# OFFICE OF THE: MEDICAL SUPERINTENDENT SINDH GOVT. LYARI GENERAL HOSPITAL, KARACHI.

NO.MS/LGHK/- 10/0

Date: 01 - 10 - 2015

#### TENDER NOTICE

The Sindh Govt. Lyari General Hospital Karachi, hereby invites sealed bids on single stage two envelops procedure from various Primary Manufacturers or their authorized representatives duly registered with Directorate of Sales Tax & Income Tax for the supply of following items for service delivery outlets. Revised Tenders will be received upto 11.00 AM and opened at 12.00 Noon on the date shown below in presence of such tenderers who may wish to attend.

| S.# | Invitation of Tender                  | Stores | Estimated<br>Value | Date of<br>Opening | Tender<br>Fee/Cost<br>Rs. |
|-----|---------------------------------------|--------|--------------------|--------------------|---------------------------|
| 1.  | General Kitchen (Dietary items)       | LGHK   | Rs.20,925,000/-    | 20.10.2015         | Rs.2000/-                 |
| 2   | Consumable Laboratory items.          | LGHK   | Rs.5,813,000/-     | 20.10.2015         | Rs.2000/-                 |
| 3   | Uniform Liveries & Protective cloths. | LGHK   | Rs.1,992,000/-     | 20.10.2015         | Rs.1000/-                 |
| 4   | Medical Gas (Oxygen)                  | LGHK ' | Rs.4,883,000/-     | 20.10.2015         | Rs.1000/-                 |
| 5   | Other Store (Misc).                   | LGHK   | Rs.1,074,000/-     | 20.10.2015         | Rs.1000/-                 |
| 6   | L.P 15% Medicines.                    | LGHK   | Rs.33,515,700/-    | 20.10.2015         | Rs.2000/-                 |
| . 7 | Repair of<br>Machinery/Equipments.    | LGHK   | Rs.1,927,000/-     | 20.10.2015         | Rs.1000/-                 |

The revised tender documents will be available and can be purchased on the payment of tender fee in the shape of Pay order in favour of Medical Superintendent Sindh Government Lyari General Hospital, Karachi from the office of the Medical Superintendent Sindh Govt: Lyari General Hospital, Karachi, Or PM&I Cell Health Department Sindh Secretariat 3<sup>rd</sup> Flour Tugluk House, Karachi and available from the date of hoisting of Tender Notice on Department's and SPPRA website till the date of closing i.e. 20<sup>th</sup> October, 2015 upto 11.00 AM, tender will be opened on the same day at 12.00 NOON in the presence of bidders before Tender Opening Committee.

The bidders are required to furnish Bid Security @2.5% of the total bid value in the shape of Pay order in favour of Medical Superintendent Sindh Government Lyari General Hospital, Karachi. In case of alternate offer separate tender documents should be purchased and offer should be submitted with the separate Bid Security. Any offer without 2.5% Bid Security will be rejected. The department may reject all bids or proposals at any time prior to the acceptance of bid or proposal.

The Department shall upon request communicate to any supplier or contractor who submitted a bid or proposal, the grounds for its rejection of all bids or proposals, but is not required to justify those grounds.

#### Terms & Conditions:-

- a) Offers are invited in Pakistani Currency (Pak Rupees).
- b) Tenderers are requested to submit their quotations with wax sealed cover, failing which their quotations will not be entertained.
- c) In case Government announces any Public Holiday then tenders will be submitted/opened on the next working day and the time & venue will remain the same.
- d) The Firms must be registered with the Directorate of Sales Tax and Income Tax. The GST clearance for the year 2014-2015 must be provided and the original registration documents must be shown at the time of opening of tenders.
- e) Conditional Tenders will not be accepted.
- f) Rates quoted in the Tender shall remain effective till 90 days from the date of opening or till extended bid validity period in terms of Rule 38 of SPP Rules 2010 (amended 2013).
- g) The Procuring Agency reserve the rights to increase or decrease the quantity of any scheduled items as and when it is deemed necessary according to SPP Rules. The procuring Agency may reject all or any bid at any time prior to the acceptance of a bid or proposal, subject to the relevant provision of SPP Rules 2010 (amended 2013).

#### **NOTE**

The bidders who have purchased the Tender Form 2015-16 are directed to get revised Tender Form 2015-16 showing original tender receipt.

MEDICAL/SUPERINTENDENT SINDH GOVT; LYARI GENERAL HOSPITAL, KARACHI.

# GOVERNMENT OF SINDH HEALTH DEPARTMENT



# Tender for Purchase of Other Store Dietary Items @ Lyari General Hospital, Karachi) for the year 2015-16.

Tender No: LGH/Diet/2015-16

Due on: 20th October, 2015

#### GOVERNMENT OF SINDH HEALTH DEPARTMENT

TENDER NO. LGH/Diet/2015-16

DUE ON: 20th October, 2015

#### **INVITATION FOR BIDS.**

- 1. Sealed bids are invited from eligible bidders for Supply of Diet items 2015-16. (Extendable for a further period of 90 days).
- 2. Bidding will be conducted under SPP Rules 2010 clause 46(2). Bidding procedures specified in this document is open to all interested bidders.
- 3. Interested bidders may obtain further information from the office of the undersigned and Monitoring & Inspection Cell, Health Department, Govt. of Sindh, Block-24, Shahrah-e-Liaquat, Karachi during the office hours.
- 4. A complete set of bidding documents may be purchased by interested bidders on the submission of a written application from the office of the undersigned and Monitoring & Inspection Cell Health Department, upon cash payment of nonrefundable fees of Rs.2000/-(Two thousands only).
- 5. Bids must be delivered to the address below up to 11:30 AM. All bids must be accompanied by a bid security / earnest Money @ 2 ½ % Rs.523,500/-of the Total bid cost in shape of pay order / bank draft. Late bids will be rejected. Bids will be opened in the presence of the bidder's authorized representatives who choose to attend at the address below at 12:00 Noon.

