

**TENDER DOCUMENT FOR SUPPLY OF  
MEDICINES & CONSUMABLES FOR THE YEAR  
2018-2019**

CHIEF DISTRICT MEDICAL & PUBLIC HEALTH OFFICER, JAJPUR  
(HEALTH & F.W. DEPTT., GOVT. OF ORISSA)

**Bid Reference No. – CDM & PHO/Jajpur ( 5186/18.07.2018 ) 2018-2019**

DATE OF COMMENCEMENT OF THE BID DOCUMENT: 18.07.2018

LAST DATE & TIME OF RECEIPT OF BID DOCUMENTS : 31.07.2018 at 04.00 PM

:  
DATE & TIME OF OPENING OF COVER-A (Technical Bid) : 01.08.2018 at 03.00PM

DATE OF OPENING OF COVER-B (Price Bid) : **Will be notified later on.**

PLACE OF OPENING OF BID DOCUMENTS

AND  
ADDRESS FOR COMMUNICATION

Office Chamber, CDM&PHO, Jajpur  
: O/o Chief District Medical &  
Public Health Officer, Jajpur  
Pin Code - 755001

AND  
RECEIPT OF BID DOCUMENTS

Tel: 06728-222597  
Email: [cdsjajpur@gmail.com](mailto:cdsjajpur@gmail.com)

**OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH  
OFFICER, JAJPUR**

*Bacey V*

## **NOTICE INVITING BID DOCUMENT**

Sealed tenders are invited from different bidders having valid GST registration, TIN certificates & Drug License for supply of Medicines & Consumables as per the specification given by Chief District Medical & Public Health Officer, Jajpur.

The Bidders download the Tender Documents directly from the WEBSITE available at [www.jajpur.nic.in](http://www.jajpur.nic.in) . The Tender cost fee of Rs.1000/-(One thousand )only the EMD cost for the tender will be Rs 20000/-(Twenty thousand)only by Demand Draft drawn in favors C.D.M.& P.H.O., Jajpur should be enclosed along-with the Technical Bid. The EMD is not required for the bidders who had applied/participated in the previous tender No. 548/19.05.18. The Bidders should specifically super scribe, **“DOWNLOADED FROM THE WEBSITE”** on the top left corner of the outer envelope containing Technical Bid and Price Bid separately. The Tender cost fee and the EMD amount should be submitted separately in shape of demand drafts in the technical bid. In case of any bid amendment and clarification, responsibility lies with the bidders to collect the same from the website, the C.D.M.&P.H.O, Jajpur shall have no responsibility for any delay / omission on part of the bidder.

Price of bid document : Rs1000.00 (Non-refundable)

**The tender paper will be rejected if the bidder changes any clause or Annexure of the bid document downloaded from the website.**

## SECTION -I

### **TERMS AND CONDITIONS FOR SUPPLY OF MEDICINES & CONSUMABLES FOR THE YEAR 2018-2019**

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- 1.1 Sealed tenders will be received by **date** 31-07-2018 upto 04.00 PM by the C.D.M.&P.H.O., Jajpur in the office of the Chief District Medical &Public Health Officer, Jajpur for the purchase of Medicines & Consumables. Any tender received after the due date & time will be rejected / returned to the sender unopened. **The tenders will be received through Regd. Post / Courier services / Speed Post only.**

**The bidder(s) are to submit their tenders in separate sealed covered envelops for technical bid and commercial bid by super scribing Cover “A” (Technical Bid) & Cover “B” (Price Bid) and both the sealed covers should be put into a third outer Cover, which should be super scribed as “TENDER FOR THE SUPPLY OF MEDICINES & CONSUMABLES” to the Office of the C.D.M.&P.H.O, Jajpur, Orissa” & Tender Reference No. C.D.M.&P.H.O, Jajpur (5186/18.07.2018) 2018 – 2019’**

- 1.2 The Sealed tenders “Cover A” (Technical Bid) submitted by the tenderers will be opened by the C.D.M.&P.H.O., Jajpur in the office chamber of the C.D.M.&P.H.O., Jajpur at 03.00PM on 01.08.2018. The tenderer or their duly authorized representatives are allowed to be present during the opening of the tenders if they so like.
- 1.3 The undersigned shall have the right for rejecting all or any of the tender without assigning any reason thereof.

