

**TERMS, CONDITIONS & SPECIFICATION FOR SUPPLY OF DRUGS,
CONSUMABLE, INVETER & RACKING SYSTEM**

Name of the District / Health Institution: Deogarh
(HEALTH & F.W. DEPTT., GOVT. OF ORISSA)

Bid Reference No. -C.D.M. & P.H.O. DEOGARH (1230/11 .03.2022)

**TENDER DOCUMENT FOR SUPPLY OF DRUGS, CONSUMABLE & RACKING
SYSTEM INSTALLATION.**

Bid document may be downloaded from Web site-www.deogarh.nic.in

LAST DATE & TIME OF RECEIPT OF BID DOCUMENTS : Dt. 22.03.2022 Upto 1 P.M
DATE & TIME OF OPENING OF TECHNICAL BID : Dt 22.03.2022 at 04 P.M.
DATE OF OPENING OF FINANCIAL BID : Dt. 23.03.2022 at 11.00
AM

PLACE OF OPENING OF BID DOCUMENTS
AND
ADDRESS FOR COMMUNICATION

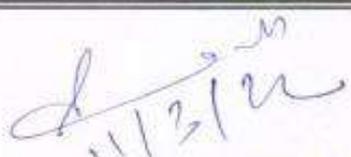
: O/o CDM & PHO, Deogarh District Head
Quarter Hospital, At/Po/Dist -
Deogarh, PIN - 768108

AND
RECEIPT OF BID DOCUMENTS

Tel: 06641-226103

Email id: nhmdeogarh@gmail.com

OFFICE OF THE CDM & PHO: DEOGARH


Chief District Medical &
Public Health Officer
DEOGARH

**TERMS AND CONDITIONS FOR SUPPLY OF DRUGS, CONSUMABLE,
INVETER&INSTALLATION OF RACKING SYSTEM**

- 1.1 Sealed tenders will be received upto 1 P.M. of dt. 22.03.2022, in the office of the C.D.M. & P.H.O Deogarh for the procurement of Drugs, Consumable & racking system installation. Any tender received after the due date & time will be rejected. **The tenders will be received through Regd. Post / Courier services / Speed Post only.**
- 1.2 The bidder(s) are to submit their quotations in separate sealed covered envelopes for technical bid and Price bid by superscribing Cover "A" (Technical Bid)&Cover "B" (Price Bid) and both the sealed covers should be put into a third outer Cover, which should be superscribed as "FOR SUPPLY OF DRUGS,CONSUMABLE & RACKING SYSTEM INSTALLATION -2021-22". Tender must be accompanied by Rs 1000/- (Rupees One Thousand) Only (Non-refundable) as processing fees and Earnest Money Deposit of Rs.10,000/- (Rupees Ten Thousand)(Refundable)by way of Demand Draft (Must be submitted by way of Demand Draft) , drawn from any Nationalized Bank in favour of "ZSS/ Non- NRHM Funds Account, Deogarh Payable at Deogarh".
- 1.3 The Sealed envelope containing the tender document submitted by the bidders will be opened in the office of the C.D.M. & P.H.O, Deogarh at 4 P.M on dt. 22.03.2022 under the chairmanship of CDM & PHO, Deogarh and in presence of the bidders or their authorized representatives.
- 1.4 The C.D.M. & P.H.O Deogarh will be at liberty to terminate the contract either wholly or in part without assigning any reasons thereof. The bidders will not be entitled to any compensation whatsoever for such termination.
- 1.5 The rate quoted will be valid for one year from the date of approval.
- 1.6 The supply of items shall be made immediately according to the volume after placing the supply order in the Office of CDM & PHO cum DMD, Deogarh / any other office under the jurisdiction of the undersigned and supplier shall submit the bill for payment at the approved rate in respect to the quantity of items supplied. The transportation of items is sole responsibility of the supplier and must deliver the item on door delivery basis.
- 1.7 The supplier selected shall have the responsibility to supply the items mentioned in **ANNEXURE - III** as per supply order which is required for carrying out day to day official work.
- 1.8 The suppliers shall also ensure that the quality and quantity has to be as per the supply order and approved rate contract in the bidding process.
- 1.9 In the event of any dispute arising out of the tender, such disputes would be subject to Deogarh jurisdiction.
- 1.10 If the approved supplier fails to execute the supply within the stipulated time, the C.D.M. & P.H.O Deogarh is empowered to purchase the same items from L₂ or L₃ bidder, if they agree with the L₁ rate.
- 1.11 Payment will be made after 100% supply of the items and completion installation as per order.
- 1.12 No advance payments towards cost of Drugs, Consumable & racking system will be made to the bidder.
- 1.13 The successful supplier shall replace any part or whole system as may be necessary in the event of damage during transit or found damaged on arrival or during installation of the system or if found not in conformity to the specifications at his / their own cost.
- 1.14 The undersigned reserves the right to accept or reject any or all the bids without assigning any reason thereof.

