Government of West Bengal
Office of the Deputy Director of Health Services (E&S), West Bengal.
Central Medical Stores,
141, A J C Bose Road, Kolkata – 700 014.
Phone No. (033) 2265 4418/4417/4419.
E mail: cmswbhealth@gmail.com

NOTICE INVITING E-TENDER FOR PROCUREMENT OF SURGICAL/HOSPITAL ITEMS FOR TWO YEARS FROM THE DATE OF AWARDING OF CONTRACT FOR THE YEARS 2017-19 BY THE DEPUTY DIRECTOR OF HEALTH SERVICES (E&S), CENTRAL MEDICAL STORES, KOLKATA-700 014 (Through Pre-qualification) (Submission of Bid through NIC e-tender portal)

NIT No.: HST/1P-442/95/2016/53 Dated, Kolkata: 17/08/2017

The Deputy Director of Health Services (E&S), Central Medical Stores having his office at 141, Acharya Jagadish Chandra Bose Road, Kolkata – 700 014 is inviting for e-tender on behalf of the Health & Family Welfare Department, Government of West Bengal for preparing Rate Schedule of Surgical/Hospital items and consumables for two years from the date of awarding of contract for the years 2017-19, and its extension, if required for a further period of 6 (Six) months from the Manufacturers / Direct Importers for supply to Central Medical Stores, decentralized District Reserve Stores, Medical Colleges & Hospitals, decentralized Hospitals and other Direct Purchasing Health Units under the Health and Family Welfare Department or other health units under Government of West Bengal.

For Ward Miscellaneous and Miscellaneous item, the Authorized Distributors are allowed to submit the bid with the proper authorization from the manufacturer.

Necessary earnest money to be submitted on-line for participation in the Tender for surgical/hospital items, hospital consumables and others mention in the Annexure - A is Rs. 50,000/- (Rupees fifty thousand only) for the tender on-line in favour of Asst. Director (Accounts), Central Medical Stores, Kolkata, the detail of which is more clearly described in Clause 3.

Local SSI(s) registered in West Bengal are exempted from submission of EMD as per Finance Department, GoWB Notification 10500-F dated 19.11.2004.

1. **General Instructions:**
   In the event of e-filing, intending bidder company may download the tender documents free of cost from the website: http://wbtenders.gov.in directly with the help of Digital Signature Certificate. The tender documents may also be downloaded from the Health & Family Welfare Department’s website www.wbhealth.gov.in : Tender URL for perusal.
2. Submission of bids:
Both Technical bid and Financial Bid are to be submitted concurrently duly digitally signed by the Company personnel (whose name is appearing in the pay roll of the company) having authorization from the company management to the website http://wbtenders.gov.in. All papers must be submitted in English language with Page Marking. In case of proprietary firm where the owner itself is bidder, no authorization IN THE FORMAT of Annexure-II is required.

3. On-line payment procedure: Login by the Bidder:
   a. A bidder desires of taking part in the tender shall login to the e procurement portal of the Govt of West Bengal https://wbtenders.gov.in using his login ID and Password.
   b. He will select the particular tender to bid and payment of pre-defined EMD amounting to Rs 50,000/- (Rs fifty thousand only) by selecting from either of the following payment mode:
      i. Net banking (any of the banks listed in the ICICI Bank Payment gateway) in case of payment through ICICI Bank Payment Gateway. On selection of net banking as the payment mode, the bidder will be directed to ICICI Bank Payment Gateway webpage (along with a string containing a Unique ID) where he will select the Bank through which he wants to do the transaction. The bidder will receive a confirmation message regarding success of the transaction. If the transaction is successful, the amount paid by the bidder will get credited in the respective pooling account of the State Government maintained with the Focal Point of branch of ICICI Bank at R N Mukherjee Road, Kolkata for collection of EMD. If the transaction fails, the bidder will again try for payment by going back to the first step.
      ii. RTGS / NEFT: In case of offline payment through bank account in any bank. On selection of RTGS/NEFT as the payment mode, the e-procurement portal will show a pre-filled Challan having the details to process RTGS/NEFT transaction. The bidder will print the Challan and use the pre-filled information to make RTGS/NEFT payment using his Bank account. Once payment is made, the bidder will come back to the e-procurement portal after expiry of a reasonable time (T+2 days) to enable the NEFT/RTGS process to complete, in order to verify the payment made and continue the bidding process. If the transaction is successful, the amount paid by the bidder will get credited in the respective pooling account of the State Government maintained with the Focal Point of branch of ICICI bank at R N Mukherjee Road, Kolkata for collection of EMD. If the payment verification is unsuccessful, the amount will be returned to the bidder’s account. The bidder will again try for payment by going back to the first step.
iii. For RTGS/NEFT, the bidders are requested to complete the process of uploading the bid document well in advance prior to closing of the bid of the particular group to avoid non-transaction.

4. Refund of EMD:
   After declaration of Award of Contract (AOC) through the e-procurement portal, the EMD will be refunded to the unsuccessful bidder in the same route to the account from where the transaction was processed within reasonable time.

5. Time Schedules for the e-tender:
   THE TIME SCHEDULE FOR OBTAINING THE BID DOCUMENTS, PRE BID MEETING, SUBMISSION OF BIDS AND OTHER DOCUMENTS ETC. WILL BE AS PER THE LIST PROVIDED IN CLAUSE NO 29 GIVEN BELOW.

6. Eligibility for Quoting:
   The Manufacturers who have manufacturing capacity with desired specification as well as to supply tentative total quantity of the product or products, and Direct Importers having a capacity to import with desired specification as well as to supply tentative total quantity of the product or products as specified in the tender document, requisite Annual Average Turnover and have the following requisite documents are eligible to apply. For Ward Miscellaneous and Miscellaneous item, the authorized distributor may also submit the bid on behalf of the manufacturer:
   a. For Drug item, the following documents need to be submitted along with other company specific documents:
      i. Drug License with revised Schedule M & M III (GMP Certificate) with endorsement for manufacturing from the State Drug Control Authority.
      ii. Marketing Certificate of the product or products from the Drug Control Authority for the year 2016-17.
      iii. Technical Data sheet conforming to the technical specification of the item prescribed in the BOQ. Technical specification of any item having lower standard than technical specification of the item provided in the BOQ must not be quoted.
         Technical Data Sheet should be filled up properly as mentioned in Annexure VII.
      iv. Purchasers’ list for the year 2016-17 with full address and contact no of the purchasers. (Supported by Purchase order of the Purchasers)
      v. Certificate under Form 10 for Direct Importer.
   b. For non drug item, the following documents need to be submitted along with other company specific documents:
      i. Manufacturing License of the product or products with running Factory License.
      ii. Trade License or Enlistment.
      iii. BIS certificate / IS certificate / CE certificate / European CE certificate / US FDA certificate / FDA Certificate / CE & US FDA certificate (where applicable) of the product or products.
iv. Self declared Marketing & Production Certificate of the product or products duly certified by CA firm with registration number for the year 2016-17.

v. Technical Data sheet conforming the Technical specification of the item prescribed in the BOQ. Technical specification of any item having lower standard than technical specification of the item provided in the BOQ must not be quoted.

vi. Import Export license with IEC code for Direct Importer.

vii. Bill of Entry for the year 2016-17 for Direct Importer containing the name of the product or products.

viii. Purchasers’ list for the year 2016-17 with full address and contact number of the purchasers. (Supported by Purchase order of the Purchasers)

c. The vendors who are blacklisted by any Govt Institutions as a whole or for any particular item/items are not eligible for submitting its tender as a whole or for the said item/items respectively in this tender. This clause will be applied on the basis of the declaration by the bidder itself in the Affidavit submitted in Annexure VI.

d. The vendors who have failed to supply at least 80% of the item-wise ordered quantity made to them (GRN) during the year 2016-17 or at least 100% of tentative requirement of the item/items for the tender period are not eligible to bid.

e. Those vendors who have capacity to supply required tentative total quantity of the item/items as mentioned in the Annexure – ‘A’ for the tender period are eligible to apply for the item/items. If any vendor applies for any item/items that means the vendor has capacity to supply required tentative total quantity of the item/items for the tender period.

7. **ANNUAL TURNOVER REQUIREMENTS:**

Principal Manufacturer/Direct Importers and Authorised Distributor (for Ward Miscellaneous and Miscellaneous item only) : Annual Turn Over is more than Rs. 5 (Five) crore for any 3 years of the last 4 years, i.e. for the year 2013-14, 2014-15, 2015-16 & 2016-17 and S.S.I(s) registered in West Bengal whose annual Turn Over is more than Rs. 1 (One) crore for any 3 years of the last 4 years, i.e. for the year 2013-14, 2014-15, 2015-16 & 2016-17 are eligible to participate in the Tender along with other company specific and product specific documents prescribed herein below.
8. Submission of the Tenders:

The tender is to be submitted in a two Bid System.

Bid A: Technical documents. The technical documents include Company Specific pre-qualification documents and other technical documents as mentioned below.

Bid B: Financial Bid in the form of BOQ.

Bid A: (Should be in Multiple pages single PDF File)

The scanned document with page No. uploaded should be legible and readable and should not be repetitive. Uploading of illegible scanned document will not be accepted and will stand for rejection of bid. Local SSI(s) should upload certificate of registration/EM II for claiming EMD exemption in this folder.