## **ELIGIBILITY CRITERIA**

- 2.1 Manufacturing units/Authorized Distributer/Suppliers are eligible to participate in the tender provided, they have
- (i) Valid manufacturing license of the manufacturer or duly acknowledge renewal application with old license issued by the state licensing authority/central licensing approving authority.
  - (ii) Manufacture shall have valid GMP Certificate.
  - (iii) Proof of Average annual turnover of the manufacturing firm/Authorized Distributer/Supplier of Rs.01 Core or more in last three (3) financial years. i.e., 2014-15, 2015-16, 2016-17.
  - (iv) Bidder must be registered under GST Act.
  - (v) Bidder/Manufacturing/Supplier unit who has been blacklisted either by the Tender inviting authority or by any state Govt. or Central Govt. organization is not eligible to participate in the tender for that item during the period of blacklisting
  - (vi) The manufacture have ISO/BIS(if any) certified.
- 2.2 Authorized distributors/Suppliers are eligible to participate in the tender provided:
- (i) They submit manufacturer's authorization and power of attorney to transact business on behalf of the manufacturer as per the format at **Annexure - V**. The authorized distributor may raise bill, if specially authorized by the manufacturer.
  - (ii) The authorized distributor/Suppliers will submit all the documents in **support of eligibility of the manufacturer** as mentioned in clause No. 2.1 along with the tender.

**The following documents should be enclosed in Cover "A" (Technical Bid) by the tenderer. All the photocopies are to be self-attested.**

### **TECHNICAL BID :**

- 3.1 Checklist with detail of the documents enclosed in **Cover "A"** (as per **Annexure - I**) with page number. The document should be *serially arranged* as per this **Annexure - I** and should be securely tied and bound.
- 3.2 List of Item (s) Quoted with name of the Manufacture.(**Annexure – II**)
- 3.3 Tender document fee of Rs.1000/- in shape of Demand Draft.
- 3.4 Earnest Money Deposit of Rs 20,000/- in shape of Demand Draft.
- 3.5 Details name, address, telephone no., Fax, e-mail of the manufacturer / authorized distributor/Suppliers (**Annexure - III**).
- 3.6 The declaration form in **Annexure - IV** duly signed by the tenderer before Notary Public / Executive Magistrate.
- 3.7 Manufacturer's Authorization Format in **Annexure –V** (In case the bidder is not the manufacturer)

- 3.8 Certificate duly filled by the Auditor / Chartered Accountant (as per **Annexure –VI**) that the average annual turnover of the manufacturing firm is Rs1 Crore or more in the last 3 (three) financial years.
- 3.9 Performance Statement (**Annexure - VII**) during the last two years towards proof of supply to any Govt. organization / Corporate Hospitals. The copy of Purchase orders and certificate from the user should be furnished in support of the information provided in the performance statement.
- 3.10 Copy of ISO/BIS any other certificate.(if any)
- 3.11 Copy of Valid Manufacturing License of the manufacturer (As mention in clause no 2.1(i))
- 3.12 Copy of Valid GMP Certificate of manufacturer.
- 3.13 Copy of valid GST registration certificate and GSTR-3B form.
- 3.14 Copy of valid Drug License.
- 3.15 Copy of valid PAN certificate.
- 3.16 Copy of valid TIN certificate.
- 3.17 Copy of Income Tax Return for last three years.
- 3.18 The Original Tender Book with Conditions and the schedules signed by the tenderer at the bottom of each page with his official seal duly affixed.
- 3.19 For consumable items necessary related documents should be submitted in the technical bid as per the specification provided in the list (Section II).

## **COVER – B (PRICE BID)**

4. The tender format giving the quoted rate for Medicines & consumables should be sent in a separate sealed cover hereafter called **Cover “B” (Price Bid)**.

**Cover –B (Price Bid) will be opened only of the tenderers who qualify in Technical Bid (Cover – A) and product is as per tender specification.**

4.1 The price of the items should be quoted inclusive FOR destination. The GST and entry tax charges (if any) should be quoted in a separate column. The rate should be quoted for *each item* both in figures and words. **In case of difference in words and figures, words will be taken into consideration for evaluation.**

**N.B:** Valid means the certificate should be valid on or beyond the date of opening of tender (Cover-A).

4.2 The Cover “B” of successful tenderers who qualifies in their technical bid, will be opened at the office chamber of the C.D.M.&P.H.O., Jajpur by the C.D.M.&P.H.O., Jajpur in the presence of the tenderers or their authorized representatives which will be notified later.

