



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

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

Letter No-..... Date-.....

To
The Deputy Director (Advertisement)
I & PR, Govt. of Odisha, Bhubaneswar.

Sub: - Publication of Tender call notice in two leading Odia daily News Paper.

Sir,

With reference to subject cited above, I request you to kindly publish the bellow tender call notice in two leading Odia daily News Paper in minimum size and conformation in this matter may be sent to this office mail (ntcppuri@gmail.com) for further action at this end.

This is for your kind information and necessary action.

 <p>OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH OFFICER, PURI DISTRICT PROGRAMME MANAGEMENT UNIT TENDER CALL NOTICE FOR PRINTING MATERIALS & HIRING OF VEHICLES FOR NCD PROGRAMME.</p> 
<p>Tender No-..... Date-.....</p> <p>Sealed tender in prescribed format is invited from intending registered firm/ agencies/ dealers/individuals for printing and supply of CBAC form, family Folder, Referral Slip, NCD Register, Patient treatment card and hiring of vehicle(daily basis) Bolero, Travera, swift Dzire etc (4 seater, 7 seater, 9 seater) to the undersigned. The sealed tender should reach to the undersigned on or before dt. 10/10/2019 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 dt.11/10/2019 at 11.00 AM in the office chamber of the CDM&PHO, Puri in the presence of the bidders or their authorised representative.</p> <p>The envelope containing the sealed tender must be super scribed with “TENDER APPLIED FOR PRINTING AND SUPPLY OF CBAC FORM/ PATIENT CARD/ Hiring of vehicle FOR NCD CELL, PURI” with their full address and contact no. for correspondence. The details of the terms and conditions are available in district website, www.puri.nic.in. The authority reserves the right to accept or reject any or all bids fully or partially without assigning any reason thereof.</p> <p style="text-align: right;">Sd/-</p> <p style="text-align: right;">Chief District Medical & Public Health Officer, Puri.</p>

CDM&PHO, PURI

Memo no-..... Date.....

Copy forwarded to DIO, NIC, Puri for uploading the database in District website from dt.24.09.2019 to 10.10.2019.

CDM&PHO, Puri

Memo no-..... Date.....

Copy forwarded to Issue & Dispatch section for information and necessary action, they are requested to receive the bid document and keep it sealed and forward the same to DPMU for being opened at the presence of purchase committee members on the specified dates.

CDM&PHO, Puri

Memo no-..... Date.....

Copy forwarded to all wing officers, EPEDEMIOLOGIST NCD, DPM,DAM as a member of purchase committee to remain present on dt **11/10/2019** at 11 AM in the office chamber of CDM&PHO ,Puri for opening of the tender and Quotations.

CDM&PHO, Puri



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Terms & Conditions:

1. The envelope containing the sealed quotations must be super scribed with "TENDER APPLIED FOR PRINTING AND SUPPLY OF CBAC FORM/ PATIENT CARD/ Hiring of vehicle FOR NCD CELL, PURI" with their full address and contact no. for correspondence.
2. Interested registered firm/ agencies/ dealers/individuals may submit their application along with **Rs.1000/- (rupees one thousand only) demand draft non refundable towards tender cost in favour of ZSS, NPCDCS Payable at Puri from any scheduled Bank.**
3. **Separate and sealed envelope for Technical and financial bid should be inside the envelope.**
4. The undersigned reserve the right to cancel or accept any or all quotation(s) without assigning any reason thereof.
5. The quantity of printing to be procured may vary as per requirement.
6. The vehicle order will be given as per the requirement of the office.(4 seater/ 7seater/ 9 seater).
7. Only vehicle hiring charges and fuel charges will be paid to the L1 bidder through PFMS. No other charges like Driver/ driver food/ maintenance etc will not be accepted.
8. Any increase in the rate during the course of supply shall not be accepted unless confirmed by this office; and
9. The incidental expenses viz package, carriage, freight and any other incidental charges should be borne by the firm / agencies/ supplier;

A-Specification of CBAC form:

- Size –A 4 Size ordinary paper.

B- Family Folder:

- Size –A 4 Size ordinary paper.

C- Referral Slip:

- Size –A 4 Size ordinary paper.

D- NCD Register

- Size – (36x20) CMs Size, Hard Bound Register with 75 GSM paper.

E- Patient Treatment Card

- A 5 size(non glossy) 95 GSM paper

F- Vehicle Hiring

- Good Condition AC Vehicle (4 seater, 7 seater, 9 seater)

Required documents:

1. Photocopy of the PAN card of the Party.
2. Valid authorised GST certificate; and

Encl: Application Format



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**Technical Bid for Hiring of vehicle under NCD Programme, NHM,
CDM &PHO Office Puri.**

(The documents are to be arranged serially as per the order mentioned bellow)

1	Name of the bidder/ firm	
2	Address & telephone/ Mobile no/ E-mail of the contract person, if any	
3	Name of the Authorised signatory(in block letter)	
4	ID proof of the individual/Registration certificate of the organization (Photocopy).	
5	Photocopy of GST certificate, PAN card of the Party.	
6	Details of vehicle (s) enclosed (only vehicle with commercial registration shall be accepted)- <ul style="list-style-type: none">• Make and Models –• Registration No-• Insurance Certificate –• Fitness Certificate –• Up to date tax Payment – Documentary evidence (Photocopy) for all above details to be attached.	
7	Tender Cost Rs.1000/- (rupees one thousand only) in shape of DD.	.
8	Whether all documents submitted signed by the authorised signatory(Yes/ No)	

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.

(Full signature of the Applicant)



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**Financial Bid for Hiring of vehicle under NCD Programme, NHM,
CDM&PHO Office Puri.**

1	Name of the bidder	
2	Make & Model Of Vehicle 1- 4 Seater, 2- 7 seater,3- 9 seater.	
3	Hiring Charges(daily basis)	
4	Fuel Charges(kilometre/ 1 Litre)	
5	CBAC form: Size –A 4 Size ordinary paper printed black & white (Rs/ page)	
6	Family Folder: Size –A 4 Size ordinary paper printed black & white (Rs/ page)	
7	Referral Slip: Size –A 4 Size ordinary paper printed black & white (Rs/ page)	
8	NCD Register: Size – (36x20) CMs Size, Hard Bound Register with 75 GSM paper 50 pages both side printed black & white (Rs/ register)	
9	Patient Treatment Card: A 5 size (non glossy) 95 GSM paper printed on both side.	
10	Declaration – I/We are not black-listed by any Central/State Government/Public sector undertaking in India.	

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.

(Full signature of the Applicant)