

Ministry of Labour & Employment, Government of India		
 सत्यमेव जयते	कर्मचारी राज्य बीमा निगम आदर्श चिकित्सालय नन्दा नगर इंदौर Employees' State Insurance Corporation Model Hospital & Occupational Disease Centre Nanda-Nagar, Indore- 452 011 Tele-0731-2557656,2559080, Fax-0731-2559080 Website: www.esic.nic.in, www.esichospitals.gov.in, www.esic.in /E-Mail: ms-indore@esic.in	

ATC

Two Bid E-Tender for “Empanelment of Local Chemist” for ESIC Model Hospital & ODC Nanda Nagar Indore (M.P.) for a period of one (01) year

E-Tenders in prescribed form, under two Bid system, are invited by the Medical Superintendent, ESIC Model Hospital & ODC Nanda Nagar Indore (M.P.) on GeM Portal, for the supply of **Allopathic Medicines, surgical consumables and laboratory items** for items which are not available (NA) or not supplied by the suppliers (Rate Contract/GeM).

Table:1

S. No.	Name of the Contract	Estimated Value
01	Empanelment of Local Chemist For Allopathic Medicines, surgical consumables and laboratory items.	Rs. 1, 13, 38,548.00 (Rupees One Crore Thirteen Lakh Thirty Eight Thousand Five Hundred Forty Eight Only) Based On MRP.

Medical Superintendent
ESIC Model Hospital
Nanda Nagar, Indore.

Ministry of Labour & Employment, Government of India



कर्मचारी राज्य बीमा निगम आदर्श चिकित्सालय नन्दा नगर इंदौर
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 Centre
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 Website: www.esic.nic.in, www.esichospitals.gov.in, www.esic.in /E-Mail: ms-indore@esic.in



Schedule of BID	As per GeM Document
Date and Time for Opening of Technical Bids	As per GeM Document.
Bid Security	Rs.3,40,000.00
Performance Security Deposit (After finalization of tender in the form of Demand Draft/Banker's Cheque (5%of contract value)	5% of contract value

List of Annexure in the Bid Document

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Annexure I

ADDITIONAL TERMS & CONDITIONS

1. Tenderer are requested that before quoting their rates or uploading tender, the tender document may please be read thoroughly (line by line) otherwise purchaser will not be held responsible for any error / oversight by the tenderer.

2. For Submitting Bid security and Performance Bank Guarantee all payments shall be made in the form of Demand **Draft/Banker's cheque in favor of ESI FUND A/C No.1 payable at Indore Madhya Pradesh. No other form of payment will be accepted by this office.**

3. (A) You are requested to get participated in the Bid through GeM Portal for "Empanelment of Local Chemist for supply of various **Allopathic Medicines, surgical consumables and laboratory items.**

(B) The rates quoted in vague, ambiguous & indefinite expressions such as "subject to immediate acceptance", "subject to prior sale", "freight on actual & exemption eligibility applicable to the Hospital & shall advise the purchaser & quote accordingly basis" or "packaging/forwarding extra" will render the bid for rejection irrespective of its gradation in r/o lump sum prices quoted. Bidders in their own interest shall ascertain the eligibility of whatsoever concession. No 'C' or 'D' form is to be issued by this office.

4. Medical Superintendent, E.S.I.C Model Hospital & ODC, Nanda Nagar, Indore M.P-452011, does not pledge himself /herself to accept the lowest or any tender and reserves the right to accept the whole or any part of the tender or portion of the quantity offered and you shall supply the same/execute the supply at the **rate quoted** by you.

5. Acceptance by the purchaser shall be communicated in due course.

6. The tenderer shall give full information as may be required in connection with the supply of Medicine to the Medical Superintendent or any other officer nominated by him/her to inspect the premises of the tenderer at all reasonable times.

7. Signing of tender-

A. The tender is liable to be rejected if complete information is not given therein or if the particulars and date (if any) asked for in the tender are not duly & fully filled in. Particular attention may be given to the dates of delivery & also to the particulars referred to in the condition of contract so as to comply with them.

B. Individuals signing tender or other documents connected with the contract must specify:

- i. Whether signing as a 'Sole proprietor' of the firm or his Attorney?
- ii. Whether signing as a 'Registered Active Partner' of the firm or his Attorney?
- iii. Whether signing for the firm 'per procreation'.