## **EARNEST MONEY DEPOSIT**

5.1 The Earnest Money Deposit referred to at will be submitted in the shape of demand Draft only in favor of C.D.M.&P.H.O., Jajpur, from any Nationalized / Scheduled Bank payable at Jajpur Town, Jajpur. The EMD is not required for the bidders who had applied/participated in the previous tender No. 548/19.05.18.

5.2 The EMD of the unsuccessful tenderers will be returned back without interest, and EMD of successful tendered will be returned after successfully supply of purchase orders.

## **TENDER CONDITIONS:**

6.1 *The List of the Medicines & Consumables are mentioned in Section II.*

6.2 Tenders should be typewritten or computerized and every correction in the tender should invariably be attested with signature by the tenderer with date before submission, failing which the tender will be ineligible for further consideration. Rates inclusive F.O.R. destination (*door delivery basis*). GST & Entry Tax(if) *should be mentioned in separate columns*. The rates quoted should be in **Indian Rupees only**.

6.3 If there is difference between figures & words, words will be taken into consideration.

6.4 In the event of the date being declared as a holiday by Govt. of Orissa, the due date of submission of bids and opening of bids will be the following working day at the appointed place & time.

6.5 To ensure sustained supply without any interruption the tender inviting authority reserves the right to split orders for supplying the requirements among more than one tenderer if the lowest eligible bidder fails to supply in scheduled time and L<sub>2</sub> & L<sub>3</sub> firms agree to match the L<sub>1</sub> rate.

- 6.6 The rate quoted and accepted will be binding on the tenderer for a period of **one year** from the date of placement of purchase order and on no account any increase in the price will be entertained till the completion of this tender period.
- 6.7 No tenderer shall be allowed at any time on any ground whatsoever to claim revision of or modification in the rate quoted by him. Clerical error / typographical error, etc. committed by the tenderers in the tender forms shall not be considered after opening of tenders..
- 6.8 If at any time during the period of contract, the price of tendered item is reduced or brought down by any law or act of the Central or State Government or the tenderer, the tenderer shall be morally and statutorily bound to inform the C.D.M.&P.H.O., Jajpur, immediately about such reduction in the contracted price. The C.D.M.&P.H.O., Jajpur, Orissa is empowered to unilaterally effect such reduction in rate in case the tenderer fails to notify or fails to agree for such reduction of rate.
- 6.9 Bidders qualifying technical bid should produce sample of consumables before opening of Price bid.
- 6.10 Approved rate with terms, conditions & the quoted price of the tender shall remain valid for a period of 12 months from the date of issue of the purchase order or till issue of next tender for these items whichever is earlier.
- 6.11 If any information or documents furnished by the tenderer with the tender papers are found to be misleading or incorrect at any stage the tender of the relevant items in the approved list shall be cancelled and steps will be taken to blacklist the said firm.
- 6.12 Both Cover-A and Cover-B should have an **index and page number** of all the documents submitted inside that cover.
- 6.13 The Tax will be charged as per the guidelines given by the Finance Dept., Govt. of Orissa from time to time. In case of Entry Tax the supplier has to deposit the original receipt to claim it, if finished goods are brought from outside the State. The GST & entry tax components should be shown **separately** in the Price Schedule.
- 6.14 In the event of any dispute arising out of the tender, such disputes would be subject to the jurisdiction of the Civil Court Dist. **Jajpur Town, Jajpur** or High Court of Orissa

#### **ACCEPTANCE OF TENDER AND SUPPLY CONDITIONS:**

- 7.1 The C.D.M.&P.H.O., Jajpur Orissa reserves the right to reject the tenders or to accept the tenders for the supply of the item tendered without assigning any reason thereof.
- 7.2 The C.D.M.&P.H.O., Jajpur Orissa will be at liberty to terminate the contract either wholly or in part without assigning any reasons thereof. The tenderers will not be entitled to any compensation whatsoever for such termination.
- 7.3 The supply should be completed within 30 days from the date of issue of purchase order unless otherwise specified. If no supply is received even after 30 days or 45 days with liquidated damage from the date of issue of the purchase orders from the C.D.M.&P.H.O., Jajpur such orders will stand

cancelled automatically without further notice. The approved firm shall also suffer forfeiture of the EMD.

