF BID : 27.03.2026 till 5.00 PM
4. DATE & TIME OF opening of (Technical Bid) : 28.03.2026 ,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 15 days from issue of the work order

Items & Specification as mentioned below:

Product- I	
Type of reagent	GB325 ,3 part Hematology Analyzer Reagents- Genuine Bio system Private limited Hematology Analyzer Reagent ,Diluent
Size	20 ltr
Brand & Model	GB325(TRICEL 60+)
CBC machine	GB325 Hematology Analyzer
OEM	Genuine Bio system Private limited
Reagent System	Closed Reagent System

Address: Office of the Add. District Urban Public Health Officer (CPMU-NUHM), Rourkela Municipal Corporation, Uditnagar, Rourkela-12, Dist-Sundargarh, Pin-769012 ☎ : 0661-2501100 E-✉ : cpmunhm.rkl@gmail.com



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Product-II	
Type of reagent	GB325 ,3 part Hematology Reagents- Genuine Bio system Private limited Hematology Analyzer Reagent ,LYSE
Size	500 ml
Brand & Model	GB325(TRICEL 60+)
CBC machine	GB325 Hematology Analyzer
OEM	Genuine Bio system Private limited
Reagent System	Closed Reagent System
Product-III	
Type of reagent	GB325 ,3 part Hematology Reagents- Genuine Bio system Private limited Hematology Analyzer Reagent ,EZ Cleaner
Size	50 ml
Brand & Model	GB325(TRICEL 60+)
CBC machine	GB325 Hematology Analyzer
OEM	Genuine Bio system Private limited
Reagent System	Closed Reagent System

TERMS & CONDITIONS OF THE BID

1. Eligibility Criteria and documents required with Technical Bid

- (i) Bidder should submit Bid Specific authorization with Name, Designation, E-Mail and Contact Details of the OEM. It may be Cross-Verified (if required).
- (ii) OEM should have valid manufacturing license of the product / Import License of the product.
- (iii) OEM should submit the valid drug license/Challan Copy of renewal of Drug license photocopy (self-attested) from the Drug Controller.
- (iv) The Bidder should Provide PAN Card, GST Certificate and Latest GST Return.
- (v) The OEM/Bidder of the product should be ISO 9001: 2015 Certified.
- (vi) The Bidder must submit Trade License & UDYAM Registration.
- (vii) OEM/Bidder should have minimum 3 years past experience of supply of the quoted items (any) (s) to any Govt. organization / Corporate Hospitals / PSU Hospitals / UN Agencies.(have to submit work orders only)
- (viii) All the Work Experience along with Certificate has to be self-certified by bidder/OEM.
- (ix) Proof of annual average turnover (Bidder) of Rs.100 Lakhs or more in the last three (3) financial years (2022-23, 2023-24, 2024-25) certificate from the CA/CMA.
- (x) Last Three Financial years Audited Financial statements and ITR (2022-23,2023-24,2024-25).



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- (xi) The 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/-).
- (xii) Data Sheet and All Certifications has to be attached as mentioned in the Specification (if any).
- (xiii) The Product Compliance sheet must be on OEM Letterhead.
- (xiv) The Bidder must complete the supply, installation, and commissioning within 15 days of getting the Work Order
- (xv) All costs, including transportation, labor, and other levies, must be included in the bid price the price will be valid for 12 months.
- (xvi) If any equipment gets damaged or lost during transit or installation, the supplier must replace it within 15 days at no additional cost.
- (xvii) Product having minimum 2 years of shelf life.

2. Tender Cost & EMD: The bidders will download the tender from the District Web Site:.....by Tender cost of **Rs.3,000/- (Rupees: Three Thousand Only)** and Bidder have to provide an amount of **Rs. 40,000/- (Rupees: Forty 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.,15 (thirty) days from date of receipt of order from ADUPHO, Rourkela, liquidated damage @0.5 % of the tender value per week of delay shall 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 EMD will be kept as ssecurity after selected as L1 the EMD submitted will be kept. The Performance Security will be refunded after 12 months.

5. Other Terms & Conditions

- I. OEM Authorization Format in **Annexure –I** (In case the bidder is not the manufacturer)



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- 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. 100 lakhs 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 and valid for 12 months.
- 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.



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6. Tender Form

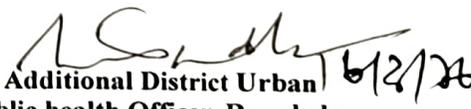
- I. The bidder(s) are to submit their tenders in separate sealed covered envelopes for Technical Bid and Financial Bid by superscripting Cover 'A' (Technical Bid) and Cover 'B' (Financial Bid) & both the sealed covers should be put into a third outer cover which should be superscripted as "Tender for Supply of GB 325 Hematology Analyzer Reagent" for the year 2025-26" 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)


Additional district Urban
Public Health officer, Rourkela

Memo No.....

Date:.....

Copy to the Office Notice Board, Rourkela Municipal Corporation, Rourkela/ Additional District Magistrate, Rourkela for general publication.


Additional District Urban
Public health Officer, Rourkela.



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**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		
Bidders Trade License & MSE Udyam registered details.		
Manufacturing license of the manufacturer / Import License of the Importer/OEM Authorization as per Annexure-IV		
OEM 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 Latest GST Return		
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 (2022-23,2023- 24,2024-25)		
Copy of last three year IT return certificate along with audited financial statement .(2022-23,2023-24,2024-25)		
OEM/Bidder Work experience in Govt./PSU/Pvt./In similar assignment (copy of work order should be attached		



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Tender Cost of Rs. 3,000/- (Rupees: Three thousand) only and
EMD of Rs. 40,000/- (Rupees : Forty 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)

Place:

(Signature and seal of the authorized

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	OEM	Model of the Machine (specification)	No of Pack/Box	Price per unit	Total price including all taxes
1	Diluent	Genuine Bio system Private limited	GB325(TRICEL 60+)	20 ltr		
2	LYSE			500 ML		
3	EZ Cleaner			50 MI		

Date:
signature)

(Signature and seal of the authorized

Place:

Name:
Designation:



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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 GB 325, 3 part Hematology Analyzer Reagents &
Consumables. 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:



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Affidavit before Executive Magistrate / Notary Public

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:



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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.

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.	2022-23	
2.	2023-24	
3.	2024-25	

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.