ELIGIBILITY CRITERIA

- 2.1 Manufacturing units / Importers/authorized dealer/Agency/Firms are eligible to participate in the tender provided, they have
 - (i) Valid manufacturing license / Import License/ authorized dealer certificate etc.
 - (ii) Valid Drug Licences /Drug Distributor Licences.
 - (iii) Manufacturing unit who has been debarred/ 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/debarment.
 - (iv) ITR Copy of last preceding 3 (three) years.
 - (v) Latest GSTR Copy.
 - (vi) Certificate duly filled by the Auditor / Chartered Accountant (as per **Annexure -IV**) that the annual turnover of the tendering firm is Rs. 20 (Twenty) lakhs or more in each financial year for last preceding 3 (three) financial years.


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The following documents should be enclosed in Technical Bid by the bidder. All the photocopies are to be self attested.

TECHNICAL BID:

- 3.1 Earnest Money Deposit of Rs. 10,000/- (Ten thousand only) and tender paper cost (Non-refundable) of Rs.1000/- (One Thousand only) to be submitted in shape of two separate Demand Draft in favour of "ZSS/ Non- NRHM Funds Account, Deogarh Payable at Deogarh".
- 3.2 Copy of Valid Manufacturing License of the tender items of the manufacturer / Import License by the Importer and authorised dealer certificate by the distributors and firms. Copy of Valid Drug Licences /Drug Distributor Licences.
- 3.3 Copy of GST registration certificate.
- 3.4 Copy of PAN of the organisation.
- 3.5 The Original Tender Book with Conditions and the schedules signed by the bidder at the bottom of each page with his official seal duly affixed.
- 3.6 The declaration form in **Annexure - I** duly signed by the bidder before Notary Public / Executive Magistrate.
- 3.7 Details name, address, telephone no., Fax, e-mail of the manufacturer / authorized distributor / service centre / contract person / office in Odisha (**Annexure - V**).
- 3.8 Certificate in support of service centre in Odisha or undertaking to set up service centre in Odisha within one month from the date of installation if approved (for those who have no service centers in Odisha
- 3.9 ITR Copy of last preceding 3 (three) Assessment years.
- 3.10 Latest GSTR Copy.
- 3.11 Checklist with detail of the documents enclosed in **technical bid** (as per **Annexure - VI**) with page number. The document should be serially arranged as per this **Annexure - VI** and should be securely tied and bound.
- 3.12 Certificate duly filled by the Auditor / Chartered Accountant (as per **Annexure -IV**) that the annual turnover of the tendering firm is Rs. 20 (Twenty) lakhs or more in each financial year for last preceding 3 (three) financial years.

Financial BID

- 4.0 Financial Bid will be opened only of the bidders who qualify in Technical Bid as per tender specification.
- 4.1 The Financial bid to be submitted in the prescribed form (as per **Annexure - II**). The price of the item should be quoted exclusive of taxes and including of insurance, packing, forwarding, freight (door delivery), installation, warranty but exclusive of CMC. The rate should be quoted both in figures and words. In case of difference in words and figures, words will be taken into consideration for evaluation.

EARNEST MONEY DEPOSIT

- 5.1 The Earnest Money Deposit shall be **Rs.10, 000/-** (Ten thousand) only. The Earnest Money Deposit will be submitted in the shape of demand Draft only in favour of ZSS Non- NRHM Funds Account, Deogarh, from any Nationalized Bank payable at Deogarh.
- 5.2 The EMD of the unsuccessful bidders will be returned back without interest after publication of the approved list and EMD of successful tenderer will be returned after successful installation and commissioning of items.
- 5.3 The EMD will be forfeited if the tenderer withdraws the tender or doesn't accept the approved list or doesn't supply the items within the stipulated time period.
- 5.4 No claims shall be made against the C.D.M. & P.H.O, Deogarh in respect of interest on earnest money deposit or security deposit or any delayed payment or any other deposit.

