

 <p>क. रा. बी. नि. ESIC</p>	<p>कर्मचारी राज्य बीमा निगम अस्पताल (श्रम एवं रोजगार मंत्रालय, भारत सरकार) EMPLOYEES' STATE INSURANCE CORPORATION HOSPITAL (Ministry of Labour & Employment, Govt. of India) SURVEY. NO. 690 BIBVEWADI PUNE-37 सर्वे. नं. ६९० बिबवेवाडी पुणे-३७ Email Id: ms-bibvewadi.pune@esic.nic.in Telephone No. : 020-24212818</p>	
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Re-E-Tender No.01/2019

Date:06-02-2019

To,
M/s _____

Subject: -E- Tender for supply of Ophthalmic Equipment's to ESIC Hospital, Bibvewadi, Pune-37.

Sir,

E-Tenders under Two Bid system through 'e' procurement solution are invited from "Manufacturers/Authorized dealers" by Medical Superintendent ESIC Hospital, Bibvewadi, Pune-37, for the supply of the following Ophthalmic Equipment's to ESIC Hospital, Bibvewadi, Pune -37.

S.NO.	NAME OF THE ITEM	QTY	EMD
1	Slit Lamp with Applanation Tonometer	1	25000

E-TENDER SCHEDULE

On line Availability of E-Tender documents	From 06/02/2019 to 06/03/2019 upto 11.00 am
Prebid Meeting	15/02/2019 at 11.00 am
Last date & Time of submission of E-Tender	06/03/2019 up to 11.00 am
Last date & Time of submission of Sealed Envelope containing Earnest Money Deposit, Undertaking on Rs. 100/- stamp paper as per ANNEXURE II , in Tender Box kept in Admin. Block of Hospital	06/03/2019 up to 11.00 am
Opening of On line Technical Bid & Tender Box	06/03/2019 at 11.30am
Opening of On line Financial Bid	Will be communicated over Phone/ Email/ SMS to Technically qualified bidders

Note- In case it happens to be a declared holiday then tenders shall be opened on the next working day at the same time.

Tender documents are available on line from From 06/02/2019 to 06/03/2019 upto 11.00 am at <https://esictenders.eproc.in>.

Bidders have to deposit the Earnest Money Deposit for each quoted equipment's separately as per details above in the form of Demand Draft / Pay Order drawn on any Nationalized Bank in favour of ESIC Fund Account No 1, ESIC Hospital Bibvewadi, Payable at Pune.

Bidders are free to quote for any one or more items.

The interested tenderers should upload their technical & financial bids along with scanned copies of all relevant certificates, documents, etc., duly signed on the e-tender portal <https://esictenders.eproc.in>. latest by 06/03/2019 up to 11.00am.

In addition to E-Tender which has to be filed online, The Bidders are also required to submit sealed envelope super-scribed "TENDER FOR OPHTHALMIC EQUIPMENT" along with Name and Address of Bidder containing the hardcopy of the following documents:

- 1) Earnest Money Deposit for each quoted equipment's separately in the form of Demand Draft / Pay Order in favour of ESIC Fund Account No 1, ESIC Hospital Bibvewadi, Payable at Pune
- 2) Undertaking on Rs. 100/- stamp paper as per ANNEXURE II duly filled & signed.

and Sealed Envelope containing above documents should be dropped in the Tender Box kept in Admin. Block of ESIC HOSPITAL BIBVEWADI PUNE on or before closing date and time. ie 06/03/2019 up to 11.00am..

The technical bids will be opened online on 06/03/2019 at 11.30 am.

Tender box will also be opened on 06/03/2019 at 11.30 am.

Bidders or their authorized representative (with authority letter & ID Proof) may be present if they wish to be. In case 06/03/2019 is declared a holiday, bids will be opened on next working day at the same time & venue.

If Sealed Envelope containing Hard Copies of EMD , Undertaking (Annexure-II) received late, tender will not be considered.

Proof of postage/courier won't be considered as a claim for timely submission of tender.

Bid without Earnest Money deposit will not be accepted.

Tender document is also available for viewing on the website of Employees' State Insurance Corporation i.e., www.esic.nic.in

Any corrigendum to this letter will be notified through the aforesaid website

Medical Superintendent reserves the right to enhance or reduce the quantity or to decide not to purchase any tendered item, to accept any tender in full or in part, to reject any or all tenders at any time without assigning any reason thereof.

Please note that Tender not accompanied with requisite earnest money deposit (EMD) will be rejected outright without assigning any reason or entertaining any correspondence.

The earnest money of unsuccessful bidders will be refunded, without accrual of any interest, in due course of time, as per official convenience.

Pre Bid Meeting: A pre bid meeting shall be held on 15.02.2019 at 11:00am at Administration Hall of ESIC Hospital Bibvewadi,Pune to clarify issues connected with the tender. Prospective bidders are invited to attend.

E-Tender documents is also available for viewing on the tenders link of the websites of ESIC i.e. www.esic.nic.in and <https://esictenders.eproc.in>. Any corrigendum to this letter will be notified through the aforesaid website

Tender form along with List of Terms and Conditions is enclosed.