DR. ABDUL AZIZ SOOMRO

7/1/1/16

MEDICAL SUPERINTENDENT SINDH GOVERNMENT LYARI GENERAL HOSPITAL KARACHI

# **Instructions to Bidders.**

- 1. Bids shall remain open for 30 days from the date of opening. A bid valid for a shorter period shall be rejected as being non-responsive.
- 2. The bidders shall quote their prices inclusive of all duties /taxes/Octroi transportation etc, and all other expenses on free delivery to Consignee's end.
- 3. Price should be quoted in Figures & words both, failing which the offer will be ignored.
- 4. The bid prepared by the Bidder shall comprise the following documents:
  - (a) Bid Form & Price Schedules duly completed by the Bidder.
  - (b) The Bidder shall furnish a bid security @ 2.5% Rs.523,500/- of the quoted value in the form of a pay order, bank draft.
- 5. The prices quoted by the Bidder shall be fixed during the performance of the contract and not subject to variation on any account. A bid submitted with an adjustable price or conditional will be treated as non-responsive and rejected.
- 6. The Bidder shall prepare bid comprise one single envelope containing separately financial proposal and technical proposal in original. The Envelop shall be marked as "FINANCIAL PROPOSAL" and "TECHNICAL PROPOSAL" in bold and legible letter to avoid confusion. The financial and technical bids, each consisting of the documents listed above.
- 7. In Technical Proposal the bidder must provide the original Data sheet, technical brochure, Income Tax, Sales Tax, Sole Agency certificate, a photocopy of security / earnest money, but its value must not be disclosed, this can be achieved by placing a piece of paper on the place where amount is mentioned and other documents, otherwise the bid will be ignored.
- 8. In Financial Proposal, the bidder should provide bid security / earnest money at the rate of 2.5% of the quoted value. A photocopy of the same should be attached with Technical Proposal but its value must not be disclosed and this can be achieved by placing a piece of paper on the place where amount is mentioned.
- 9. All pages of the bid, except for un- amended printed literature, shall be initialed by the person or persons signing the bid.
- 10. The bid shall contain no alterations, omissions, or additions, unless such corrections are initialed by the person or persons signing the bid.
- 11. Bids shall be submitted either by the manufacturer or its authorized contractor, if submitted by the manufacturer itself then bid of authorized contractor will be rejected.
- 12. Arithmetical errors will be rectified on the following basis. If there is a discrepancy between the unit price and the total price, which is obtained by multiplying the unit price and quantity, or between subtotals and the total price, the unit or subtotal price shall prevail, and the total price shall be corrected. If there is a discrepancy between words and figures, the amount in words will prevail. If the Bidder does not accept the correction of errors, its bid will be rejected.
- 13. The procuring agency may reject all are any bids subject to the relevant provision of SPPRA rules.

- 14. Prior to the expiration of the period of bid validity, the Purchaser will notify the successful Bidder through Advance acceptance. This will constitute the formation of the contract. Within seven (07) days after receipt of the Advance acceptance, the successful Bidder shall furnish the performance security @ 5% of the contracted amount and will sign the contract agreement.
- 15. Distributor once nominated by the manufacturer will be for the whole contract period and manufacturer cannot change its distributor during the year in any case. In exceptional cases the tendering authority may approve changes.

# **General & Special Conditions of Contract**

- i. The Contract shall be governed by and interpreted in accordance with laws of the Islamic Republic of Pakistan.
- ii. Store is required immediately. The bidder may however give their short guaranteed delivery period by which the supply will be completed. No Extension will be granted / accorded for the supply.
- iii. The manufacturer should provide an undertaking that if his authorized contractor fail to carry out any assignment in total or in part, manufacturer will be responsible to carry out the same.
- iv. Except as otherwise specifically provided in the Contract, the Contractor shall bear and pay all taxes, duties, levies and charges assessed on the Contractor.
- v. The Contract Price shall be made to the Contractor as specified in the Contract Agreement, subject to the general principle / procedure of the Government of Sindh.
- vi. The Contract shall be executed in accordance with the Contract Documents and procedures.
- vii. The Purchaser or its representative shall inspect the Machinery / Equipment / Furniture to confirm their conformity to the Contract specification. The inspection will be conducted at the premises of consignee after receipt of supply.
- viii. If the Contractor fails to attain Completion of the supply or installation within the Time for Completion shall pay to the Purchaser liquidated damages at the rate of 2% per month (0.5% per week) of the Contract Price, or the relevant part thereof. The aggregate amount of such liquidated damages shall in no event exceed the amount of 10%. Once the "Maximum" is reached, the Purchaser may consider termination of the Contract.
- ix. The Contractor warrants that the supplied equipment or any part thereof shall be free from defects in the design, engineering, materials etc. In case of defect in any part at the time of supply of installation it shall be replaced with new one instead of repair.
- x. The purchaser, without prejudice to any other remedy for breach of contract by written notice of default sent to the supplier, may terminate this contract in whole or in part:
  - (a) if the supplier fails to deliver any or all of the contracted items within the period(s) specified in the Contract, or within any extension thereof granted by the Purchaser.
  - (b) If the Supplier fails to perform any other obligation(s) under the Contract.
  - (c) If the supplier, in the judgment of the Purchaser has engaged in corrupt or fraudulent practices in competing for or in executing the Contract.

- xi. The bidder shall confirm the refund of cost difference if the same goods is/was supplied at lower rates to any other Govt./Semi Government institution or Armed Forces in the Province or out side in the same fiscal year.
- xii. The Purchaser reserves the right to increase/decrease or delete the quantities of goods etc. at the time of award of contract and also reserves the right to enhance the quantity by 25% of goods and services originally specified in the Schedule of Requirements without any change in unit price or other terms and conditions of goods at any time during the contract period.

# Criteria for evaluation of bids.

- 1. Technical Proposal should have the following documents:
  - I. Original Tender receipt.
  - II. Photocopy of Pay Order / Demand Draft of Earnest money in which amount should not be readable, otherwise the bid ignored,
  - III. Copy of the Bid offer without showing the rates.
  - IV. Registration Certificate with Ministry of Health / if applicable.
  - V. NTN /1ncome Tax Certificate
  - VI. Professional Tax Certificate
  - VII. GST Registration Certificate (if applicable).
  - VIII. Bidder should submit a sealed letter from Bank that they can perform business of more than / equal to Rs.5.000 Million.(Rupees Fifty lacs only).
- 2. Financial Proposal should have the following documents:
  - I. Original Pay Order / Bank Draft of Earnest money
  - II. Original copy of the Bid offer with Quoted price.
  - III. Printed Price List which should be duly signed and stamped by the Authorized person of the firm.