- 7.4 If the approved supplier fails to execute the supply within the stipulated time, the C.D.M.&P.H.O., Jajpur is empowered to purchase the same items from L<sub>2</sub> or L<sub>3</sub> tenderer if they match the L<sub>1</sub> rate.

**LIQUIDATED DAMAGE :**

- 8.1 The C.D.M.&P.H.O, Jajpur may allow extension for a maximum period of 2 (two) weeks (15 days), after the stipulated date of supply (i.e. 30 days) with a penalty of 0.5% which will be deducted from the purchase order value as “Liquidated Damage”, for each week (7 days) upto a maximum 2% on the value of the goods.
- 8.2 If the supplier fails to complete the supply within the extended period, i.e 45 days after being allowed by the C.D.M.&P.H.O., Jajpur , no further purchase order will be placed to the firm for the said item and the concerned firm will be blacklisted for two (2) years from the date of issue of letter for the said item.

**TERMS OF PAYMENT:**

- 9.1 No advance payments towards cost of Medicines & Consumables will be made to the tenderer.
- 9.2 No claims shall be made against the C.D.M.&P.H.O, Jajpur Dist- Jajpur, Orissa in respect of interest on earnest money deposit or any delayed payment.
- 9.3 Payments in shape of Draft or e-payment / on-line transfer to the supplier.

## SECTION -II

### List of Items

Sl. No.	Drug Dosage form Description	Specification / Strength	Unit	Mfd Firm	Rate	GST	Total price
1	Inj. Bupivacaine	5mg/ml					
2	Inj. Ephedrine HCl	30 mg/ml					
3	Tab. Methotrexate (coated) (Aluminium foil/Blister pack)	5 mg/Tab					
4	Tab. Chlorpheniramine Maleate (Aluminium foil/Blister pack)	4 mg/Tab					
5	Tab. Dexamethasone (Aluminium foil/Blister pack)	4 mg/Tab					
6	Tab. Hydrochlorothiazide	12.5mg					
7	Tab. Prednisolone (Aluminium foil/Blister pack)	10 mg/Tab Scored					
8	Tab. Prednisolone (Aluminium foil/Blister pack)	40 mg/Tab Scored					
9	Syp. Prednisolone (Palatable, with measuring cap and plastic container as per I.P)	10mg/5ml					
10	Inj. Atropine I.V	1mg/ml					
11	Inj. Atropine Sulphate	0.6 mg/ml					
12	Potassium Permanganate	100 gm crystals / pack					
13	Inj. Pralidoxime Chloride / Iodide (with diluent in plastic container if required)	500 mg/20 ml					
14	Inj. Phenobarbitone	200mg/ml					
15	Phenobarbitone Oral Solution (Palatable, with measuring cap and plastic container as per I.P)	20mg/5ml					
16	Tab. Phenobarbitone (Aluminium foil/Blister pack)	30 mg/Tab					
17	Inj. Sodium Valproate	100mg/ml					
18	Tab. Levodopa + Carbidopa (Aluminium foil/Blister pack)	Levodopa 100mg + Carbidopa 25mg / Tab					
19	Inj. Amoxicillin Trihydrate (with diluents in plastic container)	500mg / vial					
20	Tab. Nitrofurantoin (Aluminium foil/Blister pack)	100 mg/Tab					
21	Tab. Ofloxacin (Aluminium foil/Blister pack)	100 mg/Dispersible Tab					

