



OFFICE OF THE CHIEF DISTRICT MEDICAL AND PUBLIC HEALTH OFFICER: JAJPUR  
(DISTRICT DRUG WARE HOUSE, JAJPUR)



Letter No 12 / DWH, Jajpur Date 03.01.2025

**TENDER CALL NOTICE**

Tender Call Notice for **Supply of Laboratory Chemical / Consumables & Antibiotic Discs for DHH Jajpur , 2024-25**

Date of Tender Call : 03.01.2025  
Last Date & Time of submission of Tender Call : 24.01.2025 at 04 PM  
Date & Time of opening of Tender Call : 27.01.2025 at 03 PM

Sealed Tender is invited from different manufacturers/suppliers/distributors for **Supply of Laboratory Chemical , Consumables, and antibiotic discs under NTEP & DPHL , DHH Jajpur 2024-25** as per specification given below by the Chief District Medical and Public Health Officer, Jajpur. Interested manufacturers/firms may submit their tender document by Speed Post/Regd Post/Courier only to the under signed as per the scheduled date & time mentioned above.

**Terms & conditions:**

1. The undersigned shall have the right for rejecting all or any of the Tender without assigning any reason thereof.
2. Any tender received after the due date & time will be rejected. The tenders will be received through Regd. Post / Speed Post / Courier only.
3. List of Items Quoted (Annexure - IA, IB & IC)
4. Tender document fee of Rs.1000/- in shape of Demand Draft which is not refundable.
5. An EMD of Rs 2000/- (Rupees Two Thousand) only will be paid in the shape of demand Draft only in favor of CDM&PHO, Jajpur from any Nationalized / Scheduled Bank payable at Jajpur Town, which will be refundable. The EMD of the unsuccessful bidder will be returned back without interest and EMD of successful bidder will be returned after successfully supply of purchase order.
6. Bidders submitted their local contact address as per Annexure II
7. Bidders who have 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 (Annexure III).
8. Proof of average annual turnover (Bidder) of Rs. 1 Crore or more in the last three (3) financial years certified by the Chartered Accountant as per the format attached (Annexure IV).
9. The firm should submit the income tax return for last 3 years
10. The Original Tender Copy with Conditions and the schedules signed by the bidder at the bottom of each page with his official seal duly affixed.
11. The rates should be quoted including F.O.R destination and excluding TAX.
12. The firm should submit attested copy of GST Registration certificate and photo copy of PAN along with the Tender.
13. Two stage bidding systems will be done. (Technical bid & Price bid)
14. The bidder(s) are to submit their tenders in separate sealed covered envelopes for technical bid and price 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 Call Notice for the Supply of Laboratory Chemical , Consumables, and antibiotic discs under NTEP & DPHL , DHH Jajpur , 2024-25".

15. The financial bid of only those bidders should be opened who qualify in their technical bid.
16. The rate contract once approved should remain valid for one year from the date of approval.

**Documents to be enclosed in the Technical Bid (Cover A)**

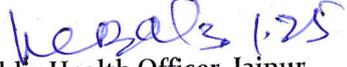
It should be enclosed in an envelope & should be sealed and super scribed as "Supply of Laboratory Chemical ,Consumables, and antibiotic discs under NTEP & DPHL , DHH Jajpur , 2024-25" along with Name & address of the Bidder.

**Documents to be attached with the Technical Bid:**

1. EMD of Rs 2000/- in favour of CDM&PHO, Jajpur
2. Cost of Tender of Rs 1000/- in favour of CDM&PHO, Jajpur
3. Original tender document duly signed by Authorized Signatory of the bidder (on each page) with rubber seal of the firms.
4. Detail local contact address of the bidder.
5. Declaration form
6. Average annual turnover of Rs 01 Cr or more as per the format Specified.
7. Photocopy of PAN & GST registration certificate.

**Documents to be enclosed in the Price Bid (Cover B)**

1. Price should be quoted in Indian currency as per the format specified (Annexure V).

  
Chief District Medical & Public Health Officer, Jajpur

Memo No. 13 / Date 03.01.2025

Copy forwarded to the District E-Governance Manager, OSWAN, Collectorate Jajpur for favour of information and requested to publish this advertisement on the Jajpur website for wide publication.