# SINDH GOVERNMENT LYARI GENERAL HOSPITAL, KARACHI.

DATE OF OPENING TENDER 20-10-2015.

TENDER FOR THE YEAR 2015-2016 TENDER CHARGES
RS.2000/- PER SET

# NOTE:- TENDER MUST BE SUBMIT IN TWO ENVELOPS, TECHNICAL & FINANCIAL BIDS

(DIET ITEMS)

| S.NO. | NAME OF ITEMS                             | APPROX<br>QUANTITY | RATES |
|-------|---|--------------------|-------|
| 1     | Atta (Wheat) A-One Quality (Sample)       | 21600 K.g.         | Rs    |
| 2     | Dall Channa A-One Quality (Sample)        | 6000 Kg            | Rs.   |
| 3     | Dall Mong A-One Quality (Sample)          | 6000 Kg            | Rs.   |
| 4     | Dall Massor A-One Quality (Sample)        | 6000 Kg            | Rs.   |
| 5     | Dall Mash A-One Quality (Sample)          | 6000 Kg            | Rs.   |
| 6     | Rice (Basmati) A-One Quality (Sample)     | 18000 kg           | Rs.   |
| 7     | Rice (Frri) A-One Quality (Sample)        | 18000 Kg           | Rs    |
| 8     | Ghee (Local Brand) A-One Quality (Sample) | 3000 kg            | Rs    |
| 9     | Fish (Sea Fish) (Sample)                  | 10800 kg           | Rs    |
| 10    | Beaf (Boneless) (Sample)                  | 1080 Kg            | Rs    |
| 11    | Chicken (Broiler)                         | 1080 Kg            | Rs    |
| 12    | Mutton                                    | 10800 Kg           | Rs    |
| 13    | Bread (DAWN/HARRY's or equivalent) Sample | 8400 Kg            | Rs    |
| 14    | Butter (Blue Band or equivalent) Sample   | 2400 Kg            | Rs    |
| 15    | Milk (Buffalo)                            | 9000 Ltr           | Rs    |
| 16    | Powder Milk (Best Quality) (Sample)       | 6000 Kg            | Rs    |
| 17    | Sugar (Sample)                            | 2400 Kg            | Rs    |
| 18    | Eggs (Hen) A-One Quality                  | 12000 Dozen        | Rs    |
| 19    | Tea (Best Quality) (Sample)               | 180 Kg             | Rs.   |
| 20    | Banana (A-one Quality Fresh Season Crop)  | 18000 Dozen        | Rs.   |
| 21    | Orange (A-one Quality Fresh Season Crop)  | 12000 Dozen        | Rs    |
| 22    | Mitha (A-one Quality Fresh Season Crop)   | 12000 Dozen        | Rs    |
| 23    | Apple (A-one Quality Fresh Season Crop)   | 10800 K.g.         | Rs    |
| 24    | Mango (A-one Quality Fresh Season Crop)   | 10800 K.g.         | Rs    |

| S.NO. | NAME OF ITEMS  | APPROX             | RATES |
|-------|--|--------------------|-------|
| 25    | Potatoes (A-One Quality Fresh Season Crop)                 | 10 <b>8</b> 000 Kg | Rs    |
| 26    | Tomatoes (A-One Quality Fresh Season Crop)                 | 6000 Kg            | Rs    |
| 27    | Bhindi (A-One Quality Fresh Season Crop)                   | 4800 Kg            | Rs    |
| 28    | Bringal (Began) (A-One Quality Fresh Season Crop)          | 4800 kg            | Rs    |
| 29    | Turi (A-One Quality Fresh Season Crop)                     | 4800 kg            | Rs    |
| 30    | Matter (Pees) (A-One Quality Fresh Season Crop)            | 4800 kg            | Rs    |
| 31    | Loki (A-One Quality Fresh Season Crop)                     | 4800 Kg            | Rs    |
| 32    | Gobi (A-One Quality Fresh Season Crop)                     | 4800 kg            | Rs    |
| 33    | Palak (A-One Quality Fresh Season Crop)                    | 4800 kg            | Rs    |
| 34    | Onion (A-One Quality Fresh Season Crop)                    | 9600 kg            | Rs    |
| 35    | Lassan (Garlic) (A-One Quality Fresh Season Crop)          | 240 Kg             | Rs    |
| 36    | Adrak (Untreated Fresh Season Crop)                        | 240 kg             | Rs    |
| 37    | Hari Mirch (A-One Quality Fresh Season Crop)               | 240 Kg             | Rs    |
| 38    | Hara Dhanya (A-One Quality Fresh Season Crop)              | 240 kg             | Rs    |
| 39    | Hari Methi (A-One Quality Fresh Season Crop)               | 240 Kg             | Rs    |
| 40    | Shaljum (A-One Quality Fresh Season Crop)                  | 4800 kg            | Rs    |
| 41    | Red Chilles (A-One Quality Fresh Season Crop)              | 240 kg             | Rs    |
| 42    | Dhanya (Dry) A-One Quality Fresh Season Crop               | 240 K.g.           | Rs    |
| 43    | Haldi (A-One Quality Fresh)                                | 240 kg             | Rs    |
| 44    | Salt (A-One Quality)                                       | 240 kg             | Rs    |
| 45    | Black Paper (A-One Quality)                                | • 60 kg            | Rs    |
| 46    | Zeera (Black) (A-One Quality)                              | 60 kg              | Rs    |
| 47    | Zeera (White) (A-One Quality)                              | 60 kg              | Rs.   |
| 48    | Darchini (A-One Quality)                                   | 60 kg              | Rs.   |
| 49    | Illaichi (Big) A-One Quality                               | 60 kg              | Rs.   |
| 50    | Illaichi (Small) A-One Quality                             | 60 kg              | Rs    |
| 51    | Garam Masala (Mix) (Sample) A-One Quality (Small Pack)     | 240 kg             | Rs    |
| 52    | Briyani Masala National/Shan) or equivalent (Small Packet) | 1200 Packet        | Rs    |
| 53    | Quorma Masala (National/Shan) or equivalent (Small Packet) | 1200 Packet        | Rs    |
| 54    | Almond Gree (Best Quality)                                 | 5 kg               | Rs    |
| 55    | Pista Gree (Best Quality)                                  | 5 kg               | Rs.   |