Medical Superintendent

 <p>क. रा. बी. नि. E S I C</p>	<p>कर्मचारी राज्य बीमा निगम अस्पताल (श्रम एवं रोजगार मंत्रालय, भारत सरकार) EMPLOYEES' STATE INSURANCE CORPORATION HOSPITAL (Ministry of Labour & Employment, Govt. of India) SURVEY. NO. 690 BIBVEWADI PUNE-37 सर्वे. नं. ६९० बिबवेवाडी पुणे-३७ Email Id: ms-bibvewadi.pune@esic.in Telephone No. : 020-24212818</p>	 <p>महिन विनय्याल जपाय्यार 1916 2016 कन्य शताब्दी तपे</p>
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(Important Instructions for Bidders regarding Online Payment)

All bidders/contractors are required to procure Class-IIIB Digital Signature Certificate (DSC) with Both DSC Components i.e. Signing & Encryption to participate in the E-Tenders.

Bidder should get registered at <https://esictenders.eproc.in>.

Bidders should add the below mentioned sites under Internet Explorer ◇ Tools ◇ Internet Options ◇ Security ◇ Trusted Sites ◇ Sites of Internet Explorer:

<https://esictenders.eproc.in>

<https://www.tpsl-india.in>

<https://www4.ipg-online.com>

Also, Bidders need to select "Use TLS 1.1 and Use TLS 1.2" under Internet Explorer ◇ Tools ◇ Internet Options ◇ Advanced Tab ◇ Security.

Bidder needs to submit Bid Processing Fee charges of Rs. 2495/- (non-refundable) in favour of M/s. C1 India Pvt. Ltd. payable at New Delhi via Online Payment Modes such as Debit Card, Credit Card or Net Banking for participating in the tender.

Bidders can contact our Helpdesk at <https://esictender.eproc.in/html/Support.asp>

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Re-E-Tender No.01/2019

Date:06-02-2019

TENDER FORM

E-Tenders under Two Bid system through 'e' procurement solution are invited from "Manufacturers/Authorized dealers" by Medical Superintendent ESIC Hospital, Bibvewadi, Pune-37, for the supply of Ophthalmic Equipments to ESIC Hospital, Bibvewadi, Pune - 37.

S.NO.	NAME OF THE ITEM	QTY	EMD(Rs.)
1	Slit Lamp with Applanation Tonometer	1	25000

Specification of Ophthalmic Equipments –As per Annexure VII

Earnest money deposit :as per details above to be submitted .

TENDER EVALUATION

Tenders evaluation will be done in two stages

1. Technical bid and
2. Price bid.

The bidders are required to submit on line Technical Bid and Financial Bid

In addition to on line submission of Technical Bid and Financial Bid , The Bidders are also required to submit **sealed envelope superscribed "TENDER FOR OPHTHALMIC EQUIPMENTS "** along with Name and Address of Bidder containing the hardcopy of the following documents:

- 1) **Earnest Money Deposit** as per details above to be submitted separately for each equipment's in the form of Demand Draft / Pay Order drawn on any Nationalized Bank in favour of ESIC Fund Account No 1, ESIC Hospital Bibvewadi, Payable at Pune
- 2) **Undertaking** on Rs. 100/- stamp paper as per ANNEXURE II duly filled & signed.

and Sealed Envelope containing above documents should be dropped in the Tender Box kept in Admin. Block of ESIC HOSPITAL BIBVEWADI PUNE on or before closing date and time of tender. ie 06/03/2019 up to 11.00am

TECHNICAL BID (ONLINE):-

Bidders should filled online Bidders profile as per **Annexure-I** & Details of Items Quoted as per **Annexure-VIII**

& Also Bidder should upload the scanned copies of the following documents.

SR NO	PARTICULARS
1	Tender document duly signed& stamped by the authorized signatory of bidder
2	Undertaking on Rs. 100 Stamp Paper as per Annexure- II duly filled and signed
3	Authorization letter for signing the Tender Document as per Annexure III
4	Authorisation certificate from manufacturer as per ANNEXURE- IV duly filled & Signed in case bid is submitted by Authorized Dealer Manufacturers offer letter as per ANNEXURE- V duly filled & Signed in case bid is submitted by Manufacturer
5	Self attested photocopy of latest and valid GST registration certificate
6	GST Receipt (Most recent- Not older than 3 months)
7	INCOME TAX RETURNS for the years 1. Financial year 2014-2015(Assessment Yr.2015-16) 2.Financial year 2015-16(Assessment Yr.2016-17) 3.Financial year 2016-2017(Assessment Yr.2017-18)

8	ANNEXURE VI (Experience of Bidder) duly filled & Signed with copy of purchase order must be attached
9	Satisfactory performance certificate of the quoted equipment from existing users (at least 1 user) as per Annexure-IX must be uploaded .
10	ANNEXURE VIII duly filled & Signed with Literature and catalogues in support of items quoted & Documentary proof of valid address for service centre must be enclosed. copy of US(FDA)/European CE Certificate must be submitted.

Please Note that Tender shall be liable to be rejected if legible scanned copies of documents listed above are not uploaded in Technical bid.

Tender found deficient in any of above shall be rejected outright.

Online Technical bid of the bidders & Tender box will be opened at the prescribed time and date as indicated in tender document. During the Technical bid opening, the tender opening official(s) will examine the salient features of the tenders like brief description of the Items offered, Earnest Money Deposit and any other special features of the tenders, as deemed fit by the tender opening official(s) & Technical bid shall be referred to Technical Evaluation Committee for technical evaluation.