22	Inj.Cefipime+TZ500+62.5						
23	Inj.Cefipime+TZ (250+31.25)						
24	Cefodoxime drop						
25	Cefixime drop						
26	Tab.PROCHLORPERAZINE						
27	Inj.PROCHLORPERAZINE						
28	Clotrimazole Lotion (Plastic container)	Clotrimazole 1% w/w					
29	Susp. Metronidazole (Oral Susp.) (Palatable, with measuring cap and plastic container as per I.P)	200 mg/5 ml (100mg of Metronidazole Benzoate is equivalent of 62.5 mg of Metronidazole)					
30	Susp. Tinidazole (Oral Susp.) (Palatable, with measuring cap and plastic container as per I.P)	150mg / 5 ml					
31	Tab. Chloroquin Phosphate (Coated) (Aluminium foil/Blister pack)	250 mg/Tab(coated) equivalent to 150 mg Chloroquine					
32	Tab. Primaquin Phosphate (coated) (Aluminium foil/Blister pack)	2.5mg/Tab.					
33	Inj. Quinine Di-Hydrochloride	300 mg/ml					
34	Syp. Diethylcarbamazine Citrate (with measuring cap and palatable, plastic container as per I.P)	50 mg /5 ml					
35	Tab. Diethylcarbamazine Citrate (Coated) (Aluminium Foil / Blister Pack)	100 mg / Tab					
36	Inj. Mannitol I.V	20% w/v (FFS Plastic Container)					
37	Tab. Isosorbide Dinitrate (Aluminium foil/Blister pack)	5 mg/Tab					
38	Tab. Methyl Dopa (coated) (Aluminium foil/Blister pack)	250 mg of anhydrous Methyldopa/Tab					
39	Cap. Nifedipine (Soft gelatin capsule) (Aluminium foil/Blister pack)	5 mg/Cap					
40	Tab. Digoxin (Aluminium foil/Blister pack)	0.25 mg/Tab					
41	Inj. Dopamine HCl (Intravenous Infusion)	40 mg/ml					
42	Tab. Aspirin (Coated) (Aluminium foil/Blister pack)	75 mg/Tab.					

43	Cream Fluocinolone Acetonide	Fluocinolone Acetonide 0.025% w/w (Anhydrous) in cream base					
44	Cream Silver Sulphadiazine	1% w/v	jar				
45	Lotion Fluocinolone Acetonide (Plastic Container as per IP)	Fluocinolone Acetonide 0.01mg/ml					
46	Oint Betamethasone Valeate	0.1% w/v					
47	Lysol (Cresol With Soap) (Plastic container as per I.P)	50%					
48	Povidone Iodine Oint.	5% w/v					
49	Soln. Formaldehyde (Plastic Container as per IP)	34% to 38% w/v					
50	Surgical Spirit (Plastic Container as per IP)						
51	Rectified Spirit	10ml/bot					
52	Dimol Drop						
53	Tab. Dicyclomine HCl (Aluminium foil/Blister pack)	20 mg/Tab					
54	Inj. Buscopan (Hyocine bromide)						
55	Inj. Valethamate bromide						
56	Tab. Levosulpiride (Aluminium foil/Blister pack)	25 mg / Tab					
57	Syp. Promethazine (Palatable, with measuring cap and plastic container as per I.P)	5 mg/5 ml					
58	<b>Tab. Promethazine (Aluminium foil/Blister pack)</b>	<b>25 mg/Tab</b>					
59	Inj. Human Premixed Insulin (30/70)	40 units/ml (Biphasic, 30/70)					
60	Inj. Human Premixed Insulin (50/50)	40 units/ml (Biphasic, 50/50)					
61	Inj. Human Soluble Insulin	40 I.U/ml					
62	Inj. Anti Rabies Vaccine for Human Use with diluents	≥ 2.5 IU / Intra-muscular (ID) dose per vial (TCV of PVRV & / or PCEC only) Primary Cell Culture Vaccines for both Intra-Muscular and Intra-Dermal use of 1ml with 1ml diluent. Packing: To be supplied with 1ml diluent and ten (10)					