Essential Requirements:

The STATUTORY COVER for Bid A (Part I) should contain the following documents:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Duly filled CHECK LIST in the prescribed format</td>
</tr>
<tr>
<td>2</td>
<td>Certificate of registration/EM II in respect of domestic SSI within the State of West Bengal.</td>
</tr>
<tr>
<td>3</td>
<td>Application in the prescribed format given in Annexure I</td>
</tr>
<tr>
<td>4</td>
<td>Authorization letter of authorized signatory from the Company in Annexure II as per Proforma. In case of proprietary firm where the owner himself is bidder, no authorization IN THE FORMAT of Annexure II is required.</td>
</tr>
<tr>
<td>5</td>
<td>Certificate from a Chartered Firm in Annexure III as per Proforma.</td>
</tr>
<tr>
<td>6</td>
<td>Copy of agreement between the manufacturer and the Distributor in Annexure IV</td>
</tr>
<tr>
<td>7</td>
<td>Copy of GRN Status in Annexure V</td>
</tr>
<tr>
<td>8</td>
<td>Affidavit regarding No Conviction, Non Blacklisting and confirms the specifications from Notary Public / Judicial Magistrate / Executive Magistrate as Proforma of Annexure VI.</td>
</tr>
<tr>
<td>9</td>
<td>BIS certificate / IS certificate / CE certificate / European CE certificate / US FDA certificate / FDA Certificate / CE &amp; US FDA certificate (where applicable) of the product or products.</td>
</tr>
<tr>
<td>10</td>
<td>For drug items, Marketing Certificate for the year 2016-17 from the State Drug Control Authority of the particular product or products is to be produced. (The items should be marked / highlighted with marker pen mentioning therein the CMS CAT No. for each particular item).</td>
</tr>
<tr>
<td>11</td>
<td>For Non drug items, self certified Marketing cum Production declaration duly countersigned by the CA firm for the year 2016-17 of the particular product or products are to be produced. (The items should be marked / highlighted with marker pen mentioning therein the CMS CAT No. for each particular item).</td>
</tr>
<tr>
<td>12</td>
<td>Brochure of the Product or Products highlighting the item name and CMS Cat No.</td>
</tr>
</tbody>
</table>

The STATUTORY COVER for Bid A (Part II) should contain the following documents:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Technical Data Sheet conforming the standard prescribed in Annexure VII (Excel file)</td>
</tr>
</tbody>
</table>
NON STATUTORY /MY DOCUMENT CONTAINING THE FOLLOWING DOCUMENTS:

<table>
<thead>
<tr>
<th>Category</th>
<th>Sub category</th>
<th>Sl.</th>
<th>Sub category description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Certificates</td>
<td>A1 certificates</td>
<td>1.</td>
<td>PAN Card of the Bidder Company/Authorized Signatory (who will upload the BID).</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2.</td>
<td>Valid Pollution Control certificate, if applicable*.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3.</td>
<td>GST Registration certificate.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2.</td>
<td>Registration with Registrar of Companies</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3.</td>
<td>Export-Import License with IEC code( for direct importers)</td>
</tr>
<tr>
<td>Credential</td>
<td>C1 Credential</td>
<td>1.</td>
<td>For drug item: GMP Certificate/WHO GMP Certificate.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2.</td>
<td>For drug item: Drug Licences with endorsement certificate from the State Drug Control Authority.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3.</td>
<td>For drug item: Latest No Conviction certificate from the concerned State Drug Control Authority, issued on and after 01.01.2017.</td>
</tr>
<tr>
<td></td>
<td>C2 Credential</td>
<td>4.</td>
<td>FORM 10 for direct Importer under drug item issued by concern DRUG Control authority mentioning the items as quoted with CMS CAT No.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5.</td>
<td>Manufacturing Licence of the product or products with running factory license for manufacturer.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>6.</td>
<td>Particulars about local Service centre with detail machinery and manpower engaged (for Instrument/Machines).</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7.</td>
<td>Export-Import License with IEC code (for direct Importer under Non drug item )</td>
</tr>
<tr>
<td></td>
<td></td>
<td>8.</td>
<td>Income Tax Returns submitted for the Assessment year 2016-17</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9.</td>
<td>P/L &amp; Balance sheet for the year 2015-16 or 2016-17</td>
</tr>
</tbody>
</table>

* There are few activity for which Pollution control certificate is not required. In such cases, the concerned bidder is requested to upload the relevant Government order where it is exempted.

“BID B”: FINANCIAL COVER

BOQ:
The folder as “Financial Bid” is to contain:

Base Rate per Accounting unit inclusive of Entry Tax, Customs Duty (if applicable) Transportation Charges, Insurance, Delivery Charges, Incidental Charges, Freight Charges, Testing Charges, Installation and training charges etc and exclusive of
Goods & Services Tax (GST) to be quoted. Tax invoice(s) needs to be issued by the supplier for raising claim under the contract showing separately the tax charged in accordance with the provisions of GST Act, 2017. However, the L₁ will be determined on Base price only.

Submission of hard copy of Technical and Financial Bid is totally prohibited and the financial bid should only be submitted through on line in the NIC portal. However, the brochure of the product should be uploaded as directed.

9 Evaluation of the Tenders:
During the tender evaluation process, the “Bid A” will be opened first. The Company related document and the product related document with reference to the test certificate produced and technical Data sheet, GRN made & others will be verified and evaluated. Physical verification of samples with live demonstration by expert may follow at the discretion of the Tender Selection Committee / Central Medical Stores (if approved by the department) to adjudge the applicability and suitability of the product or products for the functional requirement of the health facilities, particularly Medical College & hospitals.

The Bid B (Financial Bids) of only these Tenderers passing the technical qualification related to company specific document and product specifc document followed by physical verification of samples (optional), if any in Bid A for the Drug items & Non drug items will be opened.

Equipment found by the Expert Committees formed by the approving authority to be unsuitable for intended use / of poor quality / not conforming to specification & standard Test report as provided in the tender documents will be rejected. The grounds of rejection on account of technical evaluation will be displayed in the e-tender portal and also in the dept’s website.

The Bid B (Financial Bids) of only these Tenderers passing the technical qualification in Bid A followed by physical sample verification, if any will be opened. The Tenderers quoting the lowest rate will be considered as successful considering the order of finance department vide G.O. No. 5400-F(Y) dated 25.06.2012.

THE DECISION OF THE TENDER SELECTION COMMITTEE/H&FW DEPT WILL BE FINAL AND BINDING IN THIS MATTER.

10. **Appointment of Authorised Distributors by the Bidders/Tenderers.**
   a. The out-of-state bidder may supply directly or may supply through his authorized distributor provided they have no Regional Sales Depot /C&F Agent in the State.

   b. Local SSI/local PSU/CPSU/local manufacturers are not allowed to engage Distributors.

   c. If Out-of-state manufacturer proposes that order and payment are to be made in the name of the Distributor, such Distributor must be an authorized
d. The Bidder shall submit copy of agreement signed between the bidder and the Distributor in Annexure IV(a), certificate of annual Turnover from CA firm in Annexure IV(b) & valid documents relating to Drug license in Annexure IV(c).

e. If out-of-State manufacturer proposes that the order & payment are to be made in favour of the manufacturer & the manufacturer will supply and effect distribution through local sales depot, the same is allowed. No annual turnover is necessary for such engagement.

f. The matter related to Way Bill is the responsibility of the Manufacturer/Direct Importer/authorized distributor/ C&F agent and the procuring authorities will not issue any way bill.

It is, however, made clear that agreement in pursuance of the accepted tenders will be executed only with the Tenderers who will be responsible for the supply. In case, the order and payment are to be made in the name of the Authorised Distributor of the bidder as per their written consent, then the bidder will be responsible for all activities of his Authorised Distributor. No separate agreement will be executed with the Authorised Distributor or with C&F and CSA agent but the authorised distributor should submit the Distributor summary as per annexure IV(c) with supporting documents.

The Devices/surgical consumables coming into direct contact with body fluids after opening from the primary pack should be made sterile using the appropriate technology. These devices must be designed, manufactured and packed in a non-reusable pack and transported according to appropriate procedures to ensure that they are sterile when they are supplied and remain sterile, under the storage and transport conditions in the CMS & DRS, until the protective packaging is damaged or opened. The sterile status should be indicated on the primary packaging along with method and date of sterilization on secondary/outer packaging. Packaging systems for non-sterile devices must keep the product without deterioration at the level of cleanliness stipulated. Devices with a measuring function must be designed and manufactured in such a way as to provide sufficient accuracy and stability within appropriate limits of accuracy and taking account of the intended purpose of the device. The limits of accuracy must be indicated by the manufacturer. The measurement, monitoring and display scale must be designed in line with ergonomic principles, taking account of the intended purpose of the device. The measurements made by devices with a measuring function must be expressed in legal units conforming to the provisions of Weights and Measures Act 1977.

11. Batch Testing:

(a) Dy. Director of Health Services (E&S), West Bengal and the heads of the direct demanding units and decentralized stores will be at liberty to get the items supplied tested at Govt. Laboratories or Govt. Approved Laboratories to verify the quality of the product. Such testing will be in addition to tests that may be done by any authority exercising statutory powers of surgical items/medical device testing. The Tenderer shall be bound to replace the defective batch(s) of
non drug items as per test report of either the non-statutory lab or the statutory lab. If not replaced within 45 days, the cost of procurement of non-standard items will be deducted from the security deposit, Performance Bank Guarantee and/or from the pending bills of that supplier. In case not of standard quality of Drug surgical items, the cost of procurement of non-standard items will not be paid. If already paid it will be deducted from the pending bills and/or from the security deposit, Performance Bank Guarantee of that supplier. Moreover, action will be taken under the relevant provision of Drugs and Cosmetics Act, 1940 and Rules made there under.

(b) *Each instalment of Supply of the items for which BIS certificate / IS certificate / CE certificate / European CE certificate / US FDA certificate / FDA Certificate / CE & US FDA certificate (where applicable) must be accompanied the certificate.*

(c) A sum 2% of bills exclusive of Govt. tax & duties will be deducted from the bills of the supplies of items included in this tender by Central Medical Store/ all District Reserved Stores / other direct demanding units and deposited in the respective budget head to meet cost of handling and testing charges.