EVALUATION:

- 6.1 The rates of the item quoted by the bidder who qualify in technical bid will be evaluated after taking the following points into consideration: -
 - a) Rate of the Drugs, Consumable & installation of racking system will be taken after inclusive of transportation, insurance, packing and forwarding but exclusive of taxes.


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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 equipment's of **Drugs, Consumables & Racking
 System Installation , D.H.H, Deogarh**. 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 paper 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. organisation / Govt. Health
 Institutions for supply of Not of Standard Quality (NSQ) items / part-supply / non-
 supply.

I/We agree that the Tender Inviting Authority can forfeit the Earnest Money
 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 further declare that I / We possess valid manufacturing license /
 Authorized distributor bearing No.Valid upto I /
 We

..... do hereby declare that I / we will
 Supply the _____ as per the terms, conditions & specifications of the tender
 document. I / we further declare that I / we have a service centre / will establish a
 service centre within one month of installation of the equipment in Orissa.

Signature of the bidder : _____

Date : _____

Name & Address of the Firm: _____

Affidavit before Executive Magistrate / Notary Public.


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TENDER FORM - B
Financial Bid

SL.No	Name of The Items	Make & Model of Items Quoted	Rate Per Unit (Excluding taxes)	Remarks
1	Borosprit Ear Drop			
2	Wax Dissolving Drops			
3	Antibiotic Ear Drop			
4	Cotton Swab			
5	Normal Saline			
6	Nicotine Gum (2 mg)			
7	Nicotine Gum (4 mg)			
8	Mouth Paint Clotrimazole			
9	Choline Salicylate + Benzalkonium Chloride			
10	Benzydamine HCL mouth wash			
11	Cholorhexidine gluconate Mouth Wash			
12	LidocaineHydrochloride 2%			
13	Dental Fixatives			
14	Forceps Mouth mirror			
15	Probe			
16	Needle & Suturing Material			
17	Amalgam plugger & craver			
18	Sprit Lamps			
19	Needle Holders			
20	Scissor			
21	Tissue Forceps			
22	Dental Extraction Forceps			
23	Pediatric Extraction Forceps			
24	Dental Elevator Set			
25	Upper 2 nd Molar Extraction Forceps			
26	Lower 2 nd Molar Extraction Forceps			
27	Dental Luxtaor Set			
28	Dental Tweezer Forceps			
29	Mixing Pad			
30	Racking System		Rate Should be quoted in per square foot.	
31	2 KVA Inveter			
32	180 mAH Battery			
33	Battery Stand			

[Signature]
Chief District Medical &
Public Health Officer
DEOGARH

Notes: Use different sheets for different model or for higher specification items

I / we _____ agree to supply the above goods & allied services. We confirm that the same will meet the description, specification and other technical details as required in the tender enquiry.

I / we _____ confirm that we agree to all other terms and conditions of your tender enquiry including the terms of delivery, period of delivery and warranty provision.

I / we _____ have furnished all the information, as required in the tender enquiry and attached the relevant documents.

(In case a tendered desires to put some additional /modified stipulations, terms & conditions etc. the same may be clearly indicated)

I / we _____ confirm that our offer will remain valid or acceptance for _____ days after the date of opening of tenders (preferably at least one year)

(Signature, name and designation of the authorized executive of the tendering firm)

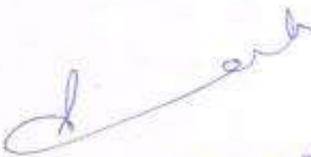
For and on behalf of.....
(Name and address of the tendering firm).....