| S.NO. | NAME OF ITEMS   | APPROX    | RATES |
|-------|---|-----------|-------|
| 56    | Muraba Ashrafi (Best Quality) (sample)                                  | 10 Kg     | Rs    |
| 57    | Zarda Colour (Best Quality) (sample)                                    | 2 Kg      | Rs    |
| 58    | Cooking Oil (Habib / Soya Supreme or equivalent) (Sample) (Tin / Pouch) | 6000 Kg.  | Rs    |
| 59    | Liquid Milk (Best Quality) (250ml Pack) (Sample)                        | 25200 Pkt | Rs    |
|       | SIGNATU<br>CONTRAC<br>SUPPLIER  | CTION/    |       |
|       | NAME OF<br>FIRM   |           |       |
|       | &<br>ADDRESS  | }         |       |

# GOVERNMENT OF SINDH HEALTH DEPARTMENT



# Tender for Purchase of LABORATORY ITEMS @ Lyari General Hospital, Karachi for the year 2015-16.

Tender No: LGH/LAB: ITEMS/2015-16

Due on: 20th October, 2015

#### **GOVERNMENT OF SINDH**

#### LYARI GENERAL HOSPITAL, KARACHI. TENDER NO. MS/LGH/2015-2016.

TENDER FOR THE PURCHASE OF CONSUMABLE (LABORATORY ITEMS) FOR THE FINANCIAL YEAR 2015 - 2016 (Extendable a further 90 days)

| COST OF TENDER DOCUMENTS:        | Rs. 2,000/= Rupees Two Thousand Only (Non-Refundable)                   |
|----------------------------------|---|
| TENDER SELLING DATE :            | From the date of publishing to 20-10-2015                               |
| TENDER SUBMISSION DATE AND TIME: | On 20-10-2015 from 9.00 a.m. to 11:00 noon                              |
| TENDER SUBMISSION PLACE:         | Office of the A.M.S Procurement<br>Lyari General Hospital Karachi       |
| TENDER OPENING DATE AND TIME :   | On 20-10-2015 at 12:00 Noon   |
| TENDER OPENING PLACE :           | Committee Room Administration<br>Block Lyari General Hospital, Karachi. |

Note: No tender will be accepted after closing of the Tender box, what so ever reason may be.

Bidders are required to comply with all the clauses mentioned in the Terms and Conditions of the Bid Documents and any deviation will forbid them from competing in the tender.

#### **TERMS & CONDITIONS**

Bid will be valid for 90 days from the date of opening for technical and financial evaluation. The bidders shall quote their prices inclusive of all applicable duties and Taxes / transportation etc. and all other expenses on free delivery to Consignee's end at Lyari General Hospital, Karachi basis. Price should be quoted in Figures & Words both, failing which the offer will be ignored.

| ITEM# | NOMENCLATURE / PRODUCT NAME                         | QUANTITY | DEMANDED | PRICE PER UNIT |
|-------|---|----------|----------|----------------|
|       | DETAILS OF ITEMS & QUANTITY ATTACHED ANNEXURE " A " | _        |          |                |

DELIVERY PERIOD ------ VALIDITY ------

#### 1. GENERAL CONDITIONS & INSTRUCTIONS:

- 1.1 The quoted rates must be valid up to one year. Orders will be placed as per financial releases and policy of Health Department, Government of Sindh, Karachi.
- 1.2. The tender shall be submitted with all documents in sealed envelopes. The envelope must contain tender inquiry No. on the top, the name of the Bidder should be affixed on the face of the envelope on the left side. The Bidder should prepare the Tender in form of Technical and Financial proposals separately. The envelope should be marked Technical Proposal and Financial Proposal in BOLD and legible letters to avoid confusion. Envelopes should be sealed and addressed to Medical

Superintendent, Lyari General Hospital Karachi and inserted in Tender box on the scheduled date and time.

#### 1.3. Technical Proposal should have the following documents:

- I. Original Tender receipt.
- II. Photocopy of Pay Order / Demand Draft of Earnest money in which amount should not be readable, otherwise the bid ignored,
- III. Copy of the Bid offer without showing the rates.
- IV. Registration Certificate with Ministry of Health / if applicable.
- V. FDA/I EC certificate
- VI. NTN /1ncome Tax Certificate
- VII. Professional Tax Certificate
- VIII. GST Registration Certificate (if applicable).
- IX. Bidder should submit a sealed letter from Bank that they can perform business of more than / equal to Rs.5.000 Million.(Rupees Fifty lacs only).
- X. Dealership Certificate from the proprieter, Photocopy to be attached/Original to be shown.

#### **1.4.** Financial Proposal should have the following documents:

- I. Original Pay Order / Bank Draft of Earnest money
- II. Original copy of the Bid offer with Quoted price.
- III. Printed Price List of the Manufacturer / Importer indicating Trade Price and Retail Price, which should be duly signed and stamped by the Authorized person of the firm.
- 1.5. Only Manufactures / Importers or their authorized distributors can participate in the Tender.
  The Distributor should submit authorization letter in Original (as per specimen) addressed to Medical Superintendent Lyari General Hospital Karachi with reference to this Tender.

#### 1.6. (A) For Manufacturer:

All the Bidders (Manufacturer or their Distributor) should fill the Company Profile Proforma which should be filled by the Manufacturer, duly signed and stamped and should be submitted at the specified time of Tender submission along with the relevant certificate and documents other wise the bid offer will be ignored. The Company Profile Proforma should have the following documents:

- I. Photocopy of Registration Certificate issued by Ministry of Health Islamabad.
- II. Other relevant documents as required in Company Profile Proforma.