12. LABELLING AND PACKAGING:
The following information must be embossed /Printed on each type of packages.

**Govt of West Bengal Hospital Supply- NOT FOR SALE**
- The name and address of the manufacturer
- Batch Number
- Mfg. License No
- Date of manufacture
- Expiry / Best before Date
- Certification/ISI stamp
- All labelling requirements as legally mandated under THE STANDARDS OF WEIGHTS AND MEASURES ACT, The W&M (Enforcement) Act and the Packaged Commodities Rules, Drugs and Cosmetic Acts and Rules and such other Acts and Rules as relevant. The information supplied should not overlap one another.

13. BAR CODING:
The secondary & tertiary pack should contain 2D Data-Matrix Bar Code and it should not exceed size of 18 mil & 50 character having the following items in the given format below-

**Vendor Code* CMS Cat No* Batch Number* Manufacturing Date* Expiry Date**

a. Vendor Code (means the Code No., mentioned against the concerned Bidder in the approval Notice)
b. CMS Cat No (means the Item No, mentioned against the concerned item in the approval Notice)
c. Batch Number (means the Batch manufacturing No. of the item, having maximum of 15 character)
d. Manufacturing Date (to be in the YYMM format)
e. Expiry Date ( to be in the YYMM format)

**NOTE:** All above 5 (five) items to be separated by * mark without having no space in between the items
14. **PACKING:**

a) Packing of all supplied materials should be done with standard packing materials so as to ensure the material supplied remains undamaged during transportation and storage. This specially applies to items which are required to be sterile at the time of usage.

b) Corrugated package box size should be limited to: (12” H x 24”L x 24”W). No corrugated box with contents should generally weigh more than 15 kgs (7 kgs in case of packages containing glassware and fragile materials). Items weighing more shall be packed so that safety of the material and handlers remains ensured.

The inner lining shall be not less than 120 gsm and outer lining of the carton shall not be less than 150 gsm.

The non glass ware containing cartons shall be of at least 5 ply with bursting strength not less than 9 kg/sq cm.

Glass ware containing cartons shall be of at least 7 ply with bursting strength not less than 12 kg/sq cm.

No box should contain mixed products or mixed batches of the same product.

The product label on the cartoon should be large at least 15cms x 10cms dimension. It should carry the correct technical name, date of manufacturing, date of expiry, quantity packed, storage & handling requirements, Hospital Supply – Not For Sale logo and net weight of the box.

15. **ORDER & SUPPLY:**

The Genesis of the tender and subsequent action solely depend on the following:

- E TENDER.
- E PROCUREMENT &
- E PAYMENT.

Orders for the supply of the approved products will be placed with the successful tenderers after the execution of the agreements as and when required by the procuring authorities across the State upto the Sub Divisional hospital level depending upon their annual consumption. The successful tenderer will have to supply within the specified time schedule that had been assured as prescribed.

All supplies will have to be completed by door delivery within maximum 45 days from the date of order in the SMIS System from the procuring units. NO RELAXATION ON ANY ACCOUNT WILL BE ALLOWED FOR CONDONING DELAYED SUPPLIES. The selected vendors would have access to the Vendor Portal from which, the procurement order, Goods Received Notes (GRN) and Bill Status can be seen on line & downloaded. The procurement order generated out of Vendor portal will have the same meaning and strength that of physical order.

The permissible time period between the date of manufacture and the date of supply of the items should not be more than 1/6 the of the whole life period except for the items for which specific G.O exists.

To ensure sustained supply without any interruption for facilitating prompt patient care services, the DDHS (E&S), Central Medical Stores, Kolkata with the approval of the Tender selection Committee reserves the right to split orders for supplying the
requirements among more than one tenderers provided that, the rates and other conditions of supply are equal and with sufficient grounds. In case of non-supply/less supply of any item by any approved lowest quoted firm, the DDHS (E&S), Kolkata can ask for willingness to L₂ / L₃ / L₄ etc firm to supply at L₁ rate and prepare the rate schedule with the same item in L₁.

16. WITHDRAWAL /CANCELLATION & PURCHASE POLICY OF TENDERING AUTHORITY:
   • The tendering authority reserves the right to withdraw any item from the tender at any stage. The selection of such item, if already made in favour of any Tenderer, shall be treated as cancelled.
   • The tendering authority reserves the right to reject or accept any tender or part thereof at any stage or to split any tender without assigning any reason.
   • The tendering authority reserves the right to accept or reject any tender, in part or in full, without assigning any reason.
   • Purchase will, however be made following the existing purchase policy of the Govt of West Bengal and its amendment(s) made from time to time.
   • The tendering authority reserves the right to purchase any item of the Catalogue at the approved rate from any outsider (Non- Tenderer) during the tender period in case of emergency, if the tenderer fails to supply such items on short notice.
   • The tendering authority reserves the right to procure any item, of the tender directly from a state/ Central Govt. undertaking even if a tender for the same has been offered/ accepted.

17. NO- CONVICTION CERTIFICATE:
   No conviction certificate for Drug items only is to be submitted from the Drugs Controlling Authority of the State where the manufacturer is registered.

18. An Affidavit from is to be submitted in the prescribed Pro-forma as Annexue VI attached herewith from Notary Public/ Judicial Magistrate/Executive Magistrate/Metropolitan Magistrate.

19. PENALTY CLAUSES-
   IT SHOULD BE REALISED BY ALL THE TENDERERS THAT GENERAL AND OTHER SURGICAL/HOSPITAL EQUIPMENT/INSTRUMENTS CONSTITUTE AN IMPORTANT PART REQUIRED FOR THE TREATMENT OF PATIENTS. THIS IS MORE SO IN CASE OF SERIOUS AND EMERGENCY PATIENTS. THERE CAN BE NO RELAXATION IN THE QUALITY AND TIMELY SUPPLY OF THESE ITEMS UNDER ANY CIRCUMSTANCES, AS THIS WOULD SERIOUSLY & ADVERSELY AFFECT PATIENT CARE SERVICES. TENDERERS ARE THEREFORE ADVISED TO CAREFULLY ASSESS THEIR MANUFACTURING ABILITY AND CAPABILITY FOR ENSURING TIMELY SUPPLY OF THE WHOLE TENTATIVE QUANTITIES AS PROVIDED IN ANNEXURE-A PRIOR TO PARTICIPATING IN THIS TENDER.
   a. In case of supply of the sub-standard non drug items found in the quality test as per quality assurance norms, the defective batch /batches determined by the appropriate authority will be returned to the tenderers for replacement. The payment of the defective batches will not be made to the supplier till replacement is done or if paid in the meantime, is to be deducted from the pending bills of the tenderer or from performance bank guarantee, if it is not replaced in time.
   In case not of standard quality of Drug surgical items, the cost of procurement of non-standard items will not be paid. If already paid it will be deducted from the
pending bills and/or from the security deposit, Performance Bank Guarantee of that supplier. Moreover, action will be taken under the relevant provision of Drugs and Cosmetics Act, 1940 and Rules made there under.

b. In case of supply of defective items found in respect of packaging or labelling, tenderer will also be asked to replace the same.

c. In case a tenderer withdraw his tender or any item(s) from the tender during the period of submission and final evaluation of the tender, its earnest money will be forfeited.

20. Debarment from participation in next tender processes of the Health & Family Welfare Department: The tender selection committee reserves the right to declare a firm/ Company blacklisted for three (03) years due to the following reasons:

   If the tenderer / vendor:
   a) Withdraws from agreement after achieving the “Lowest Quoted Tenderer” in any of the item or items.
   b) Failure in supply within stipulated period for five occasions during the tenure of the tender period or its extensions. There will be system generated blockage for the entire State for failure in supply for five occasions for a particular item.
   c) For supply of Non – standard items as per quality test within tender period as determined by the testing of the item as per discretion of Tender Selection Committee in respect of particulars items only. In consequence of submission of false or fabricated documents by any firm / company for participating in the tender, if proved later on.
   d) Quoting absurdly high or low rate in the opinion of Tender selection Committee, with the intention to vitiate the tender process. The assessment of too low or too high will be made by a team of Health officials in the context of market norms or any other norms under Govt.
   e) Failure to supply as per specification submitted.
   f) Supply of items with short expiry dates in violation of Clause 15 on more than three occasions.
   g) Submission of tender for the product /products for which the concerned company has been blacklisted either by the state Government/ other State / Central Government Organization for any reason whatsoever.
   h) Submission of tender during the period of blacklisting of Concerned Company either by Tender Inviting Authority or by any State Government or by other State/Central Government
   i) The H&FW Department will have the right to inspect the manufacturing units of the tenderers before accepting the rates quoted by them or at any point of time during continuance of the tender. The Department will also have the right to reject tender or terminate/ cancel the purchase order(s) and/ or not to re- order based on the adverse reports brought during those inspections.

21. Financial Penalties for deficiencies in services/supplies during the period of the tender and its subsequent extensions:
   i) The vendor should supply full quantity of the any material of any order in one consignment. After supplying one consignment the order for the material will be closed in SMIS automatically. In respect of all consignment, stipulated period will be 45 (forty five) days from the
date of order generated in SMIS. The order generated out of SMIS will carry the same status that of signed order

ii) At least 50% of the total order quantity of any material may be supplied in one consignment with penalty as follows: (After supplying one consignment the order will be closed in SMIS automatically.)

a) If the vendor supply full quantity of any material of any order in one consignment within stipulated period i.e. 45 days then there will be no penalty.

b) If the vendor supplies partial quantity (at least 50%) of any material of any order in one consignment within stipulated period i.e. 45 days, then 2% of the basic cost of the material non-supplied will be deducted from the existing/pending bill of the supplier.

iii) In case of supply is made after 45 days to 60 days

a) If the vendor supply full quantity of any material of any order in one consignment after stipulated period of placing order i.e. 45 days then 0.5% of the basic cost of the materials will be deducted from the existing/pending bills of the supplier per day’s delay up to 60 days.

b) If supply partial quantity of any material of any order in one consignment after stipulated period of placing order i.e. 45 days then 0.5% of basic cost of the supplied material per day’s delay up to 60 days and 2% of the total basic cost of the material non-supplied will be deducted from the pending bills.

iv) However, if the stipulated period ends on Saturday, Sunday or Govt holidays, supply should be made on the next working day and in that case, no penalty would be chargeable.

iv) The provision of penalty is system-generated and cannot be waived in any case.

vi) There will be system-generated Blockage for failure in supply beyond 60 days for 5(five) occasions for a particular item & the firm quoting L2 will be selected without any reference to the L1.

vii) The Firm may be blacklisted after issuance of a show-cause-letter for such delay beyond 60 days on five occasions for any item/items.

viii) For firms who fail to supply the full order on five occasions within the stipulated time within the tender period and its extensions- the whole Performance Bank Guarantee may be forfeited and the firm and its principals may be debarred from participation in the CMS, DoHFW or WBMSC tenders for the next three years for the item/items.

ix) The names of the defaulting suppliers will be put up in the Departmental website.

x) Enhancement of rates of raw materials etc or the fact that the tender period has been extended will not be acceptable as a plea for not
supplying the materials within the stipulated period as provided in the work order.