  
Chief District Medical & Public Health Officer, Jajpur

ANNEXURE – I(A)

LIST OF ITEMS –

1. Phenyl (Make - Bengal Chemical, 5 ltr Jar)
2. Rectified Spirit(450ml)
3. Basic Fuchsin (Make – Nice/ Rankem, 25gm bot)
4. Conc. Sulphuric Acid (Make – Nice/ Rankem, 500 ml bot)
5. Cotton (500 gm Net)
6. Falcon Tube Holder
7. Foot Operated Bucket(10lt)
8. Thermo cool box (Size – 8” x 6”)
9. Staining/ Wash Bottle (Size - 500 ml)
10. Glass Funnel
11. White Apron (Size - XL & XXL)
12. Sanitizer (Size - 500 ml)
13. Sodium and Potassium catrize(Q-Line &Agappe)

**ANNEXURE – I(B)**

| <b>Sl No.</b> | <b>Name of the Items</b>                          |
|---------------|---|
| 1             | Brain Heart Infusion Broth                        |
| 2             | Lacto Phenol Cotton Blue stain                    |
| 3             | 90 mm autoclavable Glass petri plates             |
| 4             | Stool collection sterile container                |
| 5             | 50 ml self-standing falcon tube                   |
| 6             | 90 mm single use sterile petri plates             |
| 7             | Glycerol  |
| 8             | Tryptophan Broth                                  |
| 9             | Rabbit serum for coagulase test                   |
| 10            | Ferric Chloride powder                            |
| 11            | Urea Powder                                       |
| 12            | Concavity slides (Concave cavity slides)          |
| 13            | Brain Heart Infusion broth bottles (pre prepared) |
| 14            | Leptospirosis IgM ELISA Kit                       |
| 15            | Japanese Encephalitis IgM ELISA kit               |
| 16            | China ethanol (99.9 % pure)                       |
| 17            | Measles IgM ELISA Kit                             |
| 18            | Calcium chloride                                  |
| 19            | Potassium tellurite                               |
| 20            | Inoculating loop                                  |
| 21            | Inoculating needle                                |
| 22            | Sodium deoxycholate                               |
| 23            | Paraffin oil                                      |
| 24            | Blood agar base                                   |
| 25            | Mannitol motility test medium                     |
| 26            | Sabouraud Dextrose agar                           |
| 27            | Lactose   |
| 28            | Maltose   |
| 29            | Wickerham Card                                    |
| 30            | Antibiotic zone diameter measurement scale        |
| 31            | Sorbitol  |
| 32            | Sorbitol Macconkey agar                           |
| 33            | Sterile solution of Haemoglobin (FD022, Himedia)  |
| 34            | Vitamino Growth Supplement (FD025, Himedia)       |

ANNEXURE – I(C)

ANTIBIOTIC DISCS

| Sl No. | Name of the Items           |
|--------|-----------------------------|
| 1      | Ampicillin                  |
| 2      | Amoxicillin Clavulanic acid |
| 3      | Amikacin                    |
| 4      | Azithromycin                |
| 5      | Aztreonam                   |
| 6      | Cefuroxime                  |
| 7      | Ceftriaxone                 |
| 8      | Cefotaxime                  |
| 9      | Ciprofloxacin               |
| 10     | Cotrimoxazole               |
| 11     | Ceftazidime                 |
| 12     | Chloramphenicol             |
| 13     | Cefepime                    |
| 14     | Cefoxitin                   |
| 15     | Clindamycin                 |
| 16     | Doxycycline                 |
| 17     | Ertapenem                   |
| 18     | Erythromycin                |
| 19     | Gentamycin                  |
| 20     | Imipenem                    |
| 21     | Levofloxacin                |
| 22     | Linezolid                   |
| 23     | Meropenem                   |
| 24     | Minocycline                 |
| 25     | Nitrofurantoin              |
| 26     | Neltilmycin                 |
| 27     | Piperacillin tazobactam     |
| 28     | Penicillin                  |
| 29     | Tobramycin                  |
| 30     | Tetracycline                |
| 31     | Teicoplanin                 |
| 32     | Vancomycin                  |

**ANNEXURE - II**

(To be submitted in Cover A -Technical Bid)

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

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

**Signature of the Bidder :  
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  
Laboratory Chemical ,Consumables, and antibiotic discs under NTEP & DPHL ,  
DHH Jajpur , 2024-25**. 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  
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)

**ANNEXURE – IV**

(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:

(Name in Capital)

Signature of Auditor/  
Chartered Accountant

Seal

Membership No.-  
Registration No. of Firm

**Note:**

- 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 manufacturers.

ANNEXURE-V

(PRICE SCHEDULE)

| Sl No | Name of the Items / Kit | Specification / Strength | Name of the Manufacture | Unit/Pack size | Rate/unit | GST | Total Price |
|-------|-------------------------|--------------------------|-------------------------|----------------|-----------|-----|-------------|
| 1     |                         |                          |                         |                |           |     |             |
| 2     |                         |                          |                         |                |           |     |             |
| 3     |                         |                          |                         |                |           |     |             |
| .     |                         |                          |                         |                |           |     |             |
| ..    |                         |                          |                         |                |           |     |             |

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

*Handwritten signature and date: 03.1.25*