		Nos. of 1ml Insulin Syringe (40units) with pre-fixed 26G intradermal needles per one vial along with one (1) number of 2ml reconstitution syringe with 24G needle (recent IS specification)					
63	Inj. Equine Rabies Immunoglobulin	1500 IU / 5 ml (Rabies immunoserum)					
64	Inj. Human Anti-D Immunoglobuline	300mcg/2ml					
65	Inj. Snake Venom Antiserum (Polyvalent) with diluents in plastic container	10 ml/Vial (Lyophilised Powder Form)					
66	Inj. Tetanus Toxoid (adsorbed)	0.5 ml/Amp					
67	Chloromycetin Eye Ointment (Applicap/Soft Capsule)	1% w/v					
68	Lidocaine + Ofloxacin Ear Drop	Lidocaine 1.73% w/v+ Ofloxacin 0.3% w/v					
69	Phenylepherine Eye Drop	5%w/v					
70	Paracain HCL eye drop						
71	Inj. Isoxsuprine HCl	5mg / ml					
72	Tab. Isoxsuprine SR (Aluminium foil/Blister pack)	40 mg/Tab (Sustended Release Tablet)					
73	Tab. Isoxsuprine (Aluminium foil/Blister pack)	10 mg/Tab					
74	Tab. Methylergometrine Maleate (Aluminium foil/Blister pack)	0.125 mg/Tab					
75	Tab. Mifepristone (Aluminium Foil/Blister pack)	200mg/Tab.					
76	Beclomethasone Inhaler 200 metered doses	200mcg / dose					
77	Respules Salbutamol	2.5mg/dose					
78	Respules Budesunate						
79	Salbutamol Inhaler 200 metered doses	100mcg / puff					
80	Soln. Salbutamol Sulphate	Nebulized Soln. for Nebulizers 5mg/ml					
81	Tab. Salbutamol Sulphate (Aluminium Foil)	4.82mg Salbutamol Sulphate equivalent to 4mg of salabutomol/Tab.					

82	Syp. Salbutamol Sulphate (Palatable, with measuring cap and plastic container as per I.P)	2.41mg Salbutamol Sulphate equivalent to 2mg of Salbutamol / 5ml					
83	Tab. Theophylline & Etophylline (Aluminium foil/Blister pack)	Theophylline 23 mg & Etophylline 77 mg per Tab					
84	I.V Compound Sodium Lactate (Ringer's Lactate) RL	Lactic Acid-0.24w/v equivalent to 0.32% w/v of sodium lactate sodium chloride-0.6% w/v, potassium chloride-0.04% w/v, calcium chloride-0.027% w/v (FFS Plastic Container)					
85	I.V Dextrose 10%(10D)	10% w/v (FFS Plastic Container)					
86	I.V Dextrose 5% (5D)	5% w/v (FFS Plastic Container)					
88	I.V Dextrose 25%(D25)	25% w/v					
89	I.V Dextrose and Sodium Chloride (DNS)	5% w/v Dextrose, 0.9% w/v Sodium Chloride (FFS Plastic Container)					
90	Paediatric Maintenance Fluid	Each 100ml contains Dextrose Anhydrous 5gm, Potassium Chloride 0.130 gm, Sodium Acetate 0.320gm, Diabasic Potassium Phosphate 0.026gm, Magnesium Chloride 0.031gm. (FFS / BFS Plastic Container)					
91	I.V Sodium Chloride (Normal Saline)	0.9% w/v (FFS Plastic Container)					
92	Inj. Sodium Chloride (Normal Saline)	0.9% w/v (FFS Plastic Container)					
93	Inj. Sodium Chloride (Normal Saline)	3% w/v (FFS Plastic Container)					
94	Cap. Vit A (Aluminium foil/Blister pack)	50,000 IU/Cap (Soft Gelatin Capsules)					
95	Cap. Vit A.D (Therapeutic) (Aluminium foil/Blister pack)	Vit. A 5000 IU + Vit. D3 400 IU/Cap					
96	Tab. Vitamin C (Chewable) (Aluminium foil/Blister pack)	500 mg/Tab					

97	Vit. E Drop (Palatable, with dropper and container as per I.P)	50mg/ml					
98	Inj. Multi Vitamin						
99	Handloom Cotton Gauze, Bleached Absorbent,Non- Sterilised	Min.Mass: 30±5gm /sq.mtr Confirming to IS:758/1988 Ends(Column)-75, Picks(Row)-55 / 10Sq.cm, Absorbency not more than 10seconds					
100	Black Disinfectant Fluid (Phenyl) ISI (4 Litre)	4 Litre					
101	Bleaching Powder(25kg)	Not Less than 30% w/v Available Chlorine					
102	Borax Glycerin	12% w/v of Borax					
103	Gentian Violet (Plastic Container)	Liquid with preservative					
104	Tab. Halazone for Solution	4 mg/Tab					
105	Tab. Sodium Dichloroisocyanurate	3.5 mg/Tab					
106	Sterile Water For Injection (Plastic Container as per IP)	5ml/Vial (FFS / BFS Plastic Container)					
107	Sterile Water For Injection (Plastic Container as per IP)	10ml/Vial (FFS / BFS Plastic Container)					

