



कर्मचारी राज्य बीमा निगम अस्पताल आदित्यपुर  
Employees' State Insurance Corporation Hospital Adityapur  
(ISO 9001:2008 Certified)

श्रम एवं रोजगार मंत्रालय, भारत सरकार

Ministry of Labour and Employment, Govt. of India

साल्डीह बस्ती, आदित्यपुर, जिला – सरायकेला खरसावाँ, पिन – 831013

Saldih Basti, Adityapur, Distt. - Saraikela Kharsawan, Pin - 831013

वेबसाइट : [www.esic.nic.in](http://www.esic.nic.in) , फोन नं : 0657-2383866, ई-मेल : [ms-adityapur@esic.in](mailto:ms-adityapur@esic.in)



No. 603 – D/31/11/13/09 – Genl./Printing

Dated : 05.08.2014

**RATE CONTRACT OF PRINTING OF VARIOUS FORMS AND MAKING OF POLYMER STAMP (NORMAL/ SELF INKED)  
AND**

**INTEREST FOR EMPANELMENT FOR SUPPLY OF GENERAL ITEMS/ STATIONERY ITEMS/ REGISTERS ETC**

The Medical Superintendent, ESIC Hospital Adityapur, Saldih Basti, Adityapur, Distt. Saraikela Kharsawan, invites Expression of Interest from the interested firms for Rate Contract of Printing of Various Forms and Making of Polymer Stamp (Normal/ Self Inked) as well as for Empanelment for supply of General Items/ Stationery Items/ Registers in sealed envelope. The participants may either submit their bid for Rate Contract of Printing of Various Forms and Making of Polymer Stamp (Normal/ Self Inked) or interest for Empanelment for supply of General Items/ Stationery Items/ Registers etc or for both. In case if the bidder wants to submit their bid for Rate Contract of Printing of Various Forms and Making of Polymer Stamp (Normal/ Self Inked) or interest for Empanelment for supply of General Items/ Stationery Items/ Registers etc. or both, they may fill up both Part – A or Part – B or both, as the case may be, of this tender documents alongwith necessary documents.

<b>Period for supply of Blank Tender Forms and related documents at the Hospital on all Working Days (Except Saturdays, Sundays and Holidays)</b>	<b>08.08.2014 to 03.09.2014 upto 2.15 p.m.</b>
<b>Last Date &amp; Time of submission of completed Tender form in the prescribed tender box</b>	<b>03.09.2014 upto 2.15 p.m.</b>
<b>Date &amp; Time of Opening of Tender</b>	<b>03.09.2014 at 2.30 p.m.</b>

Application forms along with Terms and conditions can be downloaded from the website at [www.esic.nic.in](http://www.esic.nic.in) Duly filled in forms, complete in all respect should reach the office of the Medical Superintendent, ESIC Hospital Adityapur by **03.09.2014 upto 2.15 p.m..**

The Expression of Interest will be opened on **03.09.2014** in the office of The Medical Superintendent, ESIC Hospital Adityapur at 2.30 p.m. in presence of participants or their authorized representative(s), who choose to be present. If the opening date happened to be a holiday, it will be accepted & opened on next working day.

**DOCUMENT COST (Non Refundable):-**

**FOR PART "A" – Rs. 500/-, FOR PART "B" – Rs. 100/- and FOR BOTH Rs. 600/-.**

Party downloading the form from website shall have to deposit Rs. 500/- (Rupees Five Hundred Only) for Part A (Rate contract of Printing of Forms and Stamp), Rs. 100/- (Rupees One Hundred Only) for Part B (Interest for Empanelment for supply of General Items/ Stationery Items/ Registers etc) and Rs. 600/- (Rupees Six Hundred Only) for Both (Non Refundable) separately as document Cost in form of DD drawn on any nationalized bank in favour of ESI Fund Account No. 1 payable at Jamshedpur.

**Document Acceptance:** Documents may be dropped either in the box earmarked for the purpose or be sent by Registered post. Documents received by Ordinary post shall not be accepted at all. Document received after the scheduled date and time shall be rejected out rightly.