C. In the case of companies and firms registered under the Indian Companies Act, the capacity in which signing e.g. Secretary, manager, and partner etc., or their attorney must be clearly mentioned and produce copy of documents, empowering him/her to do so, if called upon to do so.

8. All tenders shall remain valid for acceptance for a period of 06 months from the date of opening of the tender or for such period as stated in special terms & conditions.

9. Quotation qualified by such vague and indefinite expression such as “subject to immediate acceptance”, “**Subject to prior sale**” etc., or any condition given on tender will not be considered.

10. Security Deposit: On acceptance of the tender, within the period specified by the Medical Superintendent, the supplier must deposit **5% of contract value (in Indian currency)** against the contract as security deposit/performance security. The security deposit shall be in the form of **demand draft/banker’s cheque** in the name of **ESI Fund Account No.1 payable at Indore Madhya Pradesh.**

11. Arbitration: -In the event of any dispute (Between the Purchaser and Tenderer) arising under contract or in regard to the interpretation of terms and conditions of the contract, decision of the Medical superintendent or any other officer nominated by his/her to act as arbitrator in the dispute, shall be final and binding on both parties of this contract. In case of disputes, all the legal matters will be settled under the jurisdiction of the courts at Indore, M.P.

12. The tenderer should submit self-attested copies of valid G.S.T.N, Drug License, PAN, TIN self-attested copies.

13. Right to Accept / Reject: - The hospital authority reserves the right to reject any or all tenders without assigning any reason whatsoever. Also, the hospital authority reserves the right to award any or part or full contract to any successful agency at its discretion & same will be binding on the tenderer.

14. Only technical bid shall be opened first & shall be referred to **Technical Evaluation Committee (TEC)**. The price bid of only those bidders whose Technical Bid is found acceptable by the Technical Evaluation Committee will be opened by **Price Evaluation Committee (PEC)** for further action.

15. Bidder must submit the following Compulsory documents in the form of prescribed annexure format mentioned below along with desired documents mentioned in tender on GeM portal for technical evaluation.

S. No.	Heading	Particulars	Page No.
1	Annexure II	Application form	7
2	Annexure III	Mandate form	8
3	Annexure IV	Experience certificate	9
4	Annexure V	Undertaking to be given on non-judicial Stamp paper of Rs.100	10-12
5	Annexure VI	Bidder Check list	13

16 (A) For all compulsory documents, please refer to Annexure- VI without which the offer is liable to be cancelled.

(B) The bidder must have a minimum experience of **Three years** in the field of local Trade of Drugs & Dressings with Government/Semi government hospitals of minimum Value of Rs. 25 lakh during last five years as on date of submission of bid. Offers only from Local Parties will be considered. Valid proof of experience certificate must be uploaded (**ANNEXURE IV**).

(C) The bidder must be in possession of valid **commercial /trade license** issued by competent authority/department and Participating bidders/ Firms will have to upload the same along with all compulsory documents as mentioned in **Annexure- VI**

(D) Valid proof of experience must be uploaded (Annexure-IV) on the letter head of Govt. Hospital duly signed and stamped by the competent authority.

(E) Participating bidder/firms must have average annual turnover of Rs. 56,00,000.00/- (Rupees Fifty Six lakh only) or more during of the last three financial years (2020-21,2021-22 and 2022-23). Participating bidders/firm will have to upload annual turnover duly certified by Chartered Accountant OR audited balance sheet, trading profit/loss statement by Chartered Accountant for last three financial years (2020-21, 2021-22 and 2022-23) in support of the annual turnover.

(F) In exercise of policy circular no. 1(2)(1)/2016-MA dated 10/03/2016 of Ministry of Micro, Small & Medium Enterprises of Government of India the following relaxation for Startups and MSE may be provided having valid registration certificate under related services submitted along with bid.

(F)1. Criteria of prior average annual turnover of Rs. 56,00,000/- may be relaxed to minimum average annual turnover of Rs. 28,00,000/- (Rupees Twenty eight lakh Only) during any two of last three financial years (2020-21,2021-22 and 2022-23). Participating bidders/ Firms will have to upload annual turnover duly certified by Chartered accountant or audited Balance Sheet, trading Profit/ Loss statement by Chartered Accountant accordingly.