## List of Consumable Items

SI No	Code	Consumable name	Unit	Mfd Firm	Rate	GST	Total Price
1	S01069	Black Braided SilkSize:-3-0, length: 76cm, 1 / 2 Circle curved Bodied 30 mm needle (Sterilized) U.S.P, with CE certification	12/pkt				
2	S02092	Spinal Needle Disposable Adult as per BIS23 / 25G (70 - 90mm) with hub (Colour coated as per ISO Standard)	each				
3	S02014	Surgical NeedlesSuture Needles, Straight Cutting Needle different sizes 6 to 10	6/pkt				
4	S02015	Surgical NeedlesSuture Needles, Curved Cutting Needle different sizes 6 to 10	6/pkt				
5	S02017	Microscopic Glass Slide3" x 1" x 1.1 + 0.1 / - 0.2mm thickness (75mm X 25mm) with ISI mark	50/pkt				
6	S02027	Makintosh SheetSize 90cm wide, length 100cms, ISI Marked, I.S. No.4135-1974, Double colour, water proof. (The mackintosh should be of Grade A (i) as per IS specification 4135:1974. It should have 55% rubber and 35% polymer.)	mt				
7	S02037	Sterile Disposable Blood Lancet (Pricking Needle)	each				
8	S02128	Oxygen Flowmeter Regulator With HumidifierFlow Meter Regulator: Body: Brass, Flow meter body: Silicon Plastic, Tube: Unbreakable polycarbon, Knob Adjustment: ABS, Range: 0-10 min. & 15 max., Pressure Gauge Capacity: 0 - 250 Kg/cm2, Flow meter capacity: 0-10 ltr/min. Humidifier: Polycarbonate Bottle, Autoclavable, 0-250ml capacity. ISO & CE certified	each				
9	S02055	Disposable Head Cap	each				
10		Baby Tag	each				
11		Mother Tag	each				
12		Transpore Adhesive 2"	5mt				
13		Foot wear	each				
14		Wear on	each				
15		Photo therapy eye pad	each				
16		Plaster of Paris powder	kg				
17		x-ray Developer	Pkt				
18		x-RAY Fixture	pkt				
19		Stomach Tube	each				
20		Bio degradable Polythin(Different size)	kg				

# **SECTION –III**

## **ANNEXURES**

**CHECK LIST**  
**(To be submitted in Technical Bid)**

**Note : The documents has to be arranged serially as per the order mentioned in the check list**

Please put ✓ in the respective box

**COVER – A (TECHNICAL BID)**

**DOCUMENTS : SUBMITTED OR NOT**

1.	List of Item (s) – Annexure II	Page No. <input type="text"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2.	Tender document Fee	Page No. <input type="text"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3.	Earnest Money Deposit	Page No. <input type="text"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.	Details of Manufacturing Unit / contract person Liaisoning agent (Annexure III) No.	Page <input type="text"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5.	Declaration form (Annexure -IV) signed by the Tenderer & affidavit before Notary Public / Executive Magistrate	Page No. <input type="text"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
6.	Manufacturer's Authorization Format (Annexure – V)	Page No. <input type="text"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
7.	Proof of avg. Annual turnover of Rs.2 Crore or more for preceding 3 financial years (Annexure - VI )	Page No. <input type="text"/>	Yes <input type="checkbox"/>	No. <input type="checkbox"/>
8.	Performance Statement (Item wise) during the last two year (Annexure -VII )	Page No. <input type="text"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
9.	Copy of valid GMP Certificate	Page <input type="text"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
10.	GST Copy	Page No. <input type="text"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
11.	Copy of Manufacturing License	Page No. <input type="text"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
12.	Copy of Valid ISO/BIS Certificate	Page No. <input type="text"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

13. copy of valid TIN certificate

Page		Yes		No	
------	--	-----	--	----	--

14. Photocopy of PAN

Page		Yes		No	
No.					

15. Photo copy of Drug licence

Page		Yes		No	
No.					

16. Copy of Income tax return

Page		Yes		No	
No.					