**PART - A. Rate contract of Printing of Forms and Stamp: -**

**General Terms and Conditions :-**

- (i) The rate of the items to be supplied to ESIC Hospital Adityapur should not exceed the rate on which it has been supplied/ sold to any other party and in no circumstances it shall exceed MRP of the item.
- (ii) The items to be supplied to ESIC Hospital Adityapur should be of latest stock and must not of after the expiry / use before date, if any.
- (iii) Whenever and wherever the empanelled vendors are requested print any Form or to make any Polymer stamp, the vendor shall honour and comply the supply order within 15 days from date or receipt of the order. In case of non – compliance of any order, a penalty of Rs. 500/- for each default shall be imposed on the firm. The penal amount shall be recovered either from the pending bills or from the security deposit.
- (iv) The vendor shall comply with all the statutory requirements/ norms issued by the Govt. from time to time.
- (v) Any item fails conformity with specification will be rejected out rightly and it shall be replaced immediately at the risk and cost of the supplier.

**1. Scope of Work :-**

- A. Printing of various forms (One sided/ both sided) in A4 size etc. for details please see Annexure – 1 (B)
- B. Making of Polymer Stamps. For details please see Annexure – 1 (B)

**2. Estimated Value :-**

Approximately Rupees Two Lakhs Fifty Thousand for 1 Year. The actual value may vary as per requirement.

**3. Period of Rate Contract :-**

The rate contract shall be for a period of 1 year from the date of award of contract and it may be extendable for a further period as deemed fit on similar terms and condition/ rate on mutual consent subject to satisfactory performance of the firm.

**4. Eligibility Criteria :**

- i. The bidder shall have valid trade license to carry/supply the item in question.
- ii The bidder shall have VAT registration.
- iii. The bidder shall not be a black listed by Govt./Semi-Govt./Private institution.  
Self certification in this regard shall be enclosed (in Annexure - 1)
- iv. The bidder shall be free from encumbrance and there shall not be any vigilance case/ CBI Case/ Court Case pending against him (in Annexure -1).
- (v). The Vendor must have PAN and Account in any of the Nationalized Banks/ Scheduled Banks.  
(In case of Ltd./Pvt. Ltd./Partnership Firm, the PAN and Account shall be in the name of the Firm/Company and in case of Individual Ownership, the PAN and Account may be in the name of Owner.)

**5. Earnest Money Deposit :-**

- i. Rupees Four Thousand Five Hundred only for Printing of Forms
- ii. Rupees Five Hundred only for Making of Polymer Stamps

The Amount of EMD in form of DD of sum equivalent to amount shown above may be drawn in favour of "ESI Fund A/C No.1," payable at **SBI, Jamshedpur** Branch. The DD as above may submitted combined or separately as per the convenience of the bidder(s).

**6. Submission of Bid :-**

The Tenderers are required to submit the tender in the form as defined below.

**The envelope no. 1** shall contain DD of sum equivalent to amount shown under Point No. 5 above, towards EMD drawn in favour of "ESI Fund A/C No.1," payable at SBI, Jamshedpur Branch and the word "EMD for tender of Rate Contract for Printing of forms/Polymer Stams for ESI Hospital Adityapur" shall be superscribed on the top of the envelope.

In case tender document is downloaded from website, cost of tender document i.e Rs.500/- in the form of a separate DD in favour of "ESI Fund A/C No. 1" payable at "SBI Jamshedpur Branch" shall be submitted in the envelope containing EMD, failing which the tender will outrightly be rejected.

**The envelope no. 2** shall contain technical bid i.e., dully filled Tender Application Forms (Annexure–1(A) alongwith tender documents, signed (on all pages) as well as self attested (in case of photocopy of document) with supportive document. The word/phrase "**Technical Bid for tender of Rate Contract for Printing of forms/Polymer Stamps for ESI Hospital Adityapur**" must be superscribed on the top of the envelope.