22. **APPEAL:** Appeal against the decision of the Dy. Director of Health Services (E&S), West Bengal and the head of the direct demanding units making order through SMIS or system generated penalty provisions to impose such a penalty will lie with Tender Selection Committee. Review against the decision of the T.S.C. will lie with Health & F.W. Deptt of the Govt. The Special Secretary/Secretary/Principal Secretary will be the appellate authority within the Department of Health & Family Welfare, Government of West Bengal to whom the concerned supplier may appeal citing the proper reasons for non-imposing penalty.

23. **PENALTY FOR FORMATION OF CARTEL OR FURNISHING OF FRADULENT/ MISLEADING DOCUMENTS:** If during the tender process or at any state during the validity of the tender period, it is found that a Tenderer(s) has formed a cartel in what so ever form or name to fix up the rates or suppliers to the detriment of the fairness of the tender process, penal measures shall be initiated. Similar penal measures shall also be initiated against those tenderers who have submitted false/misleading/fraudulent documents or made incorrect declarations. The penal measure will be Forfeiture of Earnest Money/ forfeiture of Performance Bank Guarantee if enlisted as a supplier, Cancellation from the approved list of suppliers and debarment from further supply orders, Black listing from all Departmental tenders (called by the CMS or others) of the tenderer/the Principals of the firm(s) and the concerned distributor(s) for a period of three years.

24. **AGREEMENT:** On a tender being accepted, intimation of acceptance will be forwarded through departmental website by the Dy. Director of Health Services (E&S) W.B. After communication of the same, the Tenderer will have to execute agreement in the prescribed form along with submission of requisite amount of performance Bank Guarantee with the Dy. Director of Health Services (E&S) W.B., within 15 days from the date of issue of invitation. In case any direct purchasing unit wishing to go for a separate agreement the head of the purchasing unit must get written permission to that effect from his controlling authority. This present document and the tender forms filled in by the Tenderer or copies thereof in so far as they are not inconsistent with these Terms & Conditions will be incorporated as part of the agreement. Such agreement will be binding on the Tenderer.

25. **VALIDITY PERIOD OF AGREEMENT:**

The contract period will be for a period two years from the date of declaration of award of contract during the year 2017-19 which may be extended up to six months with prior approval of the Department of Health & Family Welfare, Government of West Bengal, if necessary.

26. **‘PERFORMANCE BANK GUARANTEE’**

i. The performance bank guarantee will be mandatory for all approved suppliers and will not be waived in any case.

ii. The successful tenderers shall be required to furnish the “Performance Bank Guarantee” @ 2% of assessed base rate of total tentative requirement of the tender for the item for which the Tenderer has been selected as supplier.
iii. The bank particular on which the performance bank guarantee to be drawn given below:
   a. Name WB Govt Pooling A/C For Performance Guarantee Account No 000605030134
   b. IFSC Code ICIC0000006
   c. MICR Code 70229002
   d. Branch Address ICICI Bank, 22, R. N. Mukherjee Road, Kolkata-700001, West Bengal.

iv. The Performance Bank Guarantee from any nationalized/ scheduled bank in India acceptable to the Government of West Bengal should be submitted to the Dy. Director of Health Services (E&S), West Bengal, within 15 (fifteen) days from the date of acceptance of tender.

v. If Agreement has not been executed along with submission of performance bank Guarantee within 15 days from the date of acceptance of tender, the candidature may be cancelled and the next Bidder may be accepted.

27. **INSPECTION:**

   The competent authority may visit any factory at any day at any time in a regular basis for inspection. In case of tenderer bag L1 status for more than 3 items, physical inspection may follow to adjudge its production capability and assured supply and take decision accordingly for L1 status.

28. **PAYMENT TERMS:**

   Payment will be made through e payment system through ECS/RECS/RTGS after execution of due supply as ordered subject to:
   1. Submission of Performance Bank Guarantee in terms of Clause 26 and subject to penalty clause in terms of Clauses 23.
   2. Supply of the materials as per specification as provided in the tender documents and the catalogue
   3. Supply of the materials within the supplied period as specified in the work orders
   4. The status of orders, Goods received note and payments will be available on-line for the vendors in the vendor’s portal in the Departmental website [www.wbhealth.gov.in](http://www.wbhealth.gov.in) : Vendor Portal.
   5. On being selected, the successful vendors will have to submit one application stating the name of the payee/ recipient, Bank Account No with MICR code, IFSC of the payee/recipient to the procuring authorities for making e payment. No manual payment will be made.
29. **TIME SCHEDULE:**

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Date of uploading of NIT(on line) in the e tender portal: <a href="https://wbtenders.gov.in">https://wbtenders.gov.in</a></td>
<td>21-08-2017</td>
</tr>
<tr>
<td>2</td>
<td>Date of publishing the document in the departmental website: <a href="http://www.wbhealth.gov.in">www.wbhealth.gov.in</a> in the Tender URL.</td>
<td>21-08-2017</td>
</tr>
<tr>
<td>3</td>
<td>Documents download (online)</td>
<td>21-08-2017</td>
</tr>
<tr>
<td>4</td>
<td>Date of holding pre bid meeting with the prospective bidders in the office Chamber of The DDHS (E&amp;S), Central Medicine Stores, 141, AJC Bose Road, Kolkata - 14</td>
<td>23-08-2017 AT 12:00 NOON</td>
</tr>
<tr>
<td>5</td>
<td>Bid submission start date (on line)</td>
<td>24-08-2017 FROM 05:00 PM</td>
</tr>
<tr>
<td>6</td>
<td>Bid submission closing date for the items as mentioned in Annexure- 'A'</td>
<td>15-09-2017 upto 04:00PM</td>
</tr>
<tr>
<td>7</td>
<td>Date of opening of Technical bid.</td>
<td>18-09-2017</td>
</tr>
<tr>
<td>8</td>
<td>Date of uploading list for technical qualified bidders.</td>
<td>20-09-2017 onwards</td>
</tr>
<tr>
<td>9</td>
<td>Date for opening of financial bid (on line)</td>
<td>20-09-2017 onwards</td>
</tr>
<tr>
<td>10</td>
<td>Date of uploading list for L1 bidders by the DDHS(E&amp;S), CMS</td>
<td>20-09-2017 onwards</td>
</tr>
</tbody>
</table>

30. DDHS (E&S), Central Medical Stores RESERVES THE RIGHT TO CHANGE THE ABOVE SCHEDULE IN CASE OF ANY EXIGENCIES AFTER PUTTING UP A NOTICE IN THE DEPARTMENTAL WEBSITE AND CMS NOTICE BOARD.

31. Opening the financial bid as per schedule will BE NOTIFIED LATER ON.

32. During the scrutiny, if it comes to the notice to tender inviting authority that the credential or any other paper found incorrect/ manufactured/ fabricated; then that bidder would not be allowed to participate in the tender and that application will be out-rightly rejected without any prejudice.

33. A HELP DESK is set up in the office of the Deputy Director of Health Services (E&S), Central Medical stores, 141, A J C Bose Road, Kolkata – 700 014 to help and guide the prospective bidders about their registration, holding of Digital Signature Card and allied matter. Prospective bidders may contact personally or over phone vide phone No (033) 2265 4419 or mail their queries in the following e-mail addresses:

   a. cmswbhealth@gmail.com
   b. tde033@gmail.com

34. The Tender Selection Committee reserves to right to cancel the N.I.T. due to unavoidable circumstances or to withdraw any item or items and no claim in this respect will be entertained.

