



DIRECTORATE (MEDICAL) NOIDA
E.S.I. MODEL HOSPITAL: SECTOR-24: NOIDA
Website: <http://esic.in> , <http://esic.nic.in>

TENDER NOTICE

Sealed tenders are invited from Govt. /registered agencies for supply of linen items for this hospital:-

The tender documents, terms and conditions may be obtained at a cost of **Rs. 300/- (Rupees three hundred only)** non refundable payable by demand draft/Banker cheque in favour of ESIC Fund Account no.1 (Medical)Noida from this office on any working day between 10.00 AM to 1.00 PM and on Saturday from 10.00 A.M. to 12.00 Noon from 12.03.2011 to 01.04.2011.

Earnest money in the shape of Bank draft/Banker cheque drawn on any nationalized bank in favour of ESI Fund Account No.I (Medical) Noida for **Rs. 1,00,000/- (Rupees One Lac only)** should accompany tender documents.

Complete tender documents alongwith earnest money will be received upto **1.00 PM on. 01.04.2011** and tenders will be opened on the same day at 2.30 PM in the presence of bidders present. In the event of. 01.04.2011 is declared a Gazetted Holiday, the same will be opened on the next working day at the same time. Tenders received after the date and time given above will not be considered.

The tender documents can also be down loaded from ESIC website mentioned above and it should be accompanied by Bank Draft/Banker cheque of Rs. **300/= (Rupees three hundred only)** non refundable drawn in favour of ESIC Fund Account no.1 (Medical) Noida.

The Director (Medical) Noida reserves the right to reject any or all the tenders without assigning any reason.

Joint Director (Admn.)

DIRECTORATE (MEDICAL) NOIDA
ESI MODEL HOSPITAL
SECTOR-24 NOIDA

TENDER FOR SUPPLY OF LINEN ITEM
TERMS AND CONDITIONS

1. Sealed tenders are invited from the Govt. /registered Agencies for supply of linen items as per list enclosed (annexure – I).
2. Any conditional acceptance is liable to rejection of tender.
3. Rates should be quoted for the good quality products.
4. Please quote rates in the enclosed format (No Column should be left blank). The rates once quoted on approval will stand valid up to one year. The quantity of items may increase or decrease.
5. All pages of tender document submitted should be numbered & signed by authorized signatory of participating firm with seal.
6. Successful tenderer shall supply the material as per supply order on the rates quoted by them and approved by the competent authority of this hospital.
7. Taxes, if applicable, shall be as notified by Govt.
8. Samples of all quoted articles marked by authorized signatory of participating firm along with its seal and signatures should be submitted in the Store Deptt. Prior to closing of tender in separate sealed cover superscribed "sample of Linen Items".
9. Goods shall be supplied F.O.R. destination.
10. The successful tenderer shall supply the articles within **two weeks** from the date of issue of supply of supply order. In case of failure in supply, the indented items shall be purchased from the market at the risk and cost of contractor. The extra expenditure involved in procuring supplies from elsewhere will be recoverable from the supplier in full at discretion of the Director (Medical)Noida. The recovery thus due shall be deducted from any sum then due to supplier from the ESI Corporation from this or any other contract placed with said contractor by the Employees' State Insurance Corporation. The EMD deposited shall also be forfeited.
11. Late supply penalty of 2% per week, subject to maximum of 10% may be imposed on supplier who supplied items beyond the due date of delivery.
12. Tenders in sealed envelope superscribed as "Tender for supply of Linen Items" can be dropped in the tender box kept in chamber of JD (A), upto **01.04.2011** 1.00 PM. No tender thereafter shall be accepted. The tender shall be opened on **01. 04.2011** at 2.30 PM in the chamber of Dy. M.S. of this hospital in presence of tenderers or their representatives who wish to be present. In the event of **01.04.2011** being declared a holiday, the tender will be opened on next working day at same time and place.
13. Earnest money in the shape of Bank draft/Banker cheque drawn on any nationalized bank in favour of ESI Fund Account No.I (Medical) Noida for **Rs. 1,00,000/-(Rupees One Lac only)** should accompany tender documents.
14. Bed Sheet /Pillow cover must be weaved with two rows from one end to another in vertical line with ESI Model Hospital, Noida.
15. The tender documents can also be down loaded from ESIC website mentioned above and it should be accompanied by non refundable Bank Draft/Banker cheque of **Rs.300/= (Rupees Three hundred only)** drawn in favour of ESIC Fund Account no.1 (Medical)Noida with the Tender documents.
16. The Director (Medical) Noida reserves the right to accept or reject any or all tenders without assigning any reason thereof.