**The envelope no. 3** shall contain the financial bid Annexure – 1 (B) and the word/phrase "**Financial bid for tender of Rate Contract for Printing of forms/Polymer Stamps for ESI Hospital Adityapur**" should be superscribed on the top of the envelope.

All the three sealed envelope shall also carry the name and address of the tenderer and all the 03 (three) sealed envelope shall be kept in fourth big envelope and "**Tender of Rate Contract for Printing of forms/Polymer Stams for ESI Hospital Adityapur**" should be super scribed on the top of the envelope as well as name and address of sender on the bottom of envelope. This sealed fourth envelope (containing the envelope of EMD, Technical Bid, Financial bid) shall be dropped in the tender box place in the office of the "**The Medical Superintendent, ESIC HOSPITAL, ADITYAPUR- 831013 on or before 03.09.2014 at 2.15 P.M**

**Note :-**

- A. Tender must reach this office not later than the time and date notified in the tender form stated in the schedule of tender. In the event of tender received after scheduled date and time, the tender will not allowed in bidding and it will be rejected summarily.
- B. All entries in the Tender form shall be legible and filled clearly. Any overwriting or cutting which is unavoidable shall be signed by the authorized signatory.
- C. Tender incomplete in any form will be rejected out rightly. Conditional Tenders will be rejected out rightly.
- D. No Tenderer will be allowed to withdraw the Bid after submission of the tenders within the bid validity period; otherwise the EMD submitted by the tendering firm would stand forfeited.
- E. Each page of the Tender document shall be signed and stamped by authorized representative of Tenderer in token of acceptance of the terms and conditions laid under the Tender Document.
- F. The financial bid & technical bid received without the signature of authorized person will not be entertained and will be rejected summarily.
- G. The rates quoted in financial bid shall be in Indian currency and as per details furnished in Financial bid i.e. Annex- 1 (B)

**6. Opening of Bid:**

- i. The Technical Bids will be opened **at 03.09.2014 at 2.30 P.M** in the office of the Medical Superintendent in the presence of such tenderers or their authorized representatives who may choose to be present at the time of opening of technical bid.

- ii. **The envelope no.1** containing EMD (also cost of Tender form i.e. as prescribed above, if form is downloaded from website) shall be opened first. Envelope no.2 (containing technical bid) shall be opened only if the bidder submits EMD as stated this form (also cost of form i.e. as prescribed above in the event if form is downloaded from website).without EMD & cost of form (in case if it is downloaded from website) the tender will not be entertained & will be rejected summarily.
- iii. **The envelope no. 2** i.e., “Technical Bid” of only those bidder shall be opened who has fulfilled the terms & condition as stated above at ii. The Technical bid will be evaluated by Technical Evaluation Committee and shortlist the eligible technically qualified bidder as per terms & conditions of tender document. The financial bid of only technically qualified bidder shall be opened later on. The date & time of opening of financial bid shall be communicated to all technically qualified bidders.
- iv. **The financial bid** shall be opened in presence of technically qualified bidder or their authorized representative who choose to be present on the date & time of opening of financial bid.

## **7. Selection of Eligible Tenderer**

The selection of successful bidder shall be made on the rate offered by the bidder keeping in the view of terms & conditions and specification laid under tender document. There may be separate selection of Bidders for Rate Contract of printing of Forms and making of Polymer Stamps

## **8. Rights of Acceptance/Rejection.**

The Medical Superintendent ESIC Hospital, Adityapur reserves the right to reject all or any tender in whole, or in part, without assigning any reason thereof.

## **9. Acceptance of Bid :**

The successful bidder shall give its **acceptance within 07 days from award of work order** and required to enter into an agreement with Medical Superintendent, ESIC Hospital, Adityapur on bond paper of Rs.100/ ( Rupees One hundred only) . The cost of bond paper will be borne by successful bidder. In case, if successful bidder fails to give acceptance or enter into agreement within stipulated time, the award of contract will be deemed to be cancelled and EMD amount will be forfeited.

The EMD of successful bidder shall be converted into Security Deposit and be returned on completion/expiry of the contract.