The Committee constituted by the Medical Superintendent will technically evaluate the items on the basis of technical bid submitted & specification as per **Annexure VII, make/brand quoted; literature enclosed, sample submitted** wherever asked, the authority from manufacturer for the item, other documents as per technical bid etc. The items accepted technically will only be considered for price evaluation (price bid). Price should not be quoted with technical bid; otherwise the tender will be rejected without any correspondence.

Online Price Bid of only those bidders who qualify on basis of Technical Bid (after evaluation by Technical evaluation committee) will be opened by purchase committee for further action

Bidders who qualify on basis of Technical Bid (after evaluation by Technical evaluation committee) will be informed through Mobile/email about the date and time of opening of online Financial Bids.

**PRICE BID (ON LINE): PRICE BID OF QUOTED ITEM AS PER ANNEXURE- A
PRICE SHOULD BE FILLED ONLINE**

Bidder should **filled online their quoted rates as per Annexure-A**

Also Bidder should filled online the list of Accessories & consumables, Spare along with their Lump sum unit cost as per Annexure B & Annexure C However price Quoted in Annexure B & Annexure-C will not be considered for awarding the contract

1. The price for equipment should indicate all inclusive lump sum price offered for equipment including cost of the equipment, freight, insurance, transit insurance, packing, forwarding, GST etc. and including charges for installation and commissioning with men and material required for the same and including charges for the quoted warranty period. The all inclusive lump sum price should be on F.O.R. The all inclusive lump sum price may be accompanied by a separate statement indicating a clear break up of lump sum prices, of the various components constituting it along with values/amount indicated against each of the components adding to arrive at all inclusive lump sum price. No other charges in addition will be payable on any account over and above the lump sum price quoted. Offers with price variation clause will not be accepted. The rates quoted in ambiguous terms such as "Freight on actual basis" or "Taxes as applicable extra" or "Packing forwarding extra" will render the bid liable for rejection irrespective of its gradation in respect of lump sum prices quoted.

2. Bidders shall indicate the actual rate of Octroi, GST etc. which will be payable since this hospital does not provide certificates like Octroi exemption, Form D or Form C etc.

3. No item should be quoted with price more than the M.R.P. or prevalent market rate.

4. Price quoted should be in Indian currency.

5. Bidders should quote **their rates separately for each item** in the format given below: **(ANNEXURE-A)**

A	B	C	D	E	F	G	H	I	J	K	L	M
Sr. No.	Name of Item	Model of Quoted Item	Manufacturer of Quoted Item	Rate Per Unit Without Tax	Taxes as or if applicable	LUMP SUM UNIT COST (Inclusive of all taxes)	CMC per Unit With Taxes for First Year After Warranty	CMC per Unit With Taxes for Second Year After Warranty	CMC per Unit With Taxes for Third Year After Warranty	CMC per Unit With Taxes for Fourth Year After Warranty	CMC per Unit With Taxes for Fifth Year After Warranty	FOR RANKING PURPOSE LUMP SUM UNIT COST + FIVE YEAR CMC (G+H+I+J+K+L)
1												

6. The cost of the CMC for complete equipment year wise for 05 yrs after **3 years warranty** should be given in the Price Bid only. Comprehensive Maintenance Contract rates should be quoted inclusive of all spares and labour charges along with taxes applicable on the date of tender opening. The tender will not be considered without offer of CMC. Conditional CMC will not be accepted.

For awarding of contract CMC cost will be considered.

7. **The List & cost of all accessories and consumables as on date** should be separately quoted and filled online in the price bid, price of same will not be considered for awarding the contract. **(ANNEXURE-B)**

Sr. No	Name of Accessories/Consumables	Packaging Unit	Lump Sum Unit Cost (INR)

8. **The List & cost of all spares** should be separately quoted and filled online in the price bid, price of same will not be considered for awarding the contract. **(ANNEXURE-C)**

Sr.No	Name of Spares	Packaging Unit	Lump Sum Unit Cost (INR)

GENERAL TERMS AND CONDITIONS

1. The term corporation shall mean the ESI Corporation.
2. The term Medical Superintendent means Medical Superintendent, ESIC Hospital, Bibvewadi, Pune-37 and any other officer in authority for the time being in administration of ESI Corporation.
3. Tender forms are not transferable.
4. The Firm should be a manufacturing firm or the dealer authorized by the manufacturing firm is allowed to participate, but both Manufacturer & Dealer cannot bid simultaneously for the same item/product in the same tender. One dealer cannot represent two manufacturers or quote on their behalf in a particular tender for particular item. Also one manufacturer cannot authorize two bidders on their behalf.
5. The Bidder should have supplied same make/model equipment to Government Institutes/Private Hospitals, copy of purchase order & performance certificate signed by user to be attached.
6. Bidder should have the **Service Centre at Pune or Mumbai** with 24 hours down time response.
7. The tender documents should be typed. Any cutting/overwriting must be signed by the Bidder, otherwise the rates in r/o that particular item may not be considered.
8. Each and every page of the tender must be numbered and signed by the Bidder along with seal of the firm.
9. No Price should be quoted in Technical Bid. If any price is quoted in this bid, the entire tender will be treated as invalid.
10. The tender shall remain valid for acceptance for a minimum period of 120 days after the date of opening of technical bid.
11. In the event of Non-acceptance of the offer by the successful bidders, EMD paid by the bidder will be forfeited.
12. **THE RATES QUOTED WILL BE TAKEN AS FIRM AND FINAL.**
13. The Quoted rates will be **valid for a period of one year** from the date of acceptance of the tender Bid.
14. Demonstration is essential before opening of price bid. Unsatisfactory performance at demonstration will disqualify the bidder. The Demonstration should be done if possible at ESIC Hospital, Bibvewadi. In case of heavy bulky equipment, the demonstration may be arranged at a place where the equipment is already functioning as per convenience of concerned technical evaluation committee at

the cost of bidder in **Pune** within **One Week** as and when asked for. Non-demonstration will form the ground for non acceptance of bid.

