

Government of West Bengal
Office of the Chief Medical Officer of Health
North 24 Parganas, Barasat
Ph. No. 033-25523129, e-mail id- cmohn24pgs@gmail.com

QUOTATION NOTICE

QUOTATION NO:CMOH(NPG)/2017/6416

DATE-08/12/2017

QUOTATION DOCUMENTS
FOR
SUPPLY OF MEDICAL EQUIPMENTS

DATE OF ISSUE OF QUOTATION FORM WITH DOCUMENTS: 08/12/2017
LAST DATE FOR SUBMISSION OF QUOTATION DOCUMENT: 15/12/2017 UP TO 2 PM.
DATE & TIME FOR OPENING OF QUOTATION DOCUMENTS: 15/12/2017 AT 4 PM.

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NOTICE INVITING QUOTATION FOR SUPPLY OF MEDICAL EQUIPMENTS

Office of the Chief Medical Officer of Health north 24 Parganas invites sealed Quotation for supply of medical equipment from reputed companies /firms/individuals/societies those who are in the business for the last three years. Accordingly, sealed quotations are invited latest by 15/12/2017 up to-2 pm. And deposited their sealed quotation filled in all respect along with earnest money deposit (EMD) **Rs-5000/-** (Five thousand only) and other requisite documents duly subscribed "**Bid for Tender No-CMOH(NPG)/2017/6416**" **Dated-08/12/2017 for Supply of Alcohol Swab**" by dropping in the tender box placed in the office of the undersigned. No quotation after this deadline shall be entertained under any circumstances.

NOTE-The EMD should be put in the envelope containing quotation documents failing which quotation shall be rejected forthwith.

Details terms & condition (Annexure -I) and application form (Annexure -II) shall be available at office of the undersigned.

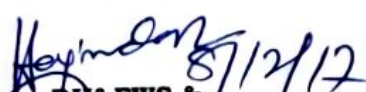

Secretary DH&FWS &
Chief Medical Officer of Health
North 24 Parganas

No: CMOH(NPG)/2017/6416

Date: 08/12/2017

Copy forwarded for information to: -

1. The Director of Health Services, Govt. of West Bengal
2. The Jt. Secretary to the Govt. of West Bengal, Dept. Of H & FW (MS Branch)
3. The Jt. Director of Health Services (P & D), West Bengal
4. The Dy. CMOH-I / II / III, DMCHO, DTO, ZLO, North 24 Pgs.
5. The D.I.O, North 24 Parganas for online publication.
6. The Accounts Officer of this office.
7. The DAM, O/o the CMOH, North 24 Parganas.
8. Office Notice Board


Secretary DH&FWS &
Chief Medical Officer of Health
North 24 Parganas

Annexure-I

Terms & Conditions (as per corrigendum)

1. Quotation Application (Annexure- Quotation II) shall be addressed to the Chief Medical Officer of Health & Secretary District Health & Family Welfare Samiti, North 24 Parganas, Kolkata-700124.
2. Before submission of the Quotation, Bidder shall sign each page of his/her Quotation and all its relevant papers with date.
3. Quotation not submitted as per the format or within the stipulated time shall be summarily rejected.
4. Quotation received without stipulated EMD shall be summarily rejected
5. Bidders must have helpline and dedicated customer support.
6. Sub-Contract: The agency shall not be allowed to sub-contract the work awarded by this office.
7. Terms of payment: The bill for satisfactory work shall be raised separately for each delivery. The bill will be processed, and payment released accordingly. In case the work is found to be unsatisfactory no payment shall be made.
8. No price preference and exemption from Earnest Money will be allowed to any organization / Society.
9. The bidder must have PAN, Valid Trade License, P Tax Enrollment Certificate with latest payment challan, IT-Return of last two years & GST certificates of current validity.
10. Rate of item(s)[should not exceed market value]..
11. Specimen of required sample(s) will be provided from the office of the undersigned on all working days on and from.....to.....up to **2.00 pm**.(If Applicable)
12. The TSC has the right to accept or reject any tender or part of quotation without showing any cause thereof at any stage of tender process.
13. The article(s) should be supplied as per specifications & approved quality (determined by TSC) within 15 days from issuance of the Work Order or as mentioned in the work order, failing which the order shall be treated as cancelled and the 2nd lowest bidder may be entrusted to supply for those article(s).
14. The bidders or his/her authorized representative should be present at the time of the opening of the quotation to get any clarification related to the quotation. No further clarification/information will be provided after the process of finalization of the quotation.
15. Sample specimen to be produced before the Tender Selection Committee (TSC) on the date of opening of the quotation.
16. Draw of Lots will be done in case of equal price bids in any item(s).
17. Technical Bid & Finance Bid must be submitted in separate sealed envelope by following two bid systems. Earnest money deposit receipt should be enclosed in technical bid only.
18. At any time prior to date of submission of quotation, quotation inviting authority may, for any reason or decision, modify the terms and condition of the document by a corrigendum displayed on the notice board of this office. To provide reasonable time to take the amendment into account in preparing their bid, quotation inviting authority may or may not, at his/her discretion extend the date and time for submission of tenders.