## **10. PAYMENT TERMS:**

- a. 100% Payment will be made only after satisfactory supply as per specification, inspection, complete acceptance of the items by the Medical Superintendent or any other person(s) authorized by him. If the supplied item found to be of substandard, the same will be returned and required to be reprinted by the successful bidder. Any item fails conformity with specification will be rejected out rightly and it shall be replaced immediately at the risk and cost of the supplier.
- b. Payment shall be made through Electronic Clearing System (ECS) or Cheque. Normally, payment is made within 6 (six) weeks after satisfactory inspection., installation and performance of the item subject to submission of appropriate and correct invoice, Challans and other documents as deemed fit.
- c. In case of Cheque, the same may be dispatched through Speed Post/registered post.

**TENDER APPLICATION/DECLARATION FORM (for PART – A)**

1		Name of the firm	
2	a	Full Postal Address	
	b	Cell Phone No.	
	c	Telephone No.	
	d	Fax No.	
	e	e-mail address	
3		Ownership Details :	
	a.	Name of the Director/Prop/Partner(s)	
	b.	Residential Address of Director/Prop/Partner(s)	
4		If your Firm Registered under:	
	a	VAT (Commercial tax registration)	
	b	Trade License	
	c	PAN	
5		Name and Address of your Bankers stating the name in which the Account Stands:	

**UNDERTAKING**

- A. I the undersigned certify that I have gone through the terms and conditions mentioned in the tender document and undertake to comply with them.
- B. The rates quoted by me are valid and binding upon me for the entire period of contract and it is certified that the rates quoted are the lowest quoted for any other institution/hospital in India and also certified that the rate quoted is less than the MRP of the quoted Item. It is also certified that Item quoted are of Standard Quality and workmanship.
- C. The earnest money (In accordance with Annexure-I of tender document) of Rs. \_\_\_\_\_ has been deposited by me and is enclosed herewith vide Demand Draft No. \_\_\_\_\_ dt. \_\_\_\_\_ drawn on bank \_\_\_\_\_, Branch \_\_\_\_\_.
- D. I hereby undertake to supply the items as per directions given in the tender document/supply order within stipulated period.
- E. I/We give the rights to Medical Superintendent to forfeit the earnest money deposited by me/us if any delay occur on my/agent's part of failed to supply the article within the appointment time or the items of desired quality.
- F. There is no vigilance/CBI case or court case pending against the firm.
- G. This is to declare & certify that the neither myself nor my firm has ever been blacklisted by any Govt./Semi Govt./Public/Private Intuition.
- H. I/We hereby certify that the Firm poses all the required license/certification to perform the work.

**Date:**  
**Place:**

**Signature of the tenderer :-**  
**Full Name :-**  
**Designation :-**

**ANNEXURE – I (B)****FINANCIAL BID FOR PRINTING OF FORM AND MAKING OF POLYMER STAMP****A. FOR PRINTING OF FORMS :-**

Sl. No.	Type	Size	GSM	Quote your Rate (Per 1000 Pages)	VAT	Other Taxes, If any
(A)	(B)	(C)	(D)	(E)	(F)	(G)
1	One Side Print	A – 4 (210 mm x 297 mm)	75 gsm			
2	Both Side Print	A – 4 (210 mm x 297 mm)	75 gsm			

**B. FOR POLYMER STAMP :-**

Sl. No.	Type	Size	Quote your Rate (Per Line)	VAT	Other Taxes, If any
(A)	(B)	(C)	(D)	(E)	(F)
1	Polymer Stamp	Per Line (Hindi/English)			
2.	Round Polymer Stamp	4.5 CM Diameter			

**Note :-**

1. Please quote your rate above excluding of all type of taxes.
2. VAT and Other Taxes, if any to be quoted in separate columns respectively and it will be changeable as per the notification of appropriate Govt.
3. Selection of the bidder for L – 1 shall be made on the basis of quotation of “One Side Print” for Printing of Forms. Selection of the bidder for L – 1 shall be made on the basis of quotation of “Per Line” for Polymer Stamp.
4. If the firm wishes to not to quote the rate of any of the parts, it is required to write “NO QUOTE” in the respective column.