(F)2. Criteria of prior experience of 3 years may be relaxed to prior experience of one year in the field of local Trade of Drugs & Dressings with Government/Semi government hospitals of minimum Value of Rs.10 lakh during last five years as on date of submission of bid. Offers only from Local Parties will be considered. Valid proof of experience certificate must be uploaded (**ANNEXURE IV**)

(G) The bidder/firms must have “No-conviction” certificate issued by State drug authorities which must be dated not more than 6 months prior to date of submission of tender by bidder/firms. Participating bidders/ Firms will have to upload “No-conviction” certificate along with all compulsory documents mentioned in **Annexure- VI**

17. The contract will be valid for a period of one year from the date of commencement of contract unless short closed before that by the Medical Superintendent, ESIC Hospital & ODC, Indore M.P, at his/her discretion. However, the contract will remain valid for an initial period of **one year** which is further extendable (as per **terms and conditions on GeM portal**).

18. ACCEPTANCE OF TENDER (PRICES): Criteria for acceptance and awarding the tender will be on fulfillment of technical conditions as well as offering of the maximum discounts on the items by the tenderer. Discounts should be quoted for following items-

i) **Allopathic Medicines, surgical consumables and laboratory items.**

19. No overwriting or correction is permitted. The Tenderer will be paid on M.R.P. less discount and no other levy/tax will be paid by this office. Tampering on the printed MRP of the Manufacturer by the Tenderer by use of stickers or any other means will not be accepted. **Quoted discount will be treated as final.**

20. (i)L-1 will be decided on the basis of maximum discount quoted by the tenderer.

(ii) In the event of two or more bidder quoting the same maximum discount, the L1 will be decided by Auto run feature of GeM .

(iii) Contract will be awarded to L1.

21. Bidders will Supply Product (Allopathic Medicines, surgical consumables and Laboratory items only those Manufacturers who have WHO GMP License, ISO Certification for packing, COA (Certificates for Analysis), COPP (Certificates of Pharmaceutical Product), FSC (free sale certificate). **Other** products will not be accepted. Repeated violation of the contract may lead to termination of the contract and forfeiture of security deposit.

22. Tenderer will indicate M.R.P., Batch number, Name of Manufacturer, Manufacturing Date and Expiry date on each challan at the time of supplying the drugs to the Hospital.

23. Only those orders duly countersigned by the MS/Store In charge of the hospital are to be accepted. A specimen signature of MS/Store in charge of the hospital will be furnished to the tenderer. In his/ her absence the signature of any other officer duly authorized by the Medical Superintendent will be furnished.

24. GENERAL INSTRUCTIONS

- Employee's state insurance corporation staff & their family members should not apply for the tender. Their tender is liable to be rejected.
- Any firm/agency debarred/black listed from ESIC institution/any government institution/any government organization anywhere in India will not be considered and the tender will be summarily rejected.
- Tenderers who do not furnish attested and stamped documents as required will not be considered.
- Any discrepancy / mistake found at any stage of the bidding process would be subjected to further correction as per the direction of the Medical Superintendent ESIC MH Indore.
- The terms and conditions are subject to any further instruction from ESIC HQ New Delhi, and any other instructions from Govt. of India as applicable on ESIC MH Indore. Decision of Medical Superintendent in this regard will be final.

ANNEXURE- II
(Application Form)
(Part of Technical Bid)

To
Medical Superintendent,
ESIC Model Hospital & ODC,
Nanda Nagar,
Indore (M.P.) - 452011.

Sub:-Empanelment of Local Supplier for supply of **Allopathic Medicines, surgical consumables and laboratory items** for the ESIC Model Hospital & ODC, Nanda Nagar, Indore at the offered discount to ESIC Hospital & ODC, Indore, for a period of one (01) years.

Sir/Madam,
My firm brief particulars are detailed below: -

Sr. No.	Particulars	Details
1.	Name of Firm	
2.	Full Postal Address	<hr/> <hr/> <hr/>
	Telephone No. (Landline)	<hr/>
	Mobile No.	<hr/>
	E-mail address	
3.	Date of establishment of firm	
4.	Are you in the list of approved chemists of any other any Organization/institute (if Yes -give details)	
5.	Are you in the list of approved chemists under MSMEs (If Yes give details-Registration/License number of relate category)	
6	Whether insured against fire, theft, burglary etc. if so, please state the amount and name of the company with policy number:	
7.	GST No. Of the firm/shop:	
8.	Valid drug license No./ Validity	
9.	Income tax /PAN No. Of the firm/shop:	
10.	Any other information which you consider necessary to furnish	

Yours faithfully,

(Signature of tenderer with stamp)
(Authorized Signatory)

ANNEXURE- III

Mandate Form
(On Letter Head of firm)

Beneficiary's customer's option to receive payment through e-payment

1. Beneficiary name
2. Beneficiary address
3. Beneficiary account no.
4. Account type (S.B. Account/Current account for cash credit) with code 10/11/13
5. 9-digit code number of the Bank & branch Appearing on the MICR cheque issued by
6. Bank name
7. Bank name, Address, Telephone no.
8. IFSC (Indian financial service code)
9. Photocopy of cancelled cheque to confirm Correctness of IFSC code and account no.