15. Successful bidders will have to deposit **Security Deposit @ 10% of purchase order value in the form of Demand Draft/Pay order within 15 days from the date of issue of the Purchase Order**. The EMD will be refunded after receipt of security deposit. Security deposit will be released only after completion of warranty period without accrual of any interest & submission of bank guarantee (equal to 2.5% of cost of equipment /order value) valid for two months beyond CMC period for CMC security, CMC contract form and satisfactory performance certificate issued from the concerned department. **In case of non submission of bank guarantee for CMC security & CMC contract form, security deposit will not be released.**
16. **Failure to pay the security deposit** before the prescribed date would be deemed as the non-acceptance of the offer made by this hospital and it will be cancelled automatically without any further correspondence on the subject. In such an event the Earnest Money Deposit paid by the bidders will be forfeited.
17. **Warranty:** The bidder will give a comprehensive warranty (**warranty will start from date mentioned in Final Acceptance Certificate**) for trouble free functioning of 36 months including spares and labour charges. **There will be 95 % uptime warranty during warranty/guarantee period on 24(hrs) x 7 (days) x 365 (days) basis with penalty to extend the warranty period by double the downtime period.** During warranty period, the supplier should provide at least **1(One) preventive maintenance visit per 6 months & unlimited breakdown calls as and when required**. The firm should ensure to keep the equipment in working order throughout the year. In case of breakdown, the complaint is to be attended within 24 hours and fault to be rectified within 48 hours. In case, if the equipment cannot be made fully functional within 48 hours of breakdown call, the firm should provide standby equipment of same make & model within next 3 days (Total Downtime period will not exceed 5 days). Firms violating the warranty clause are liable for proceeding of black-listing & security deposit will be forfeited.
18. **Comprehensive Maintenance Contract (CMC- Includes Spares and labour Charges):** After successful completion of warranty, the firm has to provide CMC for a minimum period of five years. **There will be 95 % uptime during CMC period on 24(hrs) x 7 (days) x 365 (days) basis with penalty to extend the CMC period by double the downtime period.** During CMC period, the supplier should provide at least **1(One) preventive maintenance visit per 6 months & unlimited breakdown calls as and when required**. The firm should ensure to keep the equipment in working order throughout the year. In case of breakdown, the complaint is to be attended within 24 hours and fault to be rectified within 48 hours. In case, if the equipment cannot be made fully functional within 48 hours of breakdown call, the firm should provide standby equipment of same make & model within next 3 days (Total Downtime period will not exceed 5 days). If the equipment needs **software update**, the firm shall be responsible for the same as a part of CMC. Failure of the above terms, by the supplier will lead to forfeiture of Bank Guarantee for CMC.
19. After successful completion of warranty period, the firm has to submit the signed contract form for CMC as per **Annexure X on Rs.100/- stamp paper** & bank guarantee (equal to 2.5 % of cost of equipment/order value) for CMC security as per **Annexure XI** valid for two months beyond expiry of entire CMC period of five years. Security deposit will only be returned after the receipt of contract form & bank guarantee for CMC. CMC amount for each year will be paid in 2 equal instalments, i.e. on six monthly basis on satisfactory completion of six months duly certified by HOD of concerned department, along with service reports.
20. The Bidders are bound to supply the stores during the validity of tender at the approved rates.
21. Mere approval of the tenders shall not bind the Medical Superintendent to necessarily procure the items.
22. The firms may be asked to deliver the goods instalments/fixed interval against the order of the full year. In case firm fails to deliver the particular instalments at its scheduled time, this office reserves the right to procure the item in the open market and the excess expenditure incurred will have to be borne by the company.
23. **The bidder should quote their latest Model which meet or exceed the tender specifications.**
24. EMD shall be released to unsuccessful bidders after completion of tender process, subject to compliance of all other terms & conditions of Tender. The EMD shall not carry any interest.
25. **Jurisdiction:** All questions, disputes or differences arising under or out of or in connection with the Tender, shall be settled by sole Arbitration of Medical Superintendent or a person appointed by him on his behalf.

TERMS AND CONDITIONS OF THE SUPPLY ORDERS / DELIVERY

1. The delivery of the goods has to be made to the hospital strictly in accordance with the supply order & with the approved specification.