Place:

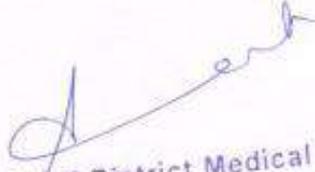
Date:

(Signature and seal of the authorized signatory)

Seal


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Sl.No	Name Of the Items
1	Borosprit Ear Drop (10 ml)
2	Wax Dissolving Drops
3	Antibiotic Ear Drop
4	Cotton Swab
5	Normal Saline
6	Nicotine Gum
7	Mouth Paint Clotrimazole
8	Choline Salicylate + Benzalkonium Chloride
9	Benzylamine HCL mouth wash
10	Chlorhexidine gluconate Mouth Wash
11	Lidocaine Hydrochloride 2%
12	Dental Fixatives
13	Forceps Mouth mirror
14	Probe
15	Needle & Suturing Material
16	Amalgam plugger & craver
17	Sprit Lamps
18	Needle Holders
19	Scissor
20	Tissue Forceps
21	Dental Extraction Forceps
22	Pediatric Extraction Forceps
23	Dental Elevator Set
24	Upper 2 nd Molar Extraction Forceps
25	Lower 2 nd Molar Extraction Forceps
26	Dental Luxtaor Set
27	Dental Tweezer Forceps
28	Mixing Pad
29	Racking System
30	Inverter 2 KVA
31	180 mAH Battery
32	Battery Stand


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Specification of the Items1. Borosprit Ear Drop

The drop minimum contains 10 ml volume.

2. Wax Dissolving Drops

The drop minimum contains 10 ml volume.

3. Antibiotic Ear Drop

The Antibiotic drug must contain quinolone group i.e. (Ofloxacin) with volume 10 ml.

4. Cotton Swab

Color	White
Usage/Application	Ear Cleaning
Brand	Magic
Country of Origin	Made in India
Bud Material	100 % Natural Cotton
Stick Material	Plastic

5. Normal Saline.

Normal saline is 0.9% saline. This means that there is 0.9 G of salt (NaCl) per 100 ml of solution, or 9 G per liter. This solution has 154 mEq of Na per liter. In fact, all the other solutions listed on the previous screen will be compared to normal saline as if it has 150 mEq of Na/L.

6. Nicotine Gum

Nicotine Polacrilex Gum USP, 4 mg & 2 mg.

7. Mouth Paint Clotrimazole

The minimum contains 25 ml volume of Clotrimazole in one pack of bottle.

8. Choline Salicylate + Benzalkonium Chloride

It should be packing in tube and the minimum weight of tube 10 gm.

9. Benzydamine HCL mouth wash.

Benzydamine hydrochloride 0.15% w/v.

Each 15ml dose contains 22.5mg benzydamine hydrochloride.

Excipients with known effect:

Ethanol (96%) 8.1%w/v

Methyl parahydroxybenzoate 0.1 %w/v

It also contains propylene glycol.

10. Chlorhexidine gluconate Mouth Wash

Chlorhexidine gluconate 0.12 % mouthwash

Color: blue

This medicine is a blue, clear, mint, liquid.

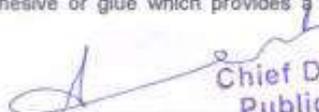
11. Lidocaine Hydrochloride 2%

Each 1ml of solution contains 2.0% w/v of Lidocaine Hydrochloride B.P.

Excipient(s) with known effect

12. Dental Fixatives

Polident Denture fixative cream is an adhesive or glue which provides a strong, all day hold for your dentures. It should be packing in tube.


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13. Forceps Mouth mirror

Angular mirror-2 pieces to provide indirect vision to retract lips, cheeks, and tongue to reflect light into the mouth.
Accurate image from flat surface mirrors, image magnified with concave mirrors.
Size of 14mm -22 mm of Plane size.StainlessSteel.Fog free with Flat/round ribbed handle.
The mirror shall be made of fiber glass and the handle shall be made of stainless steel 410/420 grade

14. Probe

15. Needle & Suturing Material

16. Amalgam plugger & craver

HOLLENBACK CARVER 1/2 DENTAL RESTORATIVE AMALGAM PLUGGER DOUBLE ENDED INSTRUMENT.

17. Sprit Lamps

- Made of stainless steel 304 grades.
- Should have cap and wick.
- Dimension: 63.00 X 63.00mm (HxD) ±3mm
- Spirit tank capacity: minimum 100ml Spirit

18. Needle Holders

Tungsten Carbide coated
Size 10"