#### 1.6. (B) For Importer:

All the bidders (Importers or their authorized distributors) should fill the Sole Agent Proforma duly signed and stamped and should be submitted at the specified time of tender submission along with the relevant documents as required in the Proforma otherwise the bid offer will be ignored.

- 1.7. Tenders must be completed by typing in the column provided / on separate Letter Head duly signed. Soft copies of tender form, Company profile and Sole Agent Proforma may be obtained from the office of the AMS (Procurement), LGHK
- 1.8. The tender must be free from erasing, cutting and over writing. In case of erasing, cutting and over writing, authorized person should initial it duly stamped, else the offer will not be entertained.

- 1.9. The rates of each item should be written in figures as well as in words. Arithmetical errors will be rectified on this basis. If there is a discrepancy between the unit price and the total price that is obtained by multiplying the unit price and the quantity, the unit price shall prevail and the total price shall be corrected. In case of discrepancy the price in words will be authenticated and final.
- **1.10.** Conditional Tenders against the Govt. Rules / policy will not be considered / entertained / accepted.
- 1.11. Tenders shall be accompanied by earnest money @ 2.5 % of the value of stops quoted by them in form of Pay Order / Demand Draft in favor of Medical Superintendent Lyari General Hospital, Karachi.
- 1.12. Original purchase receipt must be enclosed with their offer and for alternate offer a separate purchase receipt shall be submitted. Otherwise both the offers will be ignored.
- 1.13. All Bidders should provide samples (if applicable) free of cost of the quoted products.
- 1.14. The following words shall be printed and stamped with indelible ink prominently in English "LGH, KARACHI" & "NOT FOR SALE" outside and inside the Packing on all goods.
- 1.15. The tendered rate should be inclusive of all applicable taxes to Federal & Provincial Govt. or local bodies and will be deducted from the bill of the contractors / suppliers.
- **1.16.** All the (applicable) Government taxes (Income Tax/ 0.20% Stamp Duty of the value of the contract amount will be deducted from the bills of the Contractors /Suppliers.
- 1.17. If the Contractors / Suppliers require Tax exemption facility regarding non deduction of Advance Income Tax. The exemption certificate issued by the concerned authority must be attached and on
- 1.18 One "SAMPLE TENDER PROFORMA" is supplied with the list of items to be purchased. The items have to be quoted on the Proforma, duly filled stamped & signed by the authorized bidder. Only those items shall, be typed on the Proforma / separate Letter head (as per serial of Proforma) for which the rates are to be quoted. Any alteration / correction must be initialed and each page is to be signed and stamped at the bottom.
- 1.19. Registration number (if applicable), make or origin of the country of the Consumable (Laboratory items) must be mentioned for each item, for which quotation is given, otherwise it will not be considered.
- 1.20. The quoted rates once offered by the firms will not be changed during the contract period.
- 1.21. The supplies should be in commercial pack and delivered at the designated place of Lyari General Hospital Karachi by the authorized representative of the firm at the risk and cost of the supplier. Any breakage or shortage of stock will be recovered from the supplier.
- 1.22. All documents should be submitted duly paginated / flagged and the detailed of the documents should also be mentioned in front of the Index.

#### 2 SPECIAL CONDITIONS:

- 2.1 Stores are required as early as possible. The bidder may, however, give their short guaranteed delivery period by which the supply will be completed positively.
- bidders shall quote their firm and final price both in figure and in words on free delivery basis to Lyari General Hospital Karachi
- 2.3 Distributor once nominated by the manufacturer / importer will be for the whole contract period and manufacturer / importer cannot change its distributor during the year in any case. In exceptional cases the tendering authority may approve changes.
- 2.4 No manufacturer / importer shall authorize their distributor / agent / any firm or person to quote the same item, which the manufacturer / importer is quoting itself in any tender. Failing those offers of both the manufacturer / importer as well as other bidder shall be ignored.
- 2.5 The manufacturer / importer of sub-standard quality spurious, counterfeit, misbranded or contaminated item(s) etc, may be black listed by the competent authority or any other authority whose decision will be final and in accordance with the offence and hence their earnest money may not be released & forfeited.
- 2.6 If goods are declared sub-standard the Manufacturer/Importer and their Distributor are equally responsible and are bound to supply additional quantity of whole supply free of cost.
- 2.7 The supply should be executed in minimum number of batches,
- 2.8 The Technical evaluation carried out by the Technical Committee Lyari General Hospital Karachi will be final, which will be assessed on clinical experience basis of the consultant (s) in the relevant specialty.
- 2.9 Only items approved by the Technical Committee will be considered by the Hospital Procurement Committee.
- 2.10 Only those item's Financial offer will be announced / considered which were technically qualify by the Technical Committee, If any firm wants to give the separate item wise financial bid they are advised to give separate item wise sealed envelope (s) of every item and should mention the name of the item and tender serial number on the front in **BOLD** and legible letters to avoid confusion, else the Financial Proposal Envelope will be opened on qualified item basis and it will not be challenged by the Suppliers / Contractors to open the Financial Proposal of the disqualified items.
- 2.11 If a sample of a batch / Lot Number of surgical item is declared sub-standard, not as per specification, those will be destroyed and payment will not be made to the supplier. The supplier will be responsible to provide the fresh stock of standard quality within 45 days against the rejected

supplies. Otherwise amount equivalent to the supplied quantity of defective goods will be de ducted from their bill and action will be initiated against the offending firm accordingly.

- **2.12** Manufacturer / Importer will issue an authorization letter as pe<sup>r</sup> attached sample Proforma along with technical proposal.
- 2.13 Manufacturers & Importers will directly supply as per supply order along with Bill of Warranty and Quality Certificate of each batch.

#### 3. PURCHASER'S RIGHT TO VARY QUANTITIES

The hospital authority reserves right to increase / decrease or delete the quantities of Consumable (Laboratory items) at the time of award of contract and also reserves the right to enhance the quantity of goods / services originally specified in the schedule of requirement without any change in unit price or other terms and conditions of goods at any time during contract period.

4 PURCHASER'S RIGHT TO ACCEPT ANY BID AND REJECT ANY OR ALL BIDS:

The hospital authority reserves the right to purchase full or part of the store or ignore / scrap /

cancel the tender as per relevant rules of SPPRA-2010.