CONSIGNEE/DELIVERY ADDRESS

ESIC HOSPITAL, BIBVEWADI, PUNE, MAHARASHTRA-411037

TELE- 0202412818

EMAIL:-ms-bibvewadi.pune@esic.in

2. The supplies have to be made within **six weeks (06 WEEKS)** from the date of dispatch of the supply / purchase order, failing which penalty will be imposed as per rule or cancellation of order and the Earnest Money will be forfeited. However, in exceptional circumstances and on written request, the extension of the date of supply may be considered at the discretion of Medical Superintendent. For imported items the delivery period shall be up to 90 days. In case the items are urgently required, the firms will have to supply the items on urgent basis.
3. **Penalty Clause:**
 - A) FOR DELAYED SUPPLY: A penalty of **5%** of the value of order per week or a part of a week, will be imposed subject to maximum of **10%** of the value of order.
 - B) FOR NON -SUPPLY: EMD of the firm will be forfeited and necessary action will be initiated.
4. Supplier must ensure that challan in triplicate copies is submitted to the hospital along with the supplies. The number and date of delivery challan must be indicated in the BILL.
5. Triplicate bills duly, pre receipted on appropriate revenue stamp affixed to be submitted in the name of the Medical Superintendent.
6. The bill should be in printed form having printed bill number, VAT/CST/TIN Number as well as D.L. No. (Where ever applicable).
7. **Inspection and Rejection:** The acceptance of the supplied items will be subject to the satisfaction and verification report by the Technical Evaluation Committee which will inspect the items to determine whether these are according to the specifications and sample approved by the committee. The committee will have full authority to accept/reject any items based on their evaluation.
8. In the event of the Technical Evaluation Committee feeling the necessity to conduct tests of the supplied items, the Contractor shall pay all costs connected with such tests provided without extra charges, all materials, tools labour and assistance of every kind which the Technical Evaluation Committee may consider necessary for any test / examination other than special and independent tests, which it shall require and shall pay all costs for these facilities (in regard to which the Technical Evaluation Committee will be the sole judge) for making the tests, the contractor shall also bear the cost of carrying out such tests elsewhere.
9. If the stores or material fail in test, and the consignment is rejected the quantity expended in test will be treated as not having been delivered.
10. If any items are rejected then without prejudice to the foregoing provision the Medical Superintendent shall be at liberty to:
 - i) Allow the contractor to resubmit items in replacement of those rejected within time specified by the Medical Superintendent or the replacement without being entitled to any extra payment,
 - ii) Buy the quantity of the items rejected or others of similar nature elsewhere at the risk and cost of the contractor without affecting the contractor's liability as regards supply of any further consignments due under the contract.
 - iii) Terminate the contract and recover from the contractor the loss, the Medical Superintendent thereby incurs.
11. **Removal of rejections:** Any stores submitted for inspection and rejected by the Technical Evaluation Committee must be removed by the contractor within fourteen days from the date of receipt of intimation of rejection and it shall be the duty of the contractor to remove them accordingly. Such rejected stores shall be at the Contractors risk from the re-mentioned time, the Medical Superintendent shall have the right either to return the rejected stores at the contractor's risk in such mode of transport as the Medical Superintendent may select or to dispose off such stores as he thinks fit at the contractor's risk and on his account and to retain such portion of the proceeds as may be necessary to cover any loss or

expenses incurred by or on the behalf of the Medical Superintendent in connection with the said sale. Freight to destination shall be recoverable from the contractor at the Public Tariff Rate.

12. Warranty Certificate must be provided, at the time of supply.
13. In case it is a computer-generated bill, it must have the seal of the firm affixed on it.
14. The bidder should install the furniture in the concerned department of the hospital, give demonstration free of cost and train the staff of the department.

PAYMENTS

Payments will be made only after the receipt of the items in good condition as per specification against the supply order and satisfactory inspection, demonstration and functioning and submission of the **Final Acceptance Certificate**. No advance payment will be made. Payment will be made in shape of ECS/RTGS directly into the bank Account of Tenderer Hence the Tenderer is requested to submit the copy of bidders profile containing bank details duly filled & submit along with bills.

EXCLUSIVE RIGHT OF MEDICAL SUPERINTENDENT

Medical Superintendent ESIC Hospital, Bibvewadi, Pune-37 has the full and exclusive right to enhance or reduce the quantity or to decide not to purchase any tendered items, to accept any tender in full or in part, to place order on one or more firms ,to reject any or all the tenders without assigning any reasons thereof. No enquiries, verbal or written shall be entertained in respect of acceptance/ rejection of the tender.

MEDICAL SUPERINTENDENT

Annexure I (Bidder's profile)

- 1 NAME OF FIRM AND TYPE OF FIRM
- 2
 - a FULL POSTAL ADDRESS
 - b CELL PHONE. NO.
 - c TELEPHONE NO.
 - d FAX NO.
 - e E-MAIL ID
- 3
 - NAME & ADDRESS OF YOUR BANKER
STATING THE NAME IN WHICH THE
ACCOUNT STANDS
 - NAME OF BANK
 - NAME OF BRANCH
 - ACCOUNT NO. &
TYPE
 - IFSC CODE NO.
 - MICR NO.
- 4 ARE YOU IN THE LIST OF APPROVED
CONTRACTORS OF ANY OTHER
ORGANISATIONS/ INSTITUTIONS IF ANY,
GIVE DETAILS
- 5 ANY OTHER INFORMATION WHICH YOU
MAY CONSIDER NECESSARY TO FURNISH

ANNEXURE - II

FORMAT FOR UNDERTAKING

(TO BE SUBMITTED ON A NON-JUDICIAL STAMP PAPER OF Rs.100/-)