19. Scissor

Size 4.5"
Stainless steel

20. Tissue Forceps

Size 14.5cm
Stainless steel

21. Dental Extraction Forceps

Size 6"
Stainless steel

22. Pediatric Extraction Forceps

Size 6"
Stainless steel

23. Dental Elevator Set

Size 6"
MATERIAL STAINLESS STEEL

24. Upper 2nd Molar Extraction Forceps

Size 6"
Stainless steel

25. Lower 2nd Molar Extraction Forceps

Size 6"
Stainless steel

26. Dental Luxtaor Set

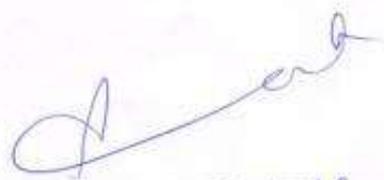
MADE OF SS MATERIAL

27. Dental Tweezer Forceps

MADE OF SS MATERIAL

28. Mixing Pad

Mixing Pads are designed to be used in the mixing and kneading of dental material such as impression material, cement, or resin-based (composite).



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29. Racking System

Pallet racking frames

The frames are made from perforated uprights that are connected with horizontal and diagonal cross bracing for strength and stability. The uprights are fitted with footplates to secure the pallet racking to the floor. These frames are finished with an epoxy coating.

Pallet racking beams

The beams are made up of two interconnected C-profiles. They have connecting claws that ensure a decent connection to the frames without the use of bolts or screws. Because of the perforations in the uprights, the beams are easily fitted to the desired height. Locking pins prevent unwanted unhooking of the beams. As with the frames, the beams are also finished with an epoxy coating.

Surface treatment pallet racking

The frames and beams are finished by degreasing, fosfating and epoxy coating. This gives a durable and smooth finish to the pallet racking. Other colours than the standard colours mentioned above are available on request.




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Technical specification of 2 KVA INVERTER& 180 mAh Battery

SL	Name of the Equipment	Specifications	Qty. Required
1	2 KVA Inverter (Luminous/Microtek/SuKam /APC - Type)	<ul style="list-style-type: none">• Pure sine wave• DC Input Voltage – 24V• AC Output Voltage- 230V• Output Frequency – 50 Hz ± 1%• IGBT-based PWM Technology• Short-circuit MCB Protection• Overload Protection• Low Battery Indication• LCD Display• Recharge Time: 12 Hr(s)• Warranty: 2 Year(s)• Segments: Ice Line Refrigerator• Protection: deep discharge, Equipped with over load, Reverse polarity, Short-circuit.	As per requirement
2	Battery for the Inverter	<ul style="list-style-type: none">• SMF• 180 mAh, 12V• Warranty-45 Months• Capacity-150 Ah• Technology-Tall Tubular• Dimensions- 503*190*405mm	As per requirement
3	Battery Stand	<ul style="list-style-type: none">• Hard plastic with wheel fitted.	As per requirement


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ANNUAL TURN OVER STATEMENT

The Annual Turnover of the tendering firm

M/s _____ for the last three years are given below and certified that the statement is true and correct.

Sl.No.	Year	Turnover in Lakhs / Crores (Rs)
1.	2018 - 2019	-
2.	2019 - 2020	-
3.	2020 - 2021	-

Date:

Place:

Signature of Auditor/
Chartered Accountant
(Name in Capital)
Registration No.
Seal


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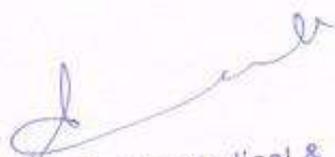
DETAILS OF THE BIDDERS & LOCAL CONTACT PERSON

	Corporate Office (The address in which the purchase orders and payment details will be communicated)	Local Contact Person / Branch Office / Zonal Office / Service Centre if any, in Orissa
Name & Full Address		
Telephone Nos., Landline		
Mobile		
Fax		
E – Mail		
Date of Inception		
Manufacturing License Nos. & Date		
Name of the issuing Authority		
License valid up to		

Signature of the Bidder:
With seal

Date:

Official Seal:


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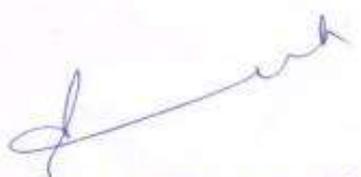
CHECK LIST