19. Quotation inviting authority of this office right to obtain clarification/ additional information from the bidders.
20. Refund earnest money deposit: The EMD submitted by the unsuccessful bidders shall be returned to them without any reason whatsoever, within 50 to 90 days after conclusion with successful bidder. The EMD submitted by the successful bidders shall be returned to them after the successful bidder deposits the performance security according to condition stipulated in the bid document. No interest will be paid on performance bank guarantee/unrest money deposit.

21. List of required document

Sl	Category Name	Document Name
1	Certificates	i) PAN Card ii) 15 - digit Goods and Services Identification Number (GSTIN)
2	Company Details	i) Valid Trade License ii) Manufacturing License (National/International). (In case, manufacturing licence is not required/ applicable for production of the quoted item, notarized declaration from the manufacturer is to be submitted)
3	Credential	i) Performance Statement (For the period of last three calendar years ending December 2016)
4	Declaration	i) Income Tax returns for assessment year 2014 - 15, 2015 -16 & 2016 - 17 ii) Acknowledgement of VAT Returns for 2015 -16 or 2016 - 17 /VAT Clearance Certificate iii) P. Tax Enrolment Certificate iv) CST Clearance Certificate
5	Equipment	I) Specification
6	EMD	I) Details / copy

Earnest Money-

- i. **Rs. 5000.00 (Rupees Five thousand only)** to be deposited through Online / Bank Transfer as Earnest Money in account of the **District Health & Family Welfare Samiti, North 24 Parganas, Account No. 424210100036711, IFSC Code- BKID0004242, Bank of India, Barasat Branch**, which will be refunded to the unsuccessful bidder (s) soon after the completion of the tender process.
- ii. The Earnest Money will be kept in custody of the authority as a part of Security Deposit for the successful bidder (s) and will be released after expiry of the tender process. The EMD will be forfeited in the event of non-submission of Bid.


**Secretary DH&FWS &
 Chief Medical Officer of Health
 North 24 Parganas**

Annexure-II

Application Form

NIT No.CMOH(NPG)/2017/64/6

Date: 08/12/2017

[Quotation for Alcohol Swab]

Name of the Firm/Agency:

Name of the Proprietor/Partners:

Address:

Mobile no-

Help line number;

Valid trade license:

PAN No.:

GST Registration No.:

IT Return for last two years (Yes/No):

Date of Tender Submission:

Detailed of EMD:

Branch:

DECLARATION: I/We declare that the above-mentioned information is correct in all aspect and I/We abide by the terms & conditions of the NIT. If any information found incorrect or false at any stage of this tender, my/our candidature/Bid may be liable for rejection.

Signature of the bidder



Finance Bid

(To be submitted in separate sealed envelope)

NIT No. **CMOH(NPG)/2017/6416**

Date: 08/12/2017

Sl. No.	Name of the Item	Acc. Unit	Rate in Rs/unit +GST	Remarks
1	Alcohol Swab	Each		

Signature with Seal

