



OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH OFFICER, PURI

Email ID:-ntcppuri@gmail.com, Phone:-06752-227750

Tender Call notice no- 75/NCD Date- 02/03/19

SHORT TENDER CALL NOTICE

Sealed quotation in prescribed format is invited from intending registered firm/ agencies/ dealers for printing and supply of Booklet to the undersigned. The sealed quotations should reach to the undersigned on or before 14/03/2019 at 5.00PM by regd. Post/ Speed Post/ Courier only. The quotation received after the scheduled date and time and received without relevant documents will summarily be rejected.

The quotation will be opened on 15/03/2019 at 11.00 Am in the office chamber of the CDM&PHO, Puri in the presence of the bidders or their authorised representative.

Terms & Conditions:

1. The envelope containing the sealed quotations must be super scribed with "QUOTATION APPLIED FOR PRINTING AND SUPPLY OF PATIENT CARD FOR NCD CELL, PURI" with their full address and contact no. for correspondence.
2. The undersigned reserve the right to cancel or accept any or all quotation(s) without assigning any reason thereof.
3. The quantity of patient card to be procured may vary as per requirement.
4. Any increase in the rate during the course of supply shall not be accepted unless confirmed by this office; and
5. The incidental expenses viz package, carriage, freight and any other incidental charges should be borne by the firm / agencies/ supplier;

A-Specification of Booklet:

- Size -A 4(A3 divided by 2= 4 pages both side); total 12 pages both side A4 size.
- process, multicolour 90 GSM Art paper
- Front and back pages should contain pictorial message with multi-colour;
- All pages should be stapled; and the Prototype will be provided by this office.

Required documents:

1. Photocopy of the PAN card of the Party.
2. Valid authorised VAT Clearance certificate; and
3. Prototype of the above items.

Encl: Application Format

Sd/-

Chief District Medical & Public Health Officer, Puri

Memo No. 76 /NCD Date 02/03/19

Copy to the Notice Board, CDM & PHO Office, Puri/ Section Officer, CDM & PHO Office, Puri/ Municipality Office, Puri/ for necessary information and wide publication.

[Signature]
2/3/19

Chief District Medical & Public Health Officer, Puri

Memo No. 77 / Date 02/03/19

Copy to the District Informatics Officer, NIC, Puri. He is requested to host this advertisement in district website (www.puri.nic.in) upto 14/03/2019.

[Signature]
2/3/19

Chief District Medical & Public Health Officer, Puri

APPLICATION FORM

1. Name of the Organisation/ Firm/ Supplier :

2. Status of the Applicant:-

- Individual (or)
- Partnership(or)
- Firm (or)
- Company

3. Address:-

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Phone No:

E.mail ID:

Items:

Sl. No.	Specification of Booklet	Rate quoted per piece (including all charges)
1	<ul style="list-style-type: none">• Size –A 4(A3 divided by 2= 4 pages both side); total 12 pages both side A4 size.• process, multicolour 90 GSM Art paper• Front and back pages should contain pictorial message with multi-colour;• All pages should be stapled; and the Prototype will be provided by this office.	

Declaration

I do hereby declare that all statements and facts furnished above are true , complete and correct in all respect to the best of my knowledge and belief. I also promise to supply the items within the stipulated period provided by the Chief District Medical & Public Health Officer, Puri otherwise I will be liable to compensate the loss caused by the delay.

Place: Full signature of the Applicant

Date: With designation