I, hereby, declare that the particulars given above are correct and complete. If the transaction is Delayed or not effected at all for reason of incomplete or incorrect information given by me as above, I would not hold the user institution responsible.

Dated _____

(_____)

Signature of the beneficiary/customer

It is certified that the particulars furnished above are correct as per our records.

Bank's stamp

Date _____

(_____)

Signature of the authorized/official

ANNEXURE- IV

**EXPERIENCE CERTIFICATE
(SHOULD BE ON THE LETTER HEAD OF GOVT. /SEMI GOVT. HOSPITAL)**

Date-

WHOM SO EVER IT MAY CONCERN

This is to certify that **M/S** _____ has provided satisfactory services to our hospital in the field of Local trade of Allopathic **Medicines, surgical consumables and laboratory items** (i.e. Supply of Allopathic drugs, dressing, disposable, surgical, and consumable and laboratory items) during the period _____ to _____ of Rs._____. Their performance during the entire period was satisfactory/good/excellent.

Signature

Name

Designation

Seal of Organization

Organization Name

ANNEXURE- V

UNDERTAKING TO BE GIVEN ON NON-JUDICIAL STAMP PAPER OF RS. -100/-

(Allopathic Medicines, surgical consumables and laboratory items)

TO:
The Medical Superintendent,
ESIC Model Hospital & ODC,
Nanda Nagar, Indore M.P

Dear Sir/Madam,

I Mr./Mrs./Miss..... authorized signatory of
M/S..... hereby undertake the following: -

1. I/We hereby offer to supply Allopathic Medicines, surgical consumables and laboratory items to your hospital as indicated in the tender document in the clause "Acceptance of Tender".
2. I/We have understood the instructions to the tenders and conditions of contract in the schedule to the Tender form and accept them.
3. I/We/ am /are fully aware of the nature of stores required and my/our offer is to supply stores strictly in accordance with the requirements.
4. I/We agree to arrange supplies in accordance with the nomenclature, specifications and packages given in the schedule to tenders.
5. I/We agree to arrange the supplies of articles as stipulated in the schedule to the tender.
6. I/We agree that the supply of aforesaid will comply with provisions of Drugs and Cosmetics Act, 1940 and rules made there under.
7. I/We agree to abide by the terms and conditions of tender and the schedule to the tender and specifically to the arbitration clause of the contract.
8. I/We undertake and agree to abide that under any circumstances if my/our License of executing business is cancelled/suspended by any authority of state govt., my contract with ESIC will deemed to have been terminated automatically and my security deposit will be forfeited accordingly.
9. I/We undertake to replace the items supplied which are near expiry and slow moving as and when asked for.
10. I/We undertake to supply the Allopathic Medicines, surgical consumables and

laboratory items manufactured by pharmaceutical companies having WHO GMP certification, ISO certification for packing, COA (Certificate of analysis), COPP (Certificate of pharmaceutical product) & FSC (Free sale certificate)

11. I/we the undersigned certified that I have gone through the terms & conditions mentioned in the tender document including Annexure and undertake to comply with them.

12. It is certified that the rates quoted by me are the LOWEST quoted for any institution/ Hospital in India.

13. I/We give the right to Medical Superintendent, ESIC Model Hospital, Nanda Nagar, Indore, M.P.-452011 to forfeit the security deposited by Me/Us, if any delay occurs on my / agents part or fails to supply the item at the appointed place & time and of the desired specifications.

14. I/we undertake that there is no case pending under Drugs and Cosmetics Act 1940, rules 1945 there under as well as Drug Price Control Order (DPCO) against me/us or my/our firm during the last three years before date of submission of bid.

15. I/we further undertake that "No-conviction" certificate submitted by me/us will be subject to satisfactory verification from issuing authority /department failing which Medical Superintendent ESIC MH Indore shall be at liberty to terminate the contract forthwith upon receipt of such information besides black listing of my firm from participating in any tender in ESIC for three years from date of blacklisting.