1. I, the undersigned certify that I have gone through the terms and conditions mentioned in the tender document (**Tender no.....**) and undertake to comply with them.
2. The rates quoted by me/us are valid and binding on me/us for acceptance for the period of one year from date of acceptance of tender bid.
3. I/We, hereby bind myself/ourselves to the Medical Superintendent ESIC Hospital, Bibvewadi, Pune - 37 for supply of various items for use in ESIC Hospital, Bibvewadi, Pune - 37 during the period of tender.
4. The items supplied by me/us, would be of the best quality and as per specifications.
5. Security deposit will be deposited by me/us and the same may be retained till the warranty period.
6. I/We hereby undertake to supply the items during the validity of the tender as per directions given in the supply order within the stipulated period.
7. If the hospital authorities think it necessary to change any item/items supplied by me/us found to be defective/inferior quality, the same will be replaced by me/us at no extra cost.
8. Warranty as asked for in the tender form is acceptable to us .If any item supplied by me/us is found to be defective and beyond repair during the warranty period, the same shall be replaced by me/us free of cost.
9. I/we undertake to keep the equipment in functioning state throughout the year and in case of equipment going out of order, the fault will be attended within 24 hours of lodging the complaint. I/we also undertake that I/we will be in position to give 95 % uptime warranty during warranty period on 24(hrs) x 7 (days) x 365 (days) basis with penalty to extend the warranty period by double the downtime. In case of breakdown, I/We will arrange standby equipment, if I/We fail to repair the equipment as per the terms & conditions.
10. I/We undertake to provide CMC after completion of warranty period, for complete equipment including all spares and labour charges at rates mentioned in price bid. I/we also undertake that I/we will be in position to give 95 % uptime warranty during CMC period on 24(hrs) x7(days) x365(days) basis with penalty to me to extend the CMC period by double the downtime period. In case of breakdown, I/We will arrange standby equipment, if I/We fail to repair the equipment as per the terms & conditions.
11. I/We undertake to bear the cost of testing for quality of items supplied whenever decided to do test during contract period.
12. I/We hereby undertake to recoup any loss/damages caused to health/life of patient or loss caused to the hospital authority through the use of defective materials supplied by me/us.
13. I/We hereby undertake to pay penalty as per terms and condition for delayed supplies
14. I/we understand that security deposit submitted is likely to be forfeited in the event of lapse on my/our part to comply with the terms and conditions of the tender
15. It is certified that rate quoted by me/us are not higher than the MRP/Prevailing market rate.
16. It is certified that the quoted items have not been and are not being supplied to any other organization at a rate lower than being quoted here.
17. I/We agree to accept the bill to be paid by the purchaser after completion of all formalities and should any amount of bill found to have been overpaid, the amount shall be refunded by me/us.
18. My/our firm has not been blacklisted by any other Govt. Institution/ Organization during the last three years.
19. I/we understand that Medical Superintendent has the right to accept or reject any or all the tenders without assigning any reasons (s) thereof.
20. The decision of the Medical Superintendent ESIC Hospital, Bibvewadi will be final and binding upon me/us.
21. I undertake, that I am the proprietor /partner/authorized signatory of M/S _____ my/our firm has not been declared defaulter by any govt. agency and that no case of any nature i.e. CBI, Criminal/Income Tax/ Sales Tax/ Blacklisting is pending against my/our firm.

Signature of Bidder

(Name of Bidder)

With seal of firm

Place.....

Date

Affirmation

I pledge and solemnly affirm that the information submitted in tender documents is true to the best of my knowledge and belief. I further pledge and solemnly affirm that nothing has been concealed by me and if anything adverse comes to the notice of purchaser during the validity of tender period Medical Superintendent ESIC Hospital Bibvewadi, Pune - 37, will have full authority to take appropriate action as he/she may deem fit.

Place

Date.....

With seal of firm

Signature of Bidder

(Name of Bidder)

ANNEXURE III

(To be submitted on firms letter head.)

FORMAT – AUTHORIZATION FOR SIGNING TENDER DOCUMENT.

Resolved that Shri/Smt/Ms. son/daughter/wife of
..... residing----- at
..... holding the post of, is
hereby authorised to sign the tender documents, and participate in the tender process for
invited by Medical Superintendent, ESIC Hospital Bibvewadi, Pune -37.

Signature of Authorised Person: _____

Designation: _____

Signature of person/persons giving authorization

Designation

Date

Note:

- 1) In case the bidder is the company as defined and registered under companies act, 1956 and/or 2013, a board resolution authorising the person of company to sign the tender document and to participate in tender process should be submitted.
- 2) In case the bidder is a proprietor, he/she should sign the tender document.
- 3) In case the bidder is partnership firm, tender document should be signed by the partner, who is duly authorised as per partnership deed to sign and participate in tenders.
- 4) If the bidder himself/herself is not attending the opening of tender, he should submit authority letter, authorising his/her representative to attend the same.

Annexure-IV

AUTHORIZATION CERTIFICATE

To,
Medical Superintendent,
ESIC Hospital, Bibvewadi, Pune – 37.

Dear Sir/Madam,

Tender No:

Name of Item:

1. We (Name of the OEM) are the original manufacturers of the above equipment/plant/medical furniture having registered office at (Full address with telephone number/fax number & email ID and website), having factories at _____ and _____, do hereby authorize M/s. _____ (Name and address of tenderer) to submit tenders, and subsequently negotiate and sign the contract with you against the above tender no. _____.
2. No company or firm or individual other than M/s. _____ are authorized to bid, negotiate and conclude the contract in regard to this business against this specific tender.
3. We also hereby undertake to provide warranty & CMC for 5 years as agreed by the tenderer in the event the tenderer is changed as the dealers or the tenderer fails to provide satisfactory after sales and service during the said period of Comprehensive Warranty & CMC and to supply all the spares/reagents/consumables during the said period.
4. We also confirm that the spares & any other miscellaneous items (As applicable) of the equipment quoted will be freely available for at least five years after expiry of Warranty period.
5. We also hereby declare that we have the capacity to manufacture and supply, install and commission the quantity of the equipments tendered within the stipulated time.
6. We also confirm that the price quoted by our agent shall not exceed than that which we would have quoted directly