Please put ✓ "in the respective box

DOCUMENTS : SUBMITTED OR NOT

TECHNICAL BID FOR COMPUTER, PERIPHERALS, FUNTITURE & ELECTRONICS ITEMS

1	Cost of Tender Paper (Rs. 1000/-)	DD No			Date	
2	Earnest Money Deposit in shape of Demand Draft for Instrument & equipments. Rs.10,000/- (Ten thousand only)	DD No			Date	
3	Copy of Valid Manufacturing License of the tender item of the Manufacturer / Import License by the Importer. Copy of Drug Licences.	Yes	No	Page No		
4	Copy of Valid ISO certificate	Yes	No	Page No		
5	Copy of GST certificate	Yes	No	Page No		
6	Copy of PAN of the organisation	Yes	No	Page No		
7	Latest GSTR	Yes	No			
8	The declaration form in Annexure - I duly signed by the bidder before Notary Public / Executive Magistrate.	Yes	No	Page No		
9	Details name, address, telephone no., Fax, e-mail of the manufacturer / authorized distributor / service centre / contract person / office in Orissa (Annexure - VI).	Yes	No	Page No		
10	ITR Copy of last 3 years	Yes	No	Page No		
11	Certificate in support of service center in Orissa or undertaking to set up service centre in Orissa within one month from the date of installation if approved (for those who have no service centers in Orissa).	Yes	No	Page No		
12	Certificate duly signed by the Auditor / Chartered Accountant (as per Annexure -IV) that the annual turnover of the tendering firm is Rs.20 (Twenty) lacs or more in each financial year for last preceding 3 (three) financial years.	Yes	No	Page No		


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ANNEXURE – VII

MANUFACTURER'S AUTHORISATION FORMAT

To

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

Ref: Tender No. _____ Dated _____ for _____.

Dear Sir,

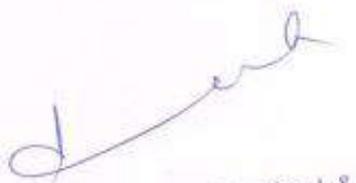
We _____ who are established and reputed
manufacturer's of _____ (name and description of items offered) having
factories at _____ (Address of Factory) do hereby authorize M/s _____
_____ (Name and address of Distributor / Agent) to submit a bid.

We also extend our full guarantee for the items quoted by M/s _____
_____ as per the terms and conditions in your tender
under reference above.

Yours faithfully,

Name of the Manufacturer
(Signature with seal)

Note: This letter of authority should be on the letter head of the manufacturer and should be signed by a person competent and having the power of attorney to bind the manufacturer. It should be included in the bid submitted by the bidder if the bidder is not the manufacturer.


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UNDERTAKING

(to be submitted on Rs.50/- stamp paper)

Tender ref. No. _____ Due for opening on _____

Name of the equipment:

Date of Installation:

Name of the Consignee:

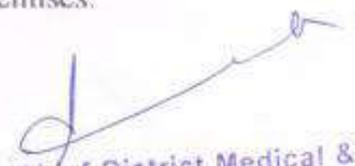
Name of the purchaser:

Sir,

I / we _____ hereby

declare that

1. I / we am / are the manufacturers / authorized agents / distributors of _____
2. I / we do accept / agree for the all clauses including the warranty and payment terms and conditions of this tender.
3. I / we do hereby confirm that the prices / rates quoted are fixed and are at par with the prices quoted by me / us to any other Govt. of India / Govt. of Orissa Hospitals / Medical Institutions. I / we also offer to supply the stores at the prices and rates not exceeding those mentioned in the price bid.
4. I / we agree to abide by my / our offer for a period of 1 year from the date of approval of the tender.
5. I / we have necessary infrastructure for the maintenance of the equipment and will provide all the accessories / spares as and when required.
6. I / we also declare that in case of change of Indian Agent or for any other change, merger, dissolution solvency etc. in the organization of our foreign principles, we would take care of the Guarantee / warranty / maintenance of the machinery / equipment and have provided written confirmation for the same.
7. I / we shall provide assistance to the consignee in clearance and delivery of store at consignee's stores / premises.


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8. The demurrage / storage charges, if any, payable to the customs department, due to non-receipt of required documents in time by the hospital / delay due to incorrect entries, mistakes to the documents etc. shall be borne by me / us.
9. I / we have carefully read and understood all the terms and conditions of the tender and shall abide by them.
10. I / we undertake to get the equipment's repaired within 48 hours of receiving of the complaint from the indenting hospital / consignee failing which a penalty @ 1% of the cost may be recovered.

Signature of the witness
Name & address

Signature of the Tenderer
Name & address

Dated

Seal of the firm.

NB. Only to be submitted by the approved supplier.


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