#### 5. PERFORMANCE SECURITY:

The successful bidders will have to deposit the requisite security in the shape of a Pay Order / Demand Draft at 2.5% value of the order amount. The same will be released after successful completion of stores. After the acceptance of the Tender by the Vendor, a purchase order may be issued during the validity period and if offer is not accepted by the Vendor, the Earnest money shall be forfeited to the Government Accounts.

#### 6. REDRESSAL:

Redressal of Grievances & settlement of dispute will be as per SPPRA Rule-2010.

#### 7. UNDERTAKING on Rs.100/- Non Judicial Stamp Paper

- 7.1. I/ we read / understand the conditions specified in the tender inquiry and undertake:
- 7.2. That I / we will remain bound to supply any item as an additional quantity at the same rate on which said item I /we have supplied during the contract period.
- 7.3. That I / we agree whether our tender accepted for total, partial or enhanced quantity for all or any single item.
- 7.4. I/we also agreed to supply and accept the said item at the rates for the supply of contracted quantity within the stipulated period shown in the contract.
- 7.5. I/ we understand and ensure for the supply of quality goods. I / we also agree to supply the 100% additional quantity without any additional charges, if the supplies/part of the supplies declared sub-standard.
- 7.6. I/we undertake that, if any of the information submitted in accordance to this tender inquiry found incorrect, our contract may be cancelled at any stage on our cost and risk.
- 7.7. I / we undertake that, I/ we will replace the items three month before its expiry.
- 7.8. I / we undertake that, I/ we have never been black listed.

# 8. TERMS AND CONDITIONS ACCEPTANCE CERTIFICATE I / we, M/s.\_\_\_\_\_ is hereby confirmed that we have carefully read all terms and conditions of the tender and also agreed to abide SPPR-2010 for procurement of Surgical Disposable Items etc. during the validity of the tender. Signature of Vendor Name of Authorized Person Designation Seal and Address Tel No. \_\_\_\_ Fax No. \_\_\_ E-mail address. WITNESS 1) Name\_\_\_\_\_\_ Signature \_\_\_\_\_ 2) Name\_\_\_\_\_ Signature \_\_\_\_ Specimen for Authorization letter by Manufacturer/Importer for their **Distributor:** 9. I/We, M/s. \_\_\_\_\_ hereby authorize M/s.\_\_\_\_ as our authorized Distributor for Lyari General Address: Hospital Karachi for the financial year of 2014-2015. We give undertaking that if there is any sub-standard spurious, counterfeit, misbranded or con taminated and short supply of item(s) by our Distributor, we will be responsible for the same. We

also undertake that we have read and understood the terms and conditions of the tender enquiry.

#### NOTE:

- Instruments/Machines and kits should be PDA approved or CE marked.
- Chemistry analyzer/Machine should have photo-metric through put of 800 tests alone in addition to ISE through put of 300 plus per hour.
- Kit sizes, expiry and stability should suit our work load requirements D If a new machine is inducted in the system the supplier will provide interfacing information

- and bear its cost. The supplier will also take care of UPS, stabilizer and quality water for their equipment.
- The supplier will also be responsible for machine calibration at their own expense. D 24 hours customer back up service is essential and supplier will bear the cost of repair and maintenance. (Both Purchased or Rental Instruments) D Back up instrument in chemistry hematology and coagulation is must.
- SUPPLIER WILL BE RESPONSIBLE FOR PROVIDING ALL THE CONSUMABLES (IN CLUDING CONTROLS, CALIBRATORS, EXTERNAL QC,SUBSTRATE, WASH BUFFERS, DILUENTS, RO WATER, TRIGGER, PRETRIGGER, ARC CUP, REACTION TUBES etc.)
- All the above said instructions must be read carefully for compliance; else the offer will be ignored.
- Department reserves the right to ask and verify any document from the participants related Manufacturer / Importer of item, to assess the quality.

with

| Signature of Manufacturer / Importer |   |  |  |
|--------------------------------------|---|--|--|
| Name & Designation                   | _ |  |  |
|                                      |   |  |  |
| Address:                             |   |  |  |
|                                      |   |  |  |
|                                      |   |  |  |

# SINDH GOVERNMENT LYARI GENERAL HOSPITAL KARACHI HEALTH DEPARMENT

#### **IMPORTER/ SOLE AGENTS**

- A Please fill in the correct information carefully, submission of wrong/ vague information may Lead to black listing of the firm.
- b. Each page of the Performa must be duly signed & stamped.
- c. Provide a soft copy (CD) along with duly filled Performa in triplicate.
- d. Company/firm agreement with principle duly signed by embassy is mandatory.

#### **GENERAL INFORMATION**

| 1. | Name of the company   |  |
|----|---|--|
| 2. | Year of establishment   |  |
| 3. | Address of the firm - Registered office, - Telephone no Fax No. E mail address etc.   |  |
| 4. | Location of the Company - Industrial - Commercial - Residential   |  |
| 5. | Form of the company Annex copy of MOA/ registration - Individual - Private limited - Public limited - Partnership - Corporation - Other (specify) |  |
| 6. |   |  |
| 7. | Blacklisting / Complaint / Litigation against the firm (By any govt. or other org. if any)  |  |
| 8. | Drugs sale license number, if applicable (Annex copy License)   |  |

| 9.  | Typen  |      |        |            |        |
|-----|--|------|--------|------------|--------|
|     | of activity being carried out by the company: Manufacturing - Assembly /Repacking - Import - Other (specify)                   |      |        |            |        |
| 10. | Name & Address of the Principal(s) companies   |      |        |            |        |
| 11. | Capital value of the firm/sole agent; - Authorized Capital - Paid up capital   |      | ***    |            |        |
| 12  | Annual sales turnover of the firm in the previous 3 years (In millions)  | Year | Market | Govt. Sale | Sector |
|     | - 1.   |      |        |            |        |
|     | - 2.   |      |        |            |        |
|     | - 3.   |      |        |            |        |
| 13. | Income Tax no (NTN) - Attach copy of certificates,   |      |        |            |        |
|     | - Attach copy of last annual income tax return   |      |        |            |        |
| 14. | Sales Tax Registration No. (if any. Applicable ) Attach copy of certificate, and details of sales tax Paid during past 3 years |      |        |            |        |
| 15. | G M P compliance certificate & GMP audit report of Principal(s)  | the  |        |            |        |

(Attach report/ certificate) (if applicable)

Total Employees (Including Technical staff)

16.