Yours faithfully,

Signature & Name of manufacturer with address and seal

Signature & Name of tenderer/bidder(Authorised dealer) with address and seal

NOTE: This letter of authorization should be on the **letter head of the manufacturing concern** and should be signed by a person competent and having the Authorization to issue said certificate on behalf of the manufacturing firm. **The said certificate should also bear the signature of participating bidder as a witness.**

Annexure-V

**MANUFACTURER'S OFFER FORM
(To be submitted by manufacturers)**

To,
Medical Superintendent,
ESIC Hospital, Bibvewadi, Pune - 37

Dear Sir/Madam,

Tender No:

Name of item:

1. We (Name of the OEM) are the original manufacturers of the above equipment having registered office at (Full address with telephone number/fax number & email ID and website), having factories at _____.
2. No company or firm or individual have been authorized to bid, negotiate and conclude the contract in regard to this business against this specific tender.
3. We hereby declare that we are willing to provide warranty & CMC for 5 years as per the terms and condition of above tender.
4. We also confirm that the spares & any other miscellaneous items (As applicable) of the medical equipment quoted will be freely available for at least five years after expiry of warranty period.
5. We also hereby declare that we have the capacity to manufacture and supply, install and commission the quantity of the medical equipment tendered within the stipulated time.

Yours faithfully,

Signature & Name of manufacturer with address

ANNEXURE 'VI'

Experience of Bidder **with Documentary Proof**

YEAR	Name & Address of the Purchaser with contact No.	Purchase Order No. & Date (Attach copy of Purchase Order)	Value of Purchase Order	Details of Equipment Supplied	Was the contract completed in time, if not reason for delay	Whether the Equipment supplied has been functioning satisfactorily

Authorized Signatory of the Bidder

Name-

Seal of the Firm

Note: 1 Copy of purchase order must be attached.

2 Satisfactory performance certificate of the **quoted** equipment from existing users (at least 1 user) must be attached.

3 The purchase order and experience should be in the name of bidding company and not in the name of subsidiary/associate company/group company etc.

ANNEXURE-VII

TECHNICAL SPECIFICATION OF SLIT LAMP WITH APPLANATION TONOMETER

1. Galileo convergence type binocular microscope
- 2 . Magnification upto 40X
3. Should have eye piece 12.5x
4. Should have slit width from 0 to 14 mm
5. Should have slit length upto 14mm
6. Aperture: upto 14mm
7. Slit angle: 0°to 180°
8. Should have Red-free, blue filters, Neutral Density
9. Should have good illumination using LED/ Halogen lamps& **Three Spare Lamps should be provided**
10. Should be supplied with motorized table & standard accessories
- 11.Chin rest with vertical movement
12. should have Applanation Tonometer and **One Spare Prism should be provided**
13. Should be European CE/FDA(US) certified. Copy of the certificate must be submitted in Technical Bid
14. Should provide UPS of suitable capacity
15. Warranty-3 Years
16. CMC -5 Years
17. Service centre to be based in Mumbai or Pune

**ANNEXURE VIII
(DETAILS OF ITEM QUOTED)**

Sr. No.	Name of Item as per Annexure-VII	Model of Quoted Item	Manufacturer of Quoted Item	Specification of Quoted item	Deviation from Required Specifications(as per Annexure-VII) if any
1					
2					

Please note that Items Quoted should be as per Specifications given in Annexure-VII

1. Literature and catalogues in support of items quoted must be uploaded.
2. Documentary proof of valid address for service centre must be uploaded.

ANNEXURE IX

**SATISFACTORY PERFORMANCE CERTIFICATE
(On Letter Head of Hospital/ Institution)**

Certified that M/S ----- has supplied the Medical Furniture (model/make) which has been functioning satisfactorily at----- department of this Hospital/Institution since -----
It is also certified that after sales service provided by the M/S ----- have been satisfactory.

Date_____

Name
Designation with Stamp/Seal
(HOD/MS/CEO of Hospital/Institute)

Annexure –X

CONTRACT FORM FOR ANNUAL COMPREHENSIVE MAINTENANCE CONTRACT

(On Rs.100/- stamp paper)

Annual CM Contract No- _____ date (Letter no. & date of approval of CMC) **Between**

Medical Superintendent,

ESIC Hospital Bibvewadi, Pune

And

(Name & Address of the Supplier)

Ref: Supply Order No _____ dated _____

The Contract of Annual Comprehensive Maintenance is hereby concluded as under: -

Name of Item	Quantity supplied (No's)	Annual comprehensive maintenance contract cost for each unit year wise (Rs)					Total Annual comprehensive maintenance contract cost for 5 years per unit
		1 st year	2 nd year	3 rd year	4 th year	5 th year	

Total value (in figure) _____ (In words) _____

- The cost of Annual Comprehensive Maintenance Contract (CMC) which includes preventive maintenance, labour and spares, after satisfactory completion of Warranty period is quoted for next 5 years as contained in the above referred contract on yearly basis for complete equipment.
- There will be 95 % uptime during CMC period on 24(hrs) x 7 (days) x 365 (days) basis with penalty to extend the CMC period by double the downtime period. During CMC period, the supplier should provide at least 1(One) preventive maintenance visit per 6 months & unlimited breakdown calls as and when required. The firm should ensure to keep the equipment in working order throughout the year. In case of breakdown, the complaint is to be attended within 24 hours and fault to be rectified within 48 hours. In case, if the equipment cannot be made fully functional within 48 hours of breakdown call, the firm should provide standby equipment of same make & model within next 3 days (Total Downtime period will not exceed 5 days). If the equipment needs software update & calibration, the firm shall be responsible for the same as a part of CMC. QA & QC test report to be provided every 2 years during the entire CMC period. Failure of the above terms, by the supplier will lead to forfeiture of Bank Gurantee for CMC.