**Date:****Signature of the tenderer :-****Place:****Full Name :-****Designation :-**

**PART – B : INTEREST FOR EMPANELMENT FOR SUPPLY OF GENERAL ITEMS/  
STATIONERY ITEMS/ REGISTERS ETC.**

**Period of Empanelment :-**

The empanelment will last till for such period until :-

- (i) The Vendor wishes to come out of the agreement, or
- (ii) The interested Vendor empanelled so defaults as per the terms and conditions, or
- (iii) Any legal action is taken against the interested party empanelled so by any Law, or
- (iv) The interested party empanelled so is blacklisted by any of the Govt./Semi Govt./Autonomous Bodies/Pvt. Firms, or
- (v) ESIC Hospital Adityapur calls for Expression of Interest afresh.

**ELIGIBILITY :-**

**Same as in part – A of the tender documents.**

**General Terms and Conditions :-**

- i. The rate of the items to be supplied to ESIC Hospital Adityapur should not exceed the rate on which it has been supplied/ sold to any other party and in no circumstances it shall exceed MRP of the item.
- ii. The items to be supplied to ESIC Hospital Adityapur should be of latest stock and must not be after the expiry / use before date, if any.
- iii. Whenever and wherever the empanelled vendors are requested to quote rate for the required Item(s), they shall quote the rate in the prescribed format.
- iv. The vendor shall honour and comply the decision made by the Medical Superintendent.
- v. The vendor shall comply with all the statutory requirements/ norms issued by the Govt. from time to time.

**Special Terms & Conditions :-**

- (i) Whenever the requirement arises at ESIC Hospital Adityapur towards procurement of Articles/ Material/ Printing of Forms/ Registers/ Stationery, the Medical Superintendent will call for rate quotation from all registered vendors. The vendors shall have to quote their rate in the prescribed format given to them.
- (ii) The quotations will be opened on Scheduled Date and Time in the Office of the Medical Superintendent, ESIC Hospital Adityapur in the presence of Vendors/ their representatives who chooses to be present.

**All other terms as regard to payment etc. shall be same as in Part – A of the tender documents except EMD and Security Deposit. EMD for empanelment shall be “NIL”. Security Deposit , if any, shall be decided at the time of invitation of quotation at each time from the empanelled vendors.**

**The interested vendors may participate in the empanelment by giving their willingness in the Form (Annexure - 2).**

**TENDER APPLICATION/DECLARATION FORM (For Part – B)**

1		Name of the firm	
2	a	Full Postal Address	
	b	Cell Phone No.	
	c	Telephone No.	
	d	Fax No.	
	e	e-mail address	
3		Ownership Details :	
	a.	Name of the Director/Prop/Partner(s)	
	b.	Residential Address of Director/Prop/Partner(s)	
4		If your Firm Registered under:	
	a	VAT (Commercial tax registration)	
	b	Trade License	
	c	PAN	
5		Name and Address of your Bankers stating the name in which the Account Stands:	

**UNDERTAKING**

- A. I the undersigned certify that I have gone through the terms and conditions mentioned in the tender document and undertake to comply with them.
- B. I/We give the rights to Medical Superintendent to forfeit the earnest money deposited by me/us if any delay occur on my/agent's part of failed to supply the article within the appointment time or the items of desired quality.
- C. There is no vigilance/CBI case or court case pending against the firm.
- D. This is to declare & certify that the neither myself nor my firm has ever been blacklisted by any Govt./Semi Govt./Public/Private Intuition.
- E. I/We hereby certify that the Firm poses all the required license/certification to perform the work.
- F. I hereby give my willingness to be empanelled as vendor with ESIC Hospital Adityapur for supply of **GENERAL ITEMS/STATIONERY ITEMS/ REGISTERS ETC.**

**Date:****Signature of the tenderer** :-**Place:****Full Name** :-**Designation** :-