Annexure-1

| S. No. | Name of Items | Specification | Quantity | Brand if any | Rate/unit | Rate of tax / VAT if any | Total price inclusive taxes |
|--------|---|---|----------|--------------|-----------|--------------------------|-----------------------------|
| 1. | Patient Bedsheet | White of150x270 cms. in Cotton with weaving ESI Model Hospital NOIDA, | 1700 | | | | |
| 2. | Drs.Bed Sheet | Printed of150x250 cms. in Cotton with weaving ESI Model Hospital NOIDA, | 100 | | | | |
| 3. | Pillow Cotton | White in 1 Kg, Cotton | 430 | | | | |
| 4. | Pillow Covers | White (45x67) cm Cotton with weaving ESI Model Hospital NOIDA, | 1200 | | | | |
| 5. | Pillow Covers for Doctors | Brown (45x67) cm Cotton with weaving ESI Model Hospital NOIDA, | 100 | | | | |
| 6. | Woolen blanket(patient) | Red Std. size(58"X88") | 1000 | | | | |
| 7. | Dr. Blanket | Brown Std. size (58"X88") | 100 | | | | |
| 8. | Draw Sheet | White, 89X250 cms in cotton | 3000 | | | | |
| 9. | Turkish Towel | 27X54, Colored | 500 | | | | |
| 10. | Pts. Blouse Green in cotton | size 38" 40" 42" Qty. 100 1000 100 | 1200 | | | | |
| 11. | Pts.Petticoat Green in cotton | size 38" 40" 42" Qty. 100 1000 100 | 1200 | | | | |
| 12. | Gown | Green, Size(53" length) in cotton | 1000 | | | | |
| 13. | Doctor Maxy | Sky blue in T/C (67% x 33%), 40" sizes | 200 | | | | |
| 14. | Pts. Kurta Green in cotton | size 38" 40" 42" Qty. 150 700 150 | 1000 | | | | |
| 15. | Pts.Payajama Green in cotton | size 38" 40" 42" Qty. 150 700 150 | 1000 | | | | |
| 16. | Doctor Kurta Sky Blue, T/C (67% x 33%) | size 38" 40" 42" Qty. 200 700 100 | 1000 | | | | |
| 17. | Doctor Payajama Sky Blue, T/C (67% x 33%) | size 38" 40" 42" Qty. 200 700 100 | 1000 | | | | |
| 18. | Kurta paramedical staff in O.T. Green, T/C (67% x 33%) | size 38" 40" 42" Qty. 50 175 25 | 250 | | | | |
| 19. | Payajama paramedical staff in O.T. Green, T/C (67% x 33%) | size 38" 40" 42" Qty. 50 175 25 | 250 | | | | |
| 20. | Kurta for sweepers in Main O.T. Grey Blue, T/C (67% x 33%) | Size 40" 42" Qty. 25 25 | 50 | | | | |
| 21. | Payajama for sweepers in Main O.T. Grey Blue, T/C (67% x 33%) | Size 40" 42" Qty. 25 25 | 50 | | | | |
| 22. | Abdominal Sheet | Green, cotton, 244X288 cms. | 400 | | | | |
| 23. | Double Wrapper | 1.25 X1.25 meter, green cotton | 1000 | | | | |
| 24. | Leggings | Set of 2, Green | 400 | | | | |
| 25. | Spinal Sheet | 180 x100 cm, green in cotton | 1200 | | | | |
| 26. | O.T.Towel | Green(48" X 48") in cotton | 850 | | | | |
| 27. | Apron/Dr.coat Half Sleeves | White terricot cloth, size (38", 40", 42") | 500 | | | | |
| 28. | Plain bed sheet | White in 150 x 270 cms. size,in cotton | 200 | | | | |
| 29. | Apron for Kitchen Staff Check Cotton | Size 40" 42" Qty. 25 25 | 200 | | | | |
| 30. | Caps. for Kitchen Staff Check Cotton | Standard Size | 200 | | | | |

**TENDER FOR SUPPLY OF LINEN ITEMS IN
ESI HOSPITAL, SECTOR-24, NOIDA**

1. Name, address of Firm/Agency/
Company and telephone number : _____
: _____
: _____
2. Registration No. (if any) : _____
3. Name, designation, address & telephone
no. of authorized person : _____
: _____
: _____
4. Please specify as to whether tenderer is a
sole proprietor / partnership firm/ private
or limited company : _____
: _____
: _____
: _____
5. Name, address & telephone no. of
Directors/Partners Fax No. / Email
address : _____
: _____
: _____
: _____
6. Copy of PAN card issued by IT Dept. &
copy of previous financial year's IT
return : _____
: _____
: _____
7. Details of Experience : _____
8. Details of Earnest Money Deposit
a) Amount : _____
b) DD/Pay order, Banker's Cheque No. : _____
c) Date of issue : _____
d) Name of issuing bank : _____
9. Any other information : _____

Declaration by the Bidders:

This is to certify that I/we before signing this tender have read and fully understood all the terms and conditions contained herein and undertake myself / ourselves to abide by them.

(Signature & Seal of Tenderer)

Note: Please enclose photocopies of documents mentioned at Serial No. 1 to 7.