---

Deputy Director of Health Services (E&S)
Central Medical Stores,
141, A. J. C. Bose Road, Kolkata – 700 014.
<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Cat. No.</th>
<th>Item Description</th>
<th>Accounting Unit</th>
<th>Certificate</th>
<th>Tentative Requirement for The Tender Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.</td>
<td>THS-417</td>
<td><strong>External Cardiac Pacing (Single Chamber)</strong></td>
<td>Each</td>
<td>BIS certificate / IS certificate / CE certificate / European CE certificate / US FDA certificate / FDA Certificate / CE &amp; US FDA certificate (where applicable)</td>
<td>1000</td>
</tr>
</tbody>
</table>

**Specifications:**

1. Pacing Rate: 30 - 180 ppm
2. Atrial Overdrive Pacing (RAP):
   - X2: 60 - 360 ppm, X4: 120 - 720 ppm
   - (Note: X2 and X4 is using the mode switch on the 5391 for Rapid Atrial Pacing.)
3. Output Amplitude: 0.3 - 12 V ± 5%
4. Pulse Width: 0.75 ms ± 0.02 ms
5. Sensitivity: 1 - 20 mV, Async
6. Refractory: 250 ms
7. Dimensions: 60 mm X 115 mm X 20 mm (2.3” X 4.5” X 0.8”)
8. Battery Type: Standard 9 V, Alkaline or Lithium.
9. Weight (including battery): 185 g (6.5 oz.)
10. Connector Compatibility: Accepts standard connector pins with diameters ranging from 0.9 to 2.0 mm. Accepts all standard myocardial heart wires and temporary pacing leads for direct connection or through temporary extension cable.
11. Arm Strap Length: 45 cm (17.7”)**

**Specifications for Transvenous Pacing Lead:**

1. Polarity: Bipolar
2. Chamber: Atrium / Ventricle
3. Fixation: Active, screw-in
4. i. Lengths: 100, 140, 200 cm
   - ii. Lead Guide Catheter: 40, 60, 90 cm
5. i. Diameters: 3.5 Fr. (1.1 mm, 0.044 in)
   - ii. Lead Guide Catheter: 6 Fr. outer, 5 Fr. inner.
6. i. Helix Design: Two right turns
   - ii. Length: 0.8 mm (0.032 in)
   - iii. Diameter: 0.9 mm (0.035 in)
7. Tip Electrode (includes helix) Surface Area: 4.3 mm²
8. Ring Electrode Surface Area: 17 mm²
9. Tip-Ring Spacing Connector: 1 cm (0.39 in), Bifurcated, pull-through, short arm = positive, long arm = negative
10. Lead Material
   i. Conductor: Stainless steel
   ii. Insulation: Polyethylene and FEP
   iii. Helix: Stainless steel
   iv. Catheter: Material Pebax
11. Lead Resistance
   a. 100 cm lead
      i. Inner wire (tip): 55 Ω maximum
      ii. Outer wire (ring): 33 Ω maximum
   b. 140 cm lead
      i. Inner wire (tip): 75 Ω maximum
      ii. Outer wire (ring): 45 Ω maximum
   c. 200 cm lead
      i. Inner wire (tip): 105 Ω maximum
      ii. Outer wire (ring): 63 Ω maximum
12. Recommended revolutions to extend helix:
   a. 100 cm lead: 2 - 3 revolutions
   b. 140 cm lead: 3 - 4 revolutions
   c. 200 cm lead: 4 - 5 revolutions

3. THS-418

**External Cardiac Pacing (Double Chamber)**

Specifications:
1. Basic Pacing Rates: 30 - 200 ppm
2. Upper Rate: 80 - 230 ppm
3. Rapid Atrial Pacing Rates: 80 - 800 ppm
4. Output Amplitude:
   i. Atrial: 0.1-20 mA
   ii. Ventricular: 0.1-25 mA
5. Pulse Width:
   i. Atrial: 1.0 ms
   ii. Ventricular: 1.5 ms
6. Sensitivity:
   i. Atrial: 0.4-10 mV
   ii. Ventricular: 0.8-20 mV
7. A-V interval:
   ii. Sensed A-V (SAV): 50 - 250
8. Refractory Period:
   i. Atrial: 150-500 ms (PVARP) Atrial Refractory after an Atrial event is equal to the AV interval
   ii. Ventricular: NA
9. Ventricular Blanking:
   i. Pace: 200 ms
   ii. Sense: 120 ms
10. Height: 20.3 cm (8.0 in)
11. Width: 8.6 cm (3.375 in)
12. Depth: 4.45 cm (1.75 in)
13. Weight: 680 g (24 ounces)
14. Battery Type: Two IEC type LR6-sized (AA-sized) 1.5 V alkaline batteries (Duracell MN1500, Eveready E91 or equivalent)
15. Battery Life: 9 days typical, 7 days minimum.

**Specifications for Transvenous Pacing Lead:**

1. **Polarity:** Bipolar
2. **Chamber:** Atrium / Ventricle
3. **Fixation:** Active, screw-in
4. **i.** Lengths: 100, 140, 200 cm
   - **ii.** Lead Guide Catheter: 40, 60, 90 cm
5. **i.** Diameters: 3.5 Fr. (1.1 mm, 0.044 in)
   - **ii.** Lead Guide Catheter: 6 Fr. outer, 5 Fr. inner.
6. **i.** Helix Design: Two right turns
   - **ii.** Length: 0.8 mm (0.032 in)
   - **iii.** Diameter: 0.9 mm (0.035 in)
7. **Tip Electrode (includes helix) Surface Area:** 4.3 mm²
8. **Ring Electrode Surface Area:** 17 mm²
9. **Tip-Ring Spacing Connector:** 1 cm (0.39 in), Bifurcated, pull-through, short arm = positive, long arm = negative
10. **Lead Material**
    - **i.** Conductor: Stainless steel
    - **ii.** Insulation: Polyethylene and FEP
    - **iii.** Helix: Stainless steel
    - **iv.** Catheter: Material Pebax
11. **Lead Resistance**
    - **a.** 100 cm lead
        - **i.** Inner wire (tip): 55 Ω maximum
        - **ii.** Outer wire (ring): 33 Ω maximum
    - **b.** 140 cm lead
        - **i.** Inner wire (tip): 75 Ω maximum
        - **ii.** Outer wire (ring): 45 Ω maximum
    - **c.** 200 cm lead
        - **i.** Inner wire (tip): 105 Ω maximum
        - **ii.** Outer wire (ring): 63 Ω maximum
12. **Recommended revolutions to extend helix:**
    - **i.** 100 cm lead: 2 - 3 revolutions
    - **ii.** 140 cm lead: 3 - 4 revolutions
    - **iii.** 200 cm lead: 4 - 5 revolutions

4. AN-164 Infusion system designed to allow administration of fluid warmed to 37°C +/- 20°C

**Specifications for Infusion pump is as follows:**

**Description of Function**

The Infusion Pump provides uniform flow of fluid by precisely driving the plunger of a syringe down its barrel. It provides accurate and continuous flow rate for precise delivery of I.V. medication in critical medical care.

**Operational Requirements**

The pump should be programmable, user friendly, safe to use and should have battery backup of at least 4 hours and comprehensive alarm system.

**Technical Specifications**

**Should be flow rate programmable from 0.01 to 1000 ml/hr or more in steps of 0.01 ml/hr with user selectable flow rate option.** SAVE last infusion rate even when the AC power is switched OFF.

Bolus rate should be programmable to 400 – 500 ml/hr or more with infused volume display. Reminder audio after
every 0.5 ml delivered bolus. SAVE last Bolus rate even when the AC power is switched OFF.
Keep Vein Open (KVO) must be available 1.0 ml/hr or set rate if lower than 1.0 ml. User should have choice to disable KVO whenever desired.
Selectable Occlusion pressure trigger levels selectable from 300/500/900 mmHg.
Allow administration of Fluid warmed to 37°C +/- 2°C
APPROVED/CERTIFIED 10, 20, 50/60 ml Syringes with accuracy of minimum of ±2% or better.

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>AN-165</td>
<td>Pressure Infusion Devices</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Each</td>
</tr>
<tr>
<td></td>
<td></td>
<td>BIS certificate / IS certificate / CE certificate / European CE certificate / US FDA certificate / FDA Certificate / CE &amp; US FDA certificate (where applicable)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2</td>
</tr>
</tbody>
</table>

| 6 | AN-166 | Volumetric Infusing Device |
|   |   | Each |
|   |   | BIS certificate / IS certificate / CE certificate / European CE certificate / US FDA certificate / FDA Certificate / CE & US FDA certificate (where applicable) |
|   |   | 2 |

<p>| 7 | THS-401 | Pericardial Puncture Set |
|   |   | Each |
|   |   | BIS certificate / IS certificate / CE certificate / European CE certificate / US FDA certificate / FDA Certificate / CE &amp; US FDA certificate (where applicable) |
|   |   | 50 |</p>
<table>
<thead>
<tr>
<th></th>
<th>AN-167</th>
<th>Drug Administration Equipment</th>
<th>Each</th>
<th>BIS certificate / IS certificate / CE certificate / European CE certificate / US FDA certificate / FDA Certificate / CE &amp; US FDA certificate (where applicable)</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>AN-168</td>
<td>Should be a microprocessor controlled ventilator with inbuilt 8” color TFT screen or more, integrated graphics and easy to use rotary knob operation providing support to Adult / Pediatric. a. Ventilator should have single user interface (External monitor will not except). b. Device must have internal air supply. c. Ventilator weight must have below 6 Kg; it can easily carry during Transportation. d. Should be suitable for use during transportation within &amp; outside the hospital. 2. Ventilator should have internal air supply. 3. Ventilator modes for Adult &amp; Pediatric: a. Volume CMV</td>
<td>Each</td>
<td>BIS certificate / IS certificate / CE certificate / European CE certificate / US FDA certificate / FDA Certificate / CE &amp; US FDA certificate (where applicable)</td>
<td>2</td>
</tr>
</tbody>
</table>
b. Volume SIMV
c. CPAP with PSV
d. PCMV
e. PSIMV
f. APRV (Optional Up gradation)
g. DuoPAP / BiPAP / BiPhasic (Optional Up gradation)
h. NIV
i. NIV – ST