17.

18.

19.

origin

Administration

Free Sale Certificate of the items in the country of

Registration with MOH, Islamabad where applicable Drugs/Surgical Disposable, attach separate sheet

List of Technical personnel with qualification (Attach List)

|     | Technical   |  |
|-----|---|--|
| ·   | Management  |  |
|     | Sales / Marketing   |  |
| 20. | Market Availability - Products routinely manufactured/imported Only occasionally / on request |  |
| 21. | No of registered / items of the principals (In case of drugs only)                            |  |
| 22. | No of Thermo labile drugs<br>(if any)   |  |
| 23. | Storage Facilities [For thermo labile drugs]  |  |
| 24. | Storage Facilities [For the drugs to be stored at room temperature]                           |  |
| 25. | Cold Chain Facility including cold room / storage and during transport                        |  |
| 26. | GMP Certificate of the Principals, from the country of origin                                 |  |
| 27. | Export of the products to the countries other than Pakistan                                   |  |
| 28. | Drug registration Certificate in the country of origin (In case of drugs only)                |  |
| 29. | Emergency power supply arrangements (For at least critical area)                              |  |
|     |   |  |

| Signature                   | - |
|-----------------------------|---|
| [With name and Designation] |   |
|                             |   |

Stamp of Company

# SINDH GOVERNMENT LYARI GENERAL HOSPITAL, KARACHI DATE OF OPENING TENDER 20<sup>th</sup> October, 2015

| S. | NAME OF ARTICLE/ITEM  | UNIT   | ANNUAL  | RATE/   |
|----|---|--|---|---------|
|    | I TAME OF ARTICLE, TERM   |  |   |         |
| 1  | Diluent Cell Pack for Sysmex<br>Kx-21. Sysmex Asia Pacific<br>Private Ltd. Singapore. | Twenty litre pack with active ingredient Sodium Chloride 0.64%, Boric acid 0.10%, Sodium Tetra borate 0.02%, EDTA-2K-0.02% | DEMAND 30 packs.  Each cell pack has the capacity to perform. 550 tests.  | REMARKS |
| 2  | Stromatolyser WH for Sysmex Kx-21. Sysmex Asia Pacific Private Ltd. Singapore.        | Containing Organic quaternary ammonium salt 8.5gm/litre, Sodium Chloride 0.6gm/litre.                                      | 55 packs.  NOTE  This chemical will run concomitantly with the item In No 1. Hence both the items of No. 1 & No. 2 will work as a unit although their packings are separate. Furthermore it may be noted that the items mentioned in No. 1 & 2 are meant for the complete blood count(CBC). |         |
| 3  | Medonic M. Series Lyser,<br>Boule – Medical Sweden.                                   | 05 litres (1000<br>tests per pack)   | 20 packs  |         |

|   | NAME OF ARTICLE/ITEM         | UNIT                | ANNUAL<br>DEMAND        | RATE/<br>REMARKS |
|---|------------------------------|---------------------|-------------------------|------------------|
|   | Medonic M. Series Diluid     | Twenty (20) litres  | 50 packs.               |                  |
|   | Boule Medical Sweden.        | pack,               | NOTE                    |                  |
|   | Board Medical Stream         | Approximately       | This chemical           |                  |
| 1 |                              | 1176 tests per      | will run                |                  |
|   |                              | pack (17ml per      | concomitantly           |                  |
|   |                              | test)               | with the item           |                  |
|   |                              | lest)               | in No 3. Hence          |                  |
|   |                              |                     |                         |                  |
|   |                              |                     | both the                |                  |
|   |                              |                     | items of No. 3          |                  |
|   |                              |                     | & No. 4 will            |                  |
|   |                              |                     | work as a unit          |                  |
|   |                              |                     | although their          |                  |
|   |                              |                     | packings are            |                  |
|   |                              |                     | separate.               |                  |
|   |                              |                     | Furthermore             |                  |
|   |                              |                     | it may be               |                  |
|   |                              |                     | noted that the          |                  |
|   |                              |                     | items                   |                  |
|   |                              |                     | mentioned in            |                  |
|   |                              |                     | No. 3 & 4 are           |                  |
|   |                              |                     | also meant for          |                  |
|   |                              |                     | the complete            |                  |
|   |                              |                     | blood count             |                  |
|   |                              |                     | l f                     |                  |
|   |                              |                     | (CBC)                   |                  |
|   |                              |                     | although the            |                  |
|   |                              |                     | equipment is different. |                  |
| 5 | Boule cleaning kits for      | 3x450ml             | Only one kit            |                  |
|   | Medonic (Sweden)             |                     |                         |                  |
| 6 | ALAT (GPT) Merck Ecoline     | 5x100ml             | 25 kits                 |                  |
|   | (Germany) / Innoline         | Approximately       |                         |                  |
|   | (France) / IFCC              | 2,000 tests per kit | j                       |                  |
|   | OR Equivalent                | on Selectra         |                         |                  |
|   | 4                            | Autoanalyser        |                         |                  |
| 7 | Alkaline Phosphatase Ecoline | 5x100ml             | 25 kits                 |                  |
|   | (Germany) / Innoline         | Approximately       |                         |                  |
|   | (France) DGKC                | 2,000 tests per kit |                         |                  |
|   | OR Equivalent                | on Selectra         |                         |                  |
|   | OK Equivalent                | Autoanalyser.       |                         |                  |
| 8 | Bilirubin Total Ecoline      | 10x25ml             | 25 kits                 |                  |
| ° |                              |                     | 25 KILS                 |                  |
|   | (Germany) / Innoline         | Approximately       | :                       |                  |
|   | (France) MEM/DMSO            | 1,000 tests on      |                         |                  |
|   | OR Equivalent                | Selectra            |                         |                  |
|   |                              | Autoanalyser        |                         |                  |