18 Copy of original Tender , duly signed by the Tenderer

Page		Yes		No.	
No.					

**Annexure II**  
(Refer Clause No. 3.2)

(To be submitted in Cover A -Technical Bid)

**LIST OF ITEM(S) QUOTED**

<b>Sl.</b>	<b>Name of Item (s)</b>	<b>Specification</b>	<b>Name of Manufacturer</b>	<b>Remarks</b>

**Signature of the Tenderer :**

**Date :**

**Official Seal:**

**ANNEXURE – III**  
(Refer Clause No. 3.5)

(To be submitted in Cover A -Technical Bid)

**DETAILS OF THE TENDERER & LOCAL CONTACT PERSON**

	<b>Corporate Office (The address in which the purchase orders and payment details will be communicated)</b>	<b>Local Contact Person / Branch Office / Zonal Office .</b>
Name & Full Address		
Telephone Nos., landline		
Mobile		
Fax		
E – Mail		

**Signature of the Tenderer :  
with seal**

**Date :**

**Official Seal :**

(To be submitted in Cover A -Technical Bid)

**DECLARATION FORM**

I / We .....having  
My / our .....office  
at.....do declare that I / We have  
carefully read all the terms & conditions of tender of the \_\_\_\_\_, Orissa for the  
supply of medicines and consumables. The approved rate will remain valid for a period of  
one year from the date of approval. 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-recognized / 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 t  
and blacklist me/us for a period of 2 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.

Signature of the bidder :

Seal

Date :

Name & Address of the Firm:

Affidavit before Executive Magistrate / Notary Public.

(To be submitted in Cover A -Technical Bid)

**MANUFACTURER’S AUTHORISATION FORMAT**

To

The C.D.M.&P.H.O Jajpur  
Deptt. of Health & Family Welfare  
Govt. of Orissa.

Ref: Tender No. \_\_\_\_\_ Dated \_\_\_\_\_ for  
\_\_\_\_\_.

Dear Sir,

We, ----- are the manufacturers of -----  
----- (name of Medicines/ Medical consumables having factories  
at -----.

1. Messrs ----- (name and address of the agent) is our authorized agent for sale and of ----- (name of Medicines/ Medical consumables.
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 items manufactured by us.
3. We will provide test reports of supply items, if required by the purchaser.

Yours faithfully,

-----  
-----

(Signature with date, name and designation)

For and on behalf of Messrs -----  
(Name & address of the manufacturers)

Seal

Note :

1. This letter should be on the *letterhead* of the *manufacturer* and should be signed by a person having the power of attorney to legally bind the manufacturer.
2. Original letter shall be attached to the technical bid.

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

**ANNEXURE – VI**  
(Refer Clause No. 3.8)

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

**ANNUAL TURN OVER STATEMENT**

The Annual Turnover for products of  
M/s \_\_\_\_\_

**who is a manufacturing unit/Authorized distributor** for the last 03 years are given below and certified that the statement is true and correct.

Sl.No.	Year	Turnover in Crores (Rs.)
1.		
2.		
3.		

***Average Annual Turnover*** (for the above three years) in **Crores (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.*
- b) **Separate certificates** should be furnished for different manufacturer in case the bidder is quoting products of different manufacturers.



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

**Annexure VII** (Refer Clause no. 3.9)

**PROFORMA FOR PERFORMANCE STATEMENT**

(For the period of last **two years**)

Tender Reference No. :  
Name of Tenderer :  
Name of Manufacturer : \_\_\_\_\_

Sl.	Order placed by (Address of purchaser) (attach documentary proof)*	Order no. & Date	Item Name	Manufacturer	Qty	Value of Contract (Rs.)
1						
2						
..						

**Signature and seal of the Tenderer**

\* The documentary proof will be copies of the purchase order (during the last 2 years).

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**ANNEXURE-VIII**  
(Refer Clause No. 4.1)

**(PRICE SCHEDULE)**

SI No	Name of the Items	Specification/ Strength	Name of the Manufa cture	Rate	GST	Total Price

Signature of the bidder  
Name :  
Seal

Date :  
Place :

Rates should be quoted both in figures & words and if there is any discrepancy, the quoted rates in words will be taken for evaluation

*Pravin*  
*28/7/18*