4. The Ventilator should be supplied with advanced Lung protective ventilation modes such as: ASV or SMART CARE or PAV+ or NAVA.
5. Machine should also have Combination / Dual modes like: PRVC or APV or auto flow or PCVG.
6. Apnea Back-up and any other mode for safe ventilations offering both volume guarantee & lung protective strategies like volume limit etc.
7. Ventilator Flow sensor and Expiratory Cassata Type patient infection control.
   a. Ventilator Expiratory cassata / valve should STEAM Auto clave sterilizable.
   b. Ventilator Flow sensor and expiratory cassata / valve should have disposable type also.
8. Ventilator should have inbuilt volumetric CO₂ monitoring on same screen, Optional Up gradation
9. Entire system ventilator including internal air source should have 3 hours & above battery backup.
10. Controls: Tidal volume minimum 20 ml to 2000 ml in Volume Control Mode or better for Adult / Pediatric.
11. Should display vital monitoring parameters
   a. Vti, vte, MV, I:E, TI, TE, PIP, Mean pressure, Peep, Ppletue, FIO₂, f Tolatala , f Spont
   b. VLeak, Cstat Lung, P01, AutoPEEP, PTP, RCexp, RCinsp, Rexp Lung, Rinsp Lung, RSB Lung mechanics, WOBimp, etc.
   c. EtCO₂ Monitoring with waveform display in same screen (Optional).
12. Respiratory rates 4 to 120 BPM or better.
13. Peak flow setting from 0 to 240 lpm or better.
14. Ventilator should have flow trigger 0.1 Lpm – 20n Lpm
15. PEEP: 0 to 35 cm H₂O or better.
16. FiO₂: 21 to 100 %
17. I:E ratio 1:9 to 4:1 (DuoPAP / BiPAP / BiPhasic 1:9 to 4:1)
18. Inspiratory Time (TI) 0.1 to 12 s
19. Pressure control 5 to 60 cmH₂O, added to PEEP/CPAP
20. Pressure control 0 to 60 cmH₂O, added to
<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>21.</strong></td>
<td>Pressure ramp 25 to 200 ms</td>
</tr>
<tr>
<td><strong>22.</strong></td>
<td>Expiratory Trigger Sensitivity (ETS) 5 to 70% of inspiratory peak flow.</td>
</tr>
<tr>
<td><strong>23.</strong></td>
<td>Should have facility of Manual breath, standby, apnea backup ventilation, inspiratory hold, expiration hold, suctioning tool, start-up over body height and IBW.</td>
</tr>
<tr>
<td><strong>24.</strong></td>
<td>Facility to permanently deactivate O(_2) Alarm, if the O(_2) cell is depleted or defective.</td>
</tr>
<tr>
<td><strong>25.</strong></td>
<td>Ventilator should supply integrated nebulizer synchronized with inspiration cycle or better.</td>
</tr>
<tr>
<td><strong>26.</strong></td>
<td>Alarms: Low/High Minute Volume, Low/High Pressure, Low/High Tidal Volume, Low/High Rate, Apnea Time, Low/High Oxygen, Oxygen Concentration, disconnection, Loss of PEEP, Exhalation obstruction, Flow sensor, Power supply, Batteries, Gas supply.</td>
</tr>
<tr>
<td><strong>27.</strong></td>
<td>Should have Graphics display of target and actual parameters for tidal volume, frequency, pressure and minute ventilation.</td>
</tr>
<tr>
<td><strong>28.</strong></td>
<td>Should have Real-time waveforms Paw, Flow, Volume.</td>
</tr>
<tr>
<td><strong>29.</strong></td>
<td>Should have facility to show all loops simultaneously at least 1 Loops: P-V, V-Flow and P-Flow.</td>
</tr>
<tr>
<td><strong>30.</strong></td>
<td>Should have both graphical &amp; tabular trends for minimum of 1hr, 6hr, 12hr, 72hr with 1 minute resolution.</td>
</tr>
<tr>
<td><strong>31.</strong></td>
<td>Source input pressure of Air &amp; Oxygen: 280 to 600 kPa (41 to 87 psi).</td>
</tr>
<tr>
<td><strong>a.</strong></td>
<td>Ventilator should work on low pressure oxygen supply 5 – 16 LPM.</td>
</tr>
<tr>
<td><strong>32.</strong></td>
<td>Internal rechargeable battery with minimum operating time of at least 3 hours full system including Air supply source.</td>
</tr>
<tr>
<td><strong>33.</strong></td>
<td>Ventilator should have inbuilt up gradation SPO(_2) monitoring option facility on same screen.</td>
</tr>
<tr>
<td><strong>34.</strong></td>
<td>Should have Interface connectors USB &amp; RJ 45 as standard.</td>
</tr>
<tr>
<td><strong>35.</strong></td>
<td><strong>Each Ventilator should have supply following accessories:</strong></td>
</tr>
<tr>
<td></td>
<td>• <strong>Standard Accessories:</strong></td>
</tr>
<tr>
<td></td>
<td>i. Ventilator &amp; Mobile Trolley</td>
</tr>
<tr>
<td></td>
<td>ii. Operating Manual</td>
</tr>
<tr>
<td></td>
<td>iii. Internal Air Source / External Air Compressor</td>
</tr>
<tr>
<td></td>
<td>iv. Tubing Holder Set</td>
</tr>
<tr>
<td></td>
<td>v. 3 nos Reusable Patient Circuit</td>
</tr>
<tr>
<td></td>
<td>vi. Test Bag</td>
</tr>
<tr>
<td></td>
<td>vii. Air &amp; Oxygen hose</td>
</tr>
<tr>
<td></td>
<td>viii. Reusable steam sterilizable flow sensor 3 nos (Not disposable or semi reusable) or 200 nos</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>disposable flow sensor or Semi reusable.</td>
<td></td>
</tr>
<tr>
<td>ix. Expiratory cassata and flow sensor 20 nos disposable steam sterilizable or 10 nos reusable flow sensor including expiratory cassata.</td>
<td></td>
</tr>
<tr>
<td>x. Power Cable Patient Circuit support arms.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>THS-402</td>
</tr>
<tr>
<td></td>
<td>PMRA-115</td>
</tr>
<tr>
<td>Immobilization equipments like, Cervical Collar Hard (Small, Medium, Large) Cervical collar provides preventive care for minor neck injuries like strains, sprains and automobile whiplash &amp; sports injury. Designed to provide comfortable immobilization without the harsh uncomfortable firmness. The contour of the collar is anatomically designed to provide the correct posture and support. It is adjustable and is made with nylon, Velcro enclosure. It provides soft to rigid support to patients to limit movement or help prevent harmful neck motions. Also features eyelids for ventilation. Sizes : Neck circumference S: 10 - 12 inches; M: 12 - 14 inches L: 14 - 16 inches; XL: 16 -18 inches</td>
<td>Each</td>
</tr>
<tr>
<td></td>
<td>PMRA-116</td>
</tr>
<tr>
<td>Immobilization equipments like, Cervical Collar Soft (Small, Medium, Large) 40 density foam with cotton rib with soft nylon Velcro enclosure, designed to immobilize neck after minor injuries line sprain from sport injury or other daily activities. Sizes : Neck circumference S: 10 - 12 inches; M: 12 - 14 inches L: 14 - 16 inches; XL: 16 -18 inches</td>
<td>Each</td>
</tr>
<tr>
<td></td>
<td>PMRA-117</td>
</tr>
<tr>
<td>Immobilization equipments like, Universal Wrist Splint For sprains, strains, post-cast situations used for or sports, work or home related injuries. Dual-tension elastic provides graduated support. Contoured, removable metal splint adds stability without restricting circulation or muscle tone. Easily adjustable hook-and-loop fasteners. Neoprene cloth</td>
<td>Each</td>
</tr>
<tr>
<td>No.</td>
<td>Code</td>
</tr>
<tr>
<td>-----</td>
<td>--------</td>
</tr>
<tr>
<td>15</td>
<td>PMRA-118</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>PMRA-119</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>PMRA-120</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>PMRA-121</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
FORMAT FOR CHECK LIST in respect of
“E- TENDER FOR SURGICAL/HOSPITAL ITEMS FOR TWO YEARS
FROM THE DATE OF AWARDING CONTRACT FOR THE YEARS 2017-19

NIT No.: - Date:-

Name of the Bidder: ____________________________________________________________

Full Address of the Bidder: ____________________________________________________
____________________________________________________________________________

____________________________________________________
E-Mail ________________________________________________________________

Contact person relating to Bidder & Mob. No.: - ______________________________

Tendering as: Manufacturer / Direct Importer / Authorised Distributor (Pl strike out which
is not applicable)

Status of Manufacture: State based S.S.I. / State based PSU / State based others /
Others Outside WB (Pl strike out which is not applicable)

Annual Turn Over of bidder : Rs...........................................

Name of the proposed Distributor, if any:
with Address & Contact No.
(For Out-of-state Bidder only)

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Items</th>
<th>PI mark</th>
<th>Folder name &amp; Page no</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Application submitted in Annexure I</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>2.</td>
<td>Bidder’s Information Sheet in Annexure I(a)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>3.</td>
<td>Authorization letter of signatory from the Company for DSC in Annexure II</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>4.</td>
<td>Annexure III (Certification from Chartered Firm about the % of sale in the open market &amp; Annual Turnover of the bidder)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>5.</td>
<td>Copy of agreement between the Manufacturer and the Distributor as prescribed, if distributor is proposed to be engaged in Annexure IV(a)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>6.</td>
<td>Certificate from CA Firm about the annual Turn Over of the Distributor of the year 2013-14, 2014-15, 2015-16 or 2016-17 in Annexure IV(b)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7.</td>
<td>Particular of the Distributor, if any in Annexure IV(c) with all supporting documents submitted properly or not.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>8.</td>
<td>Annexure V Declaration from existing CMS approved Vendor about supply of 80% over</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>ordered value or at least 100% of tentative requirement of the item/items for the tender period.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>9.</td>
<td>Affidavit for No Conviction from Notary Public/Judicial Magistrate/Executive Magistrate, as per Annexure VI</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>10.</td>
<td>Certificate of registration / EM II in respect of domestic SSI within the State of West Bengal</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>11.</td>
<td>Copy of PAN Card of the Bidder Company</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>12.</td>
<td>Valid 15 digit Goods and Services Taxpayer Identification Number (GSTIN) under GST Act, 2017 in Annexure I(a)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>13.</td>
<td>Trade Licence / Enlistment Certificate</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>14.</td>
<td>Registration with Registrar of Companies</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>15.</td>
<td>Drug Licence and its validity document</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>16.</td>
<td>Current GMP certification with Schedule M &amp; MIll compliance certificate</td>
<td>Yes</td>
<td>NO</td>
</tr>
<tr>
<td>17.</td>
<td>Up-to-date Drug endorsement copy / Import License (F-10) for each item quoted (marked with CMS Cat. No.)</td>
<td>Yes</td>
<td>NO</td>
</tr>
<tr>
<td>18.</td>
<td>BIS certificate / IS certificate / CE certificate / US FDA certificate / CE &amp; US FDA certificate of the product or products.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>19.</td>
<td>Certificate of Marketing Certificate of the products from the State Drug Control authority for the year 2016-17 (for drug item)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>20.</td>
<td>Self certified Marketing cum Production Certificate of the product or products duly countersigned by CA firm for the year 2016-17 (for non drug item)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>21.</td>
<td>Current No-conviction certificate from the Director, Drug Control of the concerned State.</td>
<td>Yes</td>
<td>Not applicable</td>
</tr>
<tr>
<td>22.</td>
<td>Income Tax Return for the Assessment Year 2016-17</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>23.</td>
<td>Export-Import License with validity and IEC Code(for Direct Importers)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>24.</td>
<td>P/L Accounts &amp; Balance sheet for the year 2016-17</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>25.</td>
<td>Technical Data Sheet in excel sheet as provided Annexure-VII</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>
Annexure I