16. There is no Vigilance or C.B.I. case / court case pending against our firm/ company.

17. On inspection, if any article is found not as per supply order & specifications, it shall be replaced by me/us in time as asked for to prevent any inconvenience at my / our own expenses.

18. I/We undertake three years' experience certificate in Annexure- IV submitted by me if found to be false at any time during currency of contract, I give full right to Medical Superintendent to cancel my contract.

19. I/We understand that Medical Superintendent, ESIC Model Hospital, Nanda Nagar, Indore, M.P. 452011 has the right to accept/ reject any or all the tenders, without assigning any reasons thereof.

I/We upload following documents/certificates in respect of information furnished in the bid/ Performa: -

1. Application form as per **Annexure -II**.
2. Self-attested copy of valid Drug License for retail chemist as per drugs & cosmetics Act is uploaded.
3. Copy of latest GST registration certificate, PAN/TIN registration certificate.
4. Bank Mandate Form as per **Annexure -III**.

5. Annual turnover of Rs. 56,00000.00/- (Rupees Fifty Six Lakhs only) or more duly certified by Chartered Accountant OR Audited balance sheet, Trading profit/loss account and income & Expenditure statement of the firm for the last three years (i.e. 2020-21, 2021-22 and 2022-23).
6. Minimum Three years' Experience certificate issued by the Competent Authority of Government/Semi-Government Hospital in **Annexure -IV** format.
8. Undertaking to be given on Non- judicial stamp paper of Rs.100 as per **Annexure –V**.
9. Proof of address of Shop/ supply center/ firm in Indore
10. Firms registration certificate under shop's establishment act.
11. Valid Pharmacist Registration Certificate.
12. No conviction certificate issued by competent authority/department
13. Valid **commercial /trade license**
14. Bidder Check list as per **Annexure –VI**

I/we undertake that if any information is found to be false at any stage during the contract period, my/our tender/contract is liable to be rejected by the Medical Superintendent, ESIC Model Hospital, Nanda Nagar, Indore, without assigning any reason thereof.

(SIGNATURE)

(NAME & DESIGNATION OF THE TENDERER)

(SEAL OF ORGANIZATION)

Verification

I/we hereby undertake that information given above is correct to the best of my knowledge and belief and if found to be false at any stage during the contract period, my/our tender/contract is liable to be rejected by the Medical Superintendent, ESIC Model Hospital, Nanda Nagar, Indore, without assigning any reason thereof.

Signature of the Tenderer

(Signature and Seal of Notary
With full Name, Date and Stamp.)

ANNEXURE- VI
Bidder check List

Compulsory scanned copy of documents to be uploaded without which the offer is liable to be cancelled

S. No.	Description of Documents	Uploaded (Yes/No.)
1	Application form (Annexure-II)	
2	Mandate form for e-payment purpose (Annexure-III)	
3	Experience Certificate (Annexure –IV)	
4	Undertaking to be given on Non-Judicial Stamp paper of Rs. 100/- (Annexure V)	
5	Valid Drug license issued by licensing authority of State Food and Drug Administration.	
6	Valid GST Registration Certificate.	
7	Valid PAN/TIN no. Registration Certificate.	
8	Proof of Address of shop/ supply center/ firm in Indore	
9	Firm’s Registration Certificate under Shop & Establishment act	
10	Valid Pharmacist Registration Certificate	
11	No conviction certificate issued by competent authority/department	
12	7. Annual turnover of Rs.56,00,000.00/- (Rupees Fifty Six Lakhs Only) or more duly certified by Chartered Accountant OR Audited balance sheet and Trading, profit/loss account of the firm for the last three years (i.e. 2020-21, 2021-22 and 2022-23) and for MSE as specified in tender documents.	
13	valid commercial /trade license issued by competent authority/department	
14	Bidder check list (Annexure VI)	

Signature & Seal of Tenderer with Address

Corrigendum

In ATC, Point no.16(G) of Annexure I, Sr. no. 11 of Annexure VI and Sr. no. 12 of required document to be uploaded of Annexure V are stands deleted.

In place of previous required document the following clauses are incorporated:-

- 1. The acknowledgement receipt of NO Conviction Certificate application must be submitted along with Bid document if bidder dont have NO Conviction Certificate at the time of bid submission.**
- 2. The Bidder who submitted The acknowledgement receipt of NO Conviction Certificate application must submit the NO Conviction Certificate with in 15 days of Award of Contract, if the contract would be award to the bidder.**