

ENCLOSED IN SEPARATE SHEET

ANNEXURE- II

TURNOVER CERTIFICATE

I hereby certify that M/s. _____ (Name & address _____) is having the following annual turnover and the statement is true and correct -

Sl. No.	Financial Year	Turnover
1.	2015-16	Rs. _____ (Rupees _____) only
2.	2016-17	Rs. _____ (Rupees _____) only
3.	2017-18	Rs. _____ (Rupees _____) only

Signature of the Bidder:

Date:

Signature of Auditor/ Chartered Accountant

Membership No.:

Seal:

Declaration

To

The Chief District Medical & Public Health Officer

PURI

I/We _____ have carefully read the tender document and confirm my/ our eligibility as required. I/We solemnly declare that I/ we have never been convicted by any court of law or blacklisted/ debarred on financial/administrative/techno-legal ground by any appropriate authority. By submitting this bid, I/ we assure my/ our agreement to the terms and conditions of tender and will abide by the same if contract is awarded to me/ us.

Currently running criminal/civil suits against my/ our firm are:

(Write "NIL" if no court case pending otherwise give the list and enclose case details)

Signature of the bidder:

With seal

NOTE: To be given in a Rs. 10/- stamp paper.

General Details of the Bidder

Sl. No	Particulars	Details
1.	Name of the Organization	
2.	Nature of Business	
3.	Year of Inception	
4.	Name and Details of the Proprietor, Firm/ Director of Company/ Organization/ Agency/Supplier/Distributor Mobile No: Email Address:	
5.	Full Address of Regd. Office Telephone Number Fax. No. E-Mail Address	
6.	Website of the Organization	
7.	PAN	

AGREEMENT

This agreement is made on this _____ day of _____, 2019.

BETWEEN

Office of the Chief District Medical & Public Health Officer, PURI, having its registered office at PURI (Herein after "The 1st Party")

AND

M/s. -----, having its registered office at -----

--, represented through its -----, duly authorized for the purpose (Herein after "The 2nd Party").

Whereas the 1st Party has invited tender for "Supplying Equipment- **DISPOSABLE GOWN, DISPOSABLE DRAW SHEET & STRETCHER FOR SAMMPurNA**" vide tender reference no. _____ dt.

2019. The 2nd Party submitted its bid as per tender requirement and being the L1 bidder, the 1st Party has finalized the tender in favour of the 2nd Party for supplying equipment DISPOSABLE GOWN, DISPOSABLE DRAW SHEET & STRETCHER FOR SAMMPurNA at the prices/rates indicated against various components (herein after "Contract Price") on the terms and condition set forth in this agreement. The letter of award was issued vide LOA No. _____ dated _____ inviting to execute the contract. And whereas the 2nd Party has deposited the Performance Security of Rs. _____ vide a Demand Draft/Bank Guarantee No. _____ dt. _____.

NOW THIS AGREEMENT WITNESSES AS FOLLOWS:

1. The following documents shall be deemed to form and be read and construed as integral part of this Agreement, viz.:
 - a) Conditions of Contract
 - b) Submissions and Declaration as part of the Proposal submitted
 - c) Notification of Award issued by the Office of the CDM&PHO, PURI
2. In consideration of the payments to be made by the 1st Party to the 2nd Party, the 2nd Party hereby covenants with the 1st Party to provide the agreed services uninterrupted in all respects as per the provisions of this Contract.
3. The 1st Party hereby covenants to pay the 2nd Party in consideration of the provision of the agreed services, the Contract Price or such other sum as may become payable under the provisions of the Contract at the times and in the manner prescribed in the Contract.

4. TENURE OF CONTRACT

- a. The contract is for a period of one (1) years from the date of signing of contract.

- b. In the event of the contract being terminated by the 1st Party before the completion of the contract period for reasons of unsatisfactory performance or breach of contractual conditions, the Performance Security of the 2nd Party shall be liable to be forfeited.

For and on behalf of the Agency

Chief District Medical & Public Health Officer, PURI

Authorized Signatory

Authorized Signatory

(Name with Signature)

(Name with Signature)

Date:

Date:

1. Witness

1. Witness

2. Witness

2. Witness

MODEL BANK GUARANTEE FORMAT FOR PERFORMANCE SECURITY

[Refer Para 7]

To

The Chief District Medical & Public Health Officer

PURI

WHEREAS (Name and

Address of the Service Provider) (here in after called "the Service Provider") has undertaken, in pursuance of Tender Reference No. dated..... for engagement of commercial transport vehicles for **Supplying Equipment, DISPOSABLE GOWN, DISPOSABLE DRAW SHEET & STRETCHER FOR SAMMPurNA** (herein after called "the contract").

AND WHEREAS it has been stipulated by you in the said contract that the Service Provider shall furnish you with a bank guarantee by a scheduled commercial bank recognized by you for the sum specified therein as security for compliance with its obligation in accordance with the contract.

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

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

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

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

This guarantee shall be valid until theday of

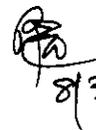
We theBranch..... undertake not to
revoke the guarantee during its currency expect with the previous consent of the Office of the
Collector & District Magistrate, PURI in writing.

WeBranch..... further agree that a mere
demand by the Office of the Chief District Medical & Public Health Officer, PURI is sufficient for us to pay
the amount covered by the Bank Guarantee without reference to the said Agency and protest by the said
Agency cannot be a valid ground for us to decline payment to the Office of the Chief District Medical &
Public Health Officer, PURI .

(Signature of the authorized officer of the Bank)

Name and designation of the Officer

Seal, name & address of the Branch of the Bank


8/3/2019