APPLICATION FORMAT

(To be furnished in the Company’s official letter pad with full address and contact no, E-mail address etc)

To
The Deputy Director of Health Services (E&S),
Central Medical Stores,
141, Acharya Jagadish Chandra Bose Road,
Kolkata – 700 014

Sub:   NIT for surgical/hospital items for the Government health facilities of West Bengal for two years from the date of declaration of AOC.

Ref:   DDHS (E&S) N.I.T. No ……………………………………dated ………………………

Sir,

Having examined the pre-qualification & other documents published in the N.I.T, I/we hereby submit all the necessary information and relevant documents for evaluation:

1. That the application is made by me/us on behalf of………………………………………………
   in the capacity……………………………………………..…duly authorized to submit the offer as
   a manufacturer/direct importer/ both as manufacturer and direct importer/ Authorised distributor (Strike out which are not applicable). The authorization letter from the Company is attached in Annexure II.

2. We accept the terms and conditions as laid down in the tender document and declare that we shall abide by it for throughout the tender period including its extensions, if any.

3. We are offering rate for the item/items with manufacturing/importing capacity and assured supply as per requirement of the NIT as per Annexure III and also in the technical Data sheet to the Health & Family Welfare Department, Government of West Bengal.

4. We declare that we have achieved / have not achieved (strike out whichever is not applicable) minimum 10% of sale of the production in the open market other than sale in the Health & Family Welfare Dept, Government of West Bengal. The certification from Chartered Firm is attached as per Annexure III.

5. We declare that we have not been convicted under any provision of Drug and Cosmetics Act, 1945 and any other law in force from any competent authority or by any Court of law.

6.

   a. We propose that the order and bill should be raised in our name. For this, We have appointed M/S .......................................................... having its office at .........................................................., Mobile
b. We declare that we have no Sales depot or C&F in West Bengal. We propose that order and bill should be raised in favour of our authorized distributor. For that purpose, we have appointed M/S………………………………………… having its office at……………………………………………………………………………………………………………………

...........Mobile no ................................................................. E mail address ................................................................. (address with contact no and e mail address) as authorized Distributor who will receive order and payment in his name on our behalf.

c. The agreement between ourselves and the distributor & other documents as prescribed is attached in annexure IV( This clause is applicable for out of state manufacturers).

7. We are the existing Bidders in the CMS / we are not the existing Bidder in the CMS (Pl strike out whichever is not applicable).

8. Being an existing CMS approved Equipment Bidder for the year 2016-17, necessary declaration of items wise Good Received Note (GRN) over ordered value through Store Management Information System (SMIS) is given in Annexure V (applicable for existing Bidders only, others should strike out the clause)

9. In the event of being selected, I will make the supply within the stipulated period of 45 days excepting the condition which is beyond our control.

10. We understand that:

   (a) Tender Selection Committee/ H&FW Dept can amend the scope & value of the contract bid under this project.

   (b) Tender Selection Committee/ H&FW Dept reserves the right to reject any application without assigning any reason.

Date :-                                      Signature of applicant including title

made.                                      and capacity in which application is

Contact no :                                 (seal)

Mobile :

E mail address :
<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Name of the Bidder Company</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Tendering as:</td>
<td>Manufacturer / Direct Importer / Authorised Distributor (PL strike out whichever is not applicable)</td>
</tr>
<tr>
<td>3.</td>
<td>Name of the authorized person to submit the Bid (Who holds DSC)</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Telephone No of authorized person</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Mobile no of the authorized person</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Fax No of Bidder</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>E mail ID of Bidder</td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>Type of Legal Entity</td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>Year of Incorporation/Registration</td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>Registered Address</td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>Correspondence Address of Head Office</td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>Telephone No of Head office</td>
<td></td>
</tr>
<tr>
<td>13.</td>
<td>Fax No of Head office</td>
<td></td>
</tr>
<tr>
<td>14.</td>
<td>E mail ID of Head office</td>
<td></td>
</tr>
<tr>
<td>15.</td>
<td>Correspondence Address of local office, if any</td>
<td></td>
</tr>
<tr>
<td>16.</td>
<td>Telephone No of local office</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Description</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>-----------------------------------</td>
<td>---</td>
</tr>
<tr>
<td>17</td>
<td>Fax No of local office</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Email ID of local office</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Name of the authorized Distributor,</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Telephone No of authorized Distributor,</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Fax No of authorized Distributor,</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Email ID of authorized Distributor,</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Valid 15 digit Goods and Services Taxpayer Identification Number (GSTIN) under GST Act, 2017 of the Bidder</td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Valid 15 digit Goods and Services Taxpayer Identification Number (GSTIN) under GST Act, 2017 of the Distributor</td>
<td></td>
</tr>
</tbody>
</table>

Signature of the authorized person
Annexure II

Authorization letter in favour of the applicant from the competent authority - (if the applicant is not the Sole Proprietor / Authority)

FORMAT

(To be furnished in the Company's official letter pad with full address and contact no, E-mail address etc)

(TO WHOM IT MAY CONCERN)

This is to certify that Mr. ..........................................................(Name), employee of this Organisation as ........................................................ (Official Designation) is hereby authorised to submit tender online, Vide NIT No..............................................................,

Dated................................. on behalf of the Organisation. Sri ........................................................ holds the DSC from NIC to submit the bid on-line

Signature of the competent authority

Name in Block Letters..............

Designation.......

Seal

...........................................

(Signature of the Authorised Person)

Signature of Mr.................................

.....................................................(Designation), is hereby attested.

Signature of the competent authority

Name in Block Letters..............

Designation.......

Seal
This is to certify that having been examined the audited Balance Sheet & P/L accounts and other records of

M/S ........................................................having its office at ..................................................,

It is certified that M/S .......................................................... have achieved minimum 10% sale of the production / importing /Sale of each of the following product(s) in the open market other than Health & Family Welfare Dept, Government of West Bengal for the year 2013-14, 2014-15 & 2015-16

Name of the product(s).

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Name of the product</th>
<th>CMS Cat No.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

and

It is also certified that Annual Turnover of the firm for the Financial years 2013-14, 2014-15, 2015-16 or 2016-17 are Rs...........Cr., Rs...............Cr. or Rs.............Cr. respectively (as per P/L accounts & Balance Sheet of the firm submitted)

Signature of the Chartered Firm with Registration No

Countersigned

Signature of the authorised signatory (bidder)
All out of the State manufacturers / bidders may have a distributor in this State. If case of proposing appointment of distributor, copy of agreement signed between the bidder and the authorized Distributor as proof be submitted here.
(Certificate from Chartered Firm in the official pad of CA firm for distributor)

This is to certify that having been examined the audited Balance Sheet & P/L accounts and other records of M/S ..........................................................having its office at .........................................................,

It is also certified that Annual Turnover of the firm for the Financial year 2013-14, 2014-15, 2015-16 or 2016-17 is Rs.............Cr., Rs.............Cr., Rs.............Cr. or Rs.............Cr. respectively (as per P & L & Balance Sheet of the firm.)

Signature of the Chartered Accountant with Registration No and Official seal.

Countersigned

Signature of the signatory (distributor)
## Annexure IV(c)
### Particulars of Distributor

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td><strong>Name of the Distributor</strong></td>
<td>:</td>
</tr>
<tr>
<td>2.</td>
<td><strong>Address of the Distributor for communication</strong></td>
<td>:</td>
</tr>
<tr>
<td>3.</td>
<td><strong>Telephone No</strong></td>
<td>:</td>
</tr>
<tr>
<td>4.</td>
<td><strong>Mobile no</strong></td>
<td>:</td>
</tr>
<tr>
<td>5.</td>
<td><strong>Fax No</strong></td>
<td>:</td>
</tr>
<tr>
<td>6.</td>
<td><strong>E mail ID</strong></td>
<td>:</td>
</tr>
<tr>
<td>7.</td>
<td><strong>Valid Drug License No (for Drug Items only).</strong></td>
<td>:</td>
</tr>
<tr>
<td>8.</td>
<td><strong>Drug License valid upto</strong></td>
<td>:</td>
</tr>
<tr>
<td>9.</td>
<td><strong>Trade License valid upto (If not applicable, please mention)</strong></td>
<td>:</td>
</tr>
<tr>
<td>10.</td>
<td><strong>PAN No.</strong></td>
<td>:</td>
</tr>
<tr>
<td>11.</td>
<td><strong>Whether IT Return submitted for the Assessment year 2016-17</strong></td>
<td>:</td>
</tr>
<tr>
<td>12.</td>
<td><strong>GSTIN Registration No.</strong></td>
<td>:</td>
</tr>
</tbody>
</table>
| 13. | **Annual Turnover for the year:**
| 14. | **No Conviction Certificate for the year 2015-16 / 2016-17, issued from the Drug control authority (for Drug Items only).** | : Yes / No |
| 15. | **Whether agreement executed with the parent Vendor.** | : Yes / No |
| 16. |   |   |

**Signature of the authorised signatory (bidder)**
Annexure V

Declaration from existing CMS approved item Bidders about supply of 80% over ordered value made for each item during the year 2016-17 or at least 100% of tentative requirement of the item/items for the tender period through STORE MANAGEMENT INFORMATION SYSTEM as on the date of submission of tender.