| S.<br>No | NAME OF ARTICLE/ITEM          | UNIT                | ANNUAL<br>DEMAND | RATE/<br>REMARKS |
|----------|-------------------------------|---------------------|------------------|------------------|
| 9        | Bilirubin Direct Ecoline      | 10x25ml             | 20 kits          |                  |
|          | (Germany) / Innoline          | Approximately       |                  |                  |
|          | (France) MEM/DMSO             | 1000 tests per kit. |                  |                  |
|          | OR Equivalent                 | ,                   |                  |                  |
| 10       | Gammat GT Merck/Ecoline       | 10x250ml            | 25 kits          |                  |
|          | (Germany) Innoline (France)   | Approximately       |                  |                  |
|          | OR Equivalent                 | 1,000 tests per kit |                  |                  |
|          |                               | on Selectra         |                  |                  |
|          |                               | Autoanalyser.       |                  | 1                |
| 11       | Cholestrol Merck/Ecoline      | 5x100ml=500ml       | 06 kits          |                  |
|          | (Germany) / Innoline          | Approximately       |                  |                  |
|          | (France)CHOD PAP              | 2,000 tests per kit |                  |                  |
|          | OR Equivalent                 | on Selectra         |                  |                  |
|          |                               | Autoanalyser.       |                  |                  |
| 12       | Triglycerides Merck/Ecoline   | 5x100ml=500ml       | 06 kits          |                  |
|          | (Germany) / Innoline          | Approximately       |                  |                  |
| ļ        | (France)GPO PAP               | 2,000 tests per kit |                  |                  |
|          | OR Equivalent                 | on Selectra         |                  |                  |
|          |                               | Autoanalyser.       |                  |                  |
| 13       | HDL Direct kit Merck/Ecoline  | 5x20ml              | 03 kits          |                  |
|          | (Germany) / Innoline          | Approximately       |                  |                  |
|          | (France)IMMUNO                | 400 tests per kit.  |                  |                  |
|          | OR Equivalent                 |                     |                  |                  |
| 14       | LDL Direct kit Merck/Ecoline  | 5x20ml              | 03 kits          |                  |
|          | (Germany) / Innoline          | Approximately       |                  |                  |
| ľ        | (France)SELECT                | 400 tests per kit.  |                  |                  |
|          | OR Equivalent                 | ·                   | <u>.</u>         |                  |
| •        |                               |                     |                  |                  |
| 15       | Urea UV Merck/Ecoline         | 5x100ml             | 18 kits          |                  |
|          | (Germany) / Innoline          | Approximately       |                  |                  |
|          | (France) GLDH                 | 2,000 tests per kit |                  |                  |
| 16       | Creatinine kits Merck/Ecoline | R1 x 300ml          | 06 kits          |                  |
|          | (Germany) / Innoline          | R2 x 300ml          |                  |                  |
|          | (France) Modified Jeffe       | Approximately       |                  |                  |
|          | Method OR Equivalent          | 2,400 tests per kit |                  |                  |
| 17       | Uric Acid Merck/Ecoline       | 6x100ml=600ml       | 15 kits          |                  |
|          | (Germany) / Innoline          | Approximately       |                  |                  |
|          | (France) GOD OR Equivalent    | 2,400 tests per kit |                  |                  |
| 18       | Amylase Merck/Ecoline         | 12x5ml=60ml         | 04 kits          |                  |
|          | (Germany) / Innoline          | Approximately       |                  | -                |
|          | (France) CNPG3                | 240 tests per kit   |                  |                  |
|          | OR Equivalent                 |                     |                  |                  |
| 19       | Blood Glucose kits            | 1x1000ml            | 20 kits          |                  |
|          | Merck/Ecoline (Germany) /     | Approximately       |                  |                  |
|          | Innoline (France) PAP         | 3,500 tests on      |                  |                  |
|          | OR Equivalent                 | Selectra            |                  |                  |
| ı        | · ·                           | Autoanalyser.       |                  |                  |

| S. | NAME OF ARTICLE/ITEM                                | UNIT                                 | ANNUAL<br>DEMAND | RATE/<br>REMARKS |
|----|---|--------------------------------------|------------------|------------------|
| No |   |                                      |                  |                  |
| 20 | Blood Glucose Kit, GlucDH                           | 1x500ml.                             | 10 kits          |                  |
|    | Merck/Ecoline (Germany) /                           | This will perform                    |                  |                  |
|    | Innoline OR Equivalent                              | atleast 1700 tests                   |                  |                  |
|    |   | on Selectra                          |                  |                  |
|    |   | Autoanalyser. It                     |                  |                  |
|    |   | will work as                         |                  |                  |
|    |   | additional support                   |                  |                  |
| 21 | Calcium kit Merck/Ecoline                           | of glucose check.<br>12x25ml = 300ml | 12 kits          |                  |
| 21 | (Germany) / Innoline                                | Approximately                        | 12 KI(5          |                  |
|    | (France) ARSENAZO                                   | 1,200 tests on                       |                  | !                |
|    | OR Equivalent                                       | Selectra                             |                  |                  |
|    | On Equivalent                                       | Autoanalyser                         |                  |                  |
| 22 | Phosphorous Merck/Ecoline                           | 6x25ml =                             | 03 kits          |                  |
|    | (Germany) / Innoline                                | 150ml                                | - ·-· ••         |                  |
|    | (France) MOLYBUV                                    | Approximately                        |                  |                  |
|    | OR Equivalent                                       | 600 tests per kit                    |                  |                  |
| 23 | HS NORM (Normal Control)                            | 6x5ml Human                          | One Set          |                  |
|    | Merck/Ecoline (Germany) /                           | sera                                 |                  |                  |
|    | Innoline (France)                                   |                                      |                  |                  |
|    | OR Equivalent                                       |                                      |                  |                  |
| 24 | H.S Path (Abnormal Control)                         | 6x5ml Human                          | One Set          |                  |
|    | Merck/Ecoline (Germany) /                           | sera                                 |                  |                  |
|    | Innoline (France)                                   |                                      |                  |                  |
| 25 | OR Equivalent                                       | Cu2mal                               | One Set          | -                |
| 25 | C. Calibrator Merck/Ecoline<br>(Germany) / Innoline | 6x3ml                                | One