3. CMC Details

CMC commencement Date	
CMC Expiry date	

4. Bank Guarantee details -

Bank Guarantee No	
-------------------	--

Amount	
Valid till	
Name and address of Issuing Bank	

5. **Payment terms: The payment of Annual CMC will be made against the bills raised to the consignee by the supplier on six monthly basis after satisfactory completion of said period, duly certified by the HOD/In charge of concerned department along with service reports. The payment will be made in Indian Rupees.**

(Signature, name and address of the supplier's executive
duly authorised to sign on behalf of the supplier)

For and on behalf of _____

(Name and address of the supplier)

(Seal of the supplier)

Date: _____

Place: _____

Signature

Medical Superintendent,

ESIC Hospital Bibvewadi, Pune

Encl:-

1. **List & cost of Spares on the letter head of Bidder signed by authorised signatory.**
2. **List & Cost of Accessories on the letter head of Bidder signed by authorised signatory.**
3. **List & Cost of Consumables on the letter head of Bidder signed by authorised signatory.**

ANNEXURE XI

BANK GUARANTEE FORM FOR CMC SECURITY

To

Medical Superintendent,
ESIC Hospital Bibvewadi, Pune

WHEREAS _____ (Name and address of the supplier) (Hereinafter called the supplier) has undertaken, in pursuance of contract No-----

to supply -----(herein after called "The contract").

AND WHEREAS it has been stipulated by you in the said contract that the supplier shall furnish you with a bank guarantee by a scheduled commercial bank recognized by you for the sum specified therein as security for compliance with obligations in accordance with the contract;

AND WHEREAS we have agreed to give the supplier such a bank guarantee ;

NOW THEREFORE we hereby affirm that we are guarantors and responsible to you, on behalf of the supplier, up to a total of **Rs.**(**Rupees**),and we undertake to pay you , upon your first written demand declaring the supplier to be in default under control and without cavil or argument, any sum or sums within the limits of (amount of guarantee) as aforesaid, without your needing to prove or to show grounds or reasons for your demand or the sum specified therein.

We hereby waive the necessity of your demanding the said debt from the supplier before presenting us with the demand.

We further agree that no change or addition to or other modification of the terms of the contract to be performed there under or of any of the contract documents which may be made between you and the supplier shall in any way release us from any liability under this guarantee and we hereby waive notice of any such change, addition or modification.

This guarantee shall be valid up to 62 (Sixty two) months from the date of start of CMC _____ (indicate date).

Bank Gurantee No:

(Signature with date of the authorized officer of the bank)

.....

(Name & designation of officer)

(Seal, Name & Address of the bank along with e-mail address of the issuing officer.)

 <p>क. रा. बी. नि. E S I C</p>	<p>कर्मचारी राज्य बीमा निगम अस्पताल (श्रम एवं रोजगार मंत्रालय, भारत सरकार) EMPLOYEES' STATE INSURANCE CORPORATION HOSPITAL (Ministry of Labour & Employment, Govt. of India) SURVEY. NO. 690 BIBVEWADI PUNE-37 सर्वे. नं. ६९० बिबवेवाडी पुणे-३७ Email Id: ms-bibvewadi.pune@esic.in Telephone No. : 020-24212818</p>	
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ANNEXURE-XII

Final Acceptance Certificate

(To be jointly filled by Head/Incharge of the user department, Representative of Medical Superintendent & Tenderer)

No. _____ Date _____

To
M/s _____

Subject: Certificate of acceptance of _____

This is to certify that the Items as detailed below have been received in good conditions along with all the standard and special accessories and installed and necessary training to operate the same has been provided, in accordance with the contract/ specification.

1. Purchase Order No _____ dated _____
2. Receipt/ Challan no _____ dated _____
3. Description of the Items

Sr. No	Description/Name of Item (Accessories) With serial number.	Qty Supplied	Warranty for 3 years Yes/No

4. Remarks (if any): _____
5. Warranty (3 years from date of FAC): From _____ to _____

Signature _____
Name _____
Designation with Stamp/Seal _____

Signature _____
Name _____
Designation with Stamp/Seal _____

(Representative of Medical Superintendent)

(Head/Incharge of the user department)

Signature


Name

Address

(Of the supplier's executive duly authorised to sign on behalf of the supplier with seal of the tenderer)

STICKER

Format of Sticker – 5 stickers to be provided, 1 to be pasted on the equipment

	ESIC HOSPITAL, BIBVEWADI, PUNE		
Name of Equipment-			
Tender No -		P.O No -	
Location -		Serial No -	
Equip Id no -		FAC Date -	
Warranty-	TO	AMC/CMC -	TO
Service Centre Contact Nos-			
Email -			