<table>
<thead>
<tr>
<th>Sl No</th>
<th>CMS Catalogue No</th>
<th>Name of the item</th>
<th>% of GRN over order value for the year 2016-17</th>
<th>% of supply over tentative requirement of the item for the tender period</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Signature of the authorized signatory
ANNEXURE VI

Affidavit Proforma

(On Non Judicial Paper worth Rs 50.00)

(Sworn before the Notary Public / Judicial Magistrate/Executive Magistrate on or after the date of publication of the Tender Notice)

I, Sri/Smt. ………………………………………………………………………

The Managing Director/Proprietor (etc.) of the Firm.

……………………………………………………………………… (Name of the firm)

At (address)…………………………………………………………………….…

P.O…..

…………………………………………………

P.S………………………………Dist……………………………………………

Do hereby solemnly affirm and declare as follows:

1. That I have not ever been convicted of any offence making myself liable to be disqualified to supply of Equipment etc. to any Govt. or Govt. undertaking Organization /Institution in the State of West Bengal or other State or States.

2. That no case is pending against me or against my firm in any criminal court of law to supply of Surgical Hospital Equipment item to the Govt. or Govt. undertaking Organization / Institution in the State of West Bengal or other State or States.

3. That my firm is not debarred/blacklisted as a whole or, for any item/items (quoted in this tender) at present by any Govt. or Govt. undertaking Organization / Institution in the State of West Bengal or other State or States of India.

4. That, I also undertake that I will inform the matter of debarment or blacklisting of any item for any item/items (quoted in this tender), if any by any Govt. or Govt. undertaking Organization / Institution in the State of West Bengal or other State or States of India during the pendency of the tender period to the DDHS(E&S), Central Medical Stores, Kolkata.

5. That, I also declare that the rate offered of the item(s) quoted is in conformity with the DPCO, GOI norms wherever applicable relating to MRP. I also declare that the quoted rate of the item/items is less than rate available in the market.

6. That, I also declare that if any information subsequently found incorrect or false will it automatically render the tender submitted by me cancelled and make me liable for penal/legal action as per law of the country.

7. That I do further affirm that the statements made by me in this tender are true to the best of my knowledge and belief and all the documents attached are genuine & correct.

Signature of the Deponent(s).
Name in Block letters : 
Designation : 

38
ARTICLES of Agreement made on this ____ day of __________ (Month), 2017 between the Governor of the State of West Bengal (hereinafter referred to as the ‘Governor’ which expression shall unless excluded by or repugnant to context be deemed to include the successor in office and assigns) represented by the Deputy Director of Health Services (Equipment & Stores) hereinafter called the DDHS (E&S) having its office(s) at 141, A J C Bose Road, Kolkata 700 014 ON ONE PART,

AND

M/S ........................................................................................................................................, having its office at ........................................................................................................................................, Carrying on business at ........................................................................................................................................, as Manufacturer / Direct Importer / Authorised Distributor (Hereinafter referred to as the ‘VENDOR’ which terms shall unless excluded or repugnant to the context be deemed to include the Partners and Principals of the said firm and their respective heirs, executors, administrators representative and assigns/ and assigns) on the OTHER PART.

1. WHEREAS, the Dy. Director of Health Services (E&S), having expressed intention of preparing rate schedule for procurement of Items for two years from the date of declaration of Award of Contract (AOC) for the year 2017-19 and its extension upto 6 (Six) months (if any) by the Direct Purchasing Health Units across the State of West Bengal in respect of e tender vide NIT No. ........................................ Dated ........................................ read with corrigendum notice there to in the NIC portal vide no https://wbtenders.gov.in on specified terms and conditions and the Vendor has been selected as approved vendor and agreed to supply such items on such terms and conditions, the present agreement is drawn up and executed, incorporating inter-alia the said terms and conditions in the Schedule to the Agreement.

2. In this Agreement whenever rights, privileges, discretions and powers have been said to be exercisable by the “Government of West Bengal”, such rights, privileges, discretions and powers will be actually exercisable by the Dy. Director of Health Services (E&S), the heads of the direct demanding units or the Department of Health & Family Welfare, Government of West Bengal, unless otherwise specified.

3. The Vendor agrees to, according to and in compliance with the orders as may be placed by the Deputy Director of Health Services (E&S), West Bengal /Medical
The Vendor agrees that the accepted rates as provided in the accompanying schedule shall hold good throughout the tender period up to 2 years from the date of declaration of AOC as well as for such period for which the tender may be extended unless otherwise revised by Govt. of West Bengal.

5. The Vendor agrees not to assign, transfer or sublet the rights and benefits under this contract either in part or in whole to any other party.

6. The Vendor agrees not to make any representation for deviation from their quoted rates and /or terms and conditions which may cause any delay in supply and will invoke the Penal provisions of this agreement except in conditions of Force Majure wherein in conditions like strikes, war like situation, severe natural calamities, major fires, acts of God the Vendor is unable to carry out his commitment of meeting the terms of this contract.

7. All supplies will have to be completed by door delivery within the time limit as specified in the Tender from the date of order in the SMIS System from the procuring units. NO RELAXATION ON ANY ACCOUNT WILL BE ALLOWED FOR CONDONING DELAYED SUPPLIES.

8. The selected vendors would have access to the Vendor Portal from which, the procurement order, Goods Received Notes (GRN) and Bill Status can be seen online & downloaded. The procurement order generated out of Vendor portal will have the same meaning and strength that of physical order.

9. The vendor agrees to comply with Bar Coding in the secondary and Tertiary packing, Labeling, Packaging norm as laid down in the instant tender.

10. The vendor hereby declares that no case is pending against him and against the company. The vendor also agrees to inform the Central Medical Stores about the change in scenario relating to no conviction and non debarment or non blacklisting during the tender period.

11. The vendor agrees that all legal jurisdiction of any unsettled dispute will be subject to the High Court of Kolkata jurisdiction.

12. This contract is valid for two years from the date of declaration of Award (AOC) and its extension thereto.
13. The vendor agrees to comply with other terms and conditions laid down in the NIT document during the tender period and is aware of the provision of timely supply, penalty for late delivery and provision of penalty to be imposed for violating other terms and conditions laid down in the tender document.

Approved Items with Rate

<table>
<thead>
<tr>
<th>SL No</th>
<th>Cat No</th>
<th>Name of the item</th>
<th>Accounting Unit</th>
<th>Tentative requirement</th>
<th>Rate per accounting unit</th>
<th>Amount and number of Performance Bank guarantee</th>
<th>Name of the Bank with name of the Branch and IFSC code</th>
<th>% of GST</th>
<th>% of Excise Duty</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

IN WITNESS WHEREOF the parties to these presents have hereunto set and subscribed their respective hands and seals the ______________________________day/month and year first above written.

SIGNED AND DELIVERED BY THE :

Signed for and on behalf of the Vendor

by presence of.

1.

2.

Signed for and on behalf of the Governor

Of the State of West Bengal

by presence of.

1
Annexure IX

Certification of remittance of Performance Bank Guarantee by the Bank in official Pad

<Name>

<Designation>

<Address>

<Phone Nos.>

<Fax Nos.>

i. This is to confirm that the performance Bank Guarantee relating to M/S .......................................................... amounts to Rs ........................................... ( Rs .................................) only has been credited to the following accounts of the Govt of West Bengal. The said guarantee is valid upto ................

a. Name: WB Govt Pooling A/C For Performance Guarantee Account No:

   000605030134

b. IFSC Code: ICIC0000006
c. MICR Code: 70229002
d. Branch Address: ICICI Bank, 22, R.N.Mukherjee Road, Kolkata-700001, West Bengal.

ii. It is condition of our liability for payment of the guaranteed amount or any part thereof arising under this bank guarantee that we receive a valid written claim or demand for payment under this bank guarantee on or before <Insert Expiry Date>) failing which our liability under the guarantee will automatically cease.

Signature of the Branch Manager with Bank’s seal
IMPORTANT INFORMATION ABOUT ONLINE TENDERING

1st Step: SEARCHING THE TENDER

- After Login on wbtenders.gov.in with DSC, click on Search Active Tenders
- In keyword write WBHF or Tender memo no. as reference no. on NIC website.

2nd Step: DOWNLOADING THE TENDER DOCUMENTS

- After searching the particular tender you will find NIT & BOQ, click on those to download and save the documents.
- While downloading the BOQ please do not change the name of the BOQ and quote as per the exact Accounting Unit, as mentioned in the Equipments list under Annexure-A.

3rd Step: REGARDING ‘MY DOCUMENTS’

- First upload all the My Documents before starting the Bid Submission process.
- While starting the Bid submission process an option will arise “Whether EMD Exempted or Not”; after that you will find an option “Do you want to submit other Important documents”.
- Here click on YES to submit the ‘MY DOCUMENTS’ and then tick mark the check boxes to tag those documents in that particular tender.
- Then you have to tick the items you want to submit Bid.
- This process will be carried out in each and every GROUP that you are participating.

4th Step: REGARDING ‘BOQ’

- While first opening the BOQ there is an option at top of the rows as “Security warning Macros have been disabled” Click on options
  - Select “Enable the content” then OK.
  - This will provide you the Total in Words

5th Step: Submission Of EMD through Govt Pooling account

- After uploading of Technical Bid And also the Financial Bid, an option will arise
  - “Click ‘Next’ button to proceed online payment of necessary EMD”