

GOVERNMENT OF WEST BENGAL
District Health & Family Welfare Samiti &
Chief Medical Officer of Health
North 24 Parganas

No.DH&FWS/NHM/2018/2088

Date: 30.10.2018

QUOTATION NOTICE

Sealed quotation is invited from the bonafide Agencies/ Firms/ individuals, for supply of the following items to the office of the undersigned.

The applications may be received in the letter-head of the Agency/ Firm/ Individuals, addressed to the "Secretary, District Health & Family Welfare Samiti, North 24 Parganas." **By dropping in the quotation Box.** The last date of submission of quotation is 05.11.2018 up to 2.00 p.m. and it will be opened on the same day at 3.00 p.m.

List of Items for medical equipment (Laboratory Equipment)

SL. No.	Name of the Article/Item	Specification	Qty	Rate per unit quoted by the bidder (including delivery charges) and GST
1	Anaphylaxis Kit Box	Made of plastic Size 6.5X4X3 inch	1500	
2	Format for Qty. Certificate of Anaphylaxis kit	A4 (80 gsm)	1500	
3	Leaflet on signs and symptoms of Anaphylaxis	A4 (80 gsm)	1500	
4	Dose schedule of Adrenaline	A4 (80 gsm)	1500	

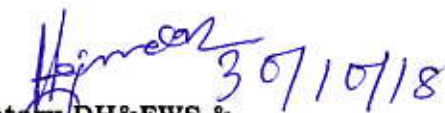
The rates are required for one year and it may be extended for further period with same terms & conditions and approved rate there to.

List of required documents:

1. Photocopy of valid Trade License (duly attested).
2. Photocopy of updated P.Tax update payment Challan & Certificate (duly attested).
3. Photocopy of PAN (duly attested).
4. Photocopy of I.T Return for the FY 2017-2018 and AY 2018-2019

Details Terms & Conditions (Annexure-I), and Tender Application Form (Annexure-II) shall be available at www.north24parganas.gov.in & www.wbhealth.gov.in on and from 30.10.2018

The Tender Selection Committee (TSC) reserves the right to accept or reject any tender or a part of the tender without assigning any reason thereof.


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


Copy forwarded for information to:-

1. The Director of Health Services.
2. Special Secretary (IEC), Health & Family Welfare Department.
3. Additional Mission Director, NHM & Joint Secretary to the Govt. WB, Health & Family Welfare Department.
4. The District Magistrate, North 24 Parganas.
5. Programme Officer, NHM & Joint Secretary to the Govt. of West Bengal, Health & Family Welfare Department.
6. SFWO.
7. The Dy. CMOH-I / II / III, DMCHO, DTO, ZLO, North 24 Pgs.
8. The D.I.O, North 24 Parganas requested to upload for online publication.
9. The Accounts Officer of this office.
10. The DAM, O/o the CMOH, North 24 Parganas.
11. The System Co-ordinator, IT Cell Swasthya Bhawan with the request to upload this notice in the official website of Swasthya Bhawan.
12. Office Notice Board

Handwritten signature and date: 30/10/18
**Secretary DH&FWS &
Chief Medical Officer of Health
North 24 Parganas**

Terms & Conditions (as per corrigendum)

- 1) The bid documents shall be received on and from 30.10.2018 to 05.11.2018 upto 2p.m., Application form (Annexure-II) shall be addressed to the Secretary District Health & Family Welfare Samiti, North 24 Parganas, Kolkata-700124.
The bid documents to be submitted under sealed cover super scribing on the envelope, as "**Tender for supply of different items as per NIQ issued vide No.DH&FWS/NHM/2018/2088 Dated 30.10.2018 to the Office of the CMOH, North 24Parganas**".
- 2) The bidder must have PAN, Trade License, IT-Return.
- 3) Rate of item(s) shall be inclusive of all Taxes (direct & Indirect). Rates quoted more than MRP shall be rejected.
- 4) Specimen of required sample will be **submitted along with bid, without samples(s) tender will be rejected.**
- 5) The TSC has the right to accept or reject any tender without showing any cause thereof.
- 6) The article(s) should be supplied as per specifications & approved quality within 7 (Seven) days from issuance of 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).
- 7) The Proprietor of the firm should sign on every page of the bid documents.
- 8) The bidders or his/her authorized representative may be present at the time of the opening of the tender to get any clarification related to the tender. No further clarification/information will be provided during the process of finalization of the tender.


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

Application Form

1. Name of the Firm/Agency :
2. Name of the Proprietor with Mobile no.
3. Trade License and current Validity :
4. P.Tax current Challan and Certificate :
5. PAN No. :
6. IT Return for – FY 2017-2018 and AY 2018-2019
7. Date of Tender Submission :

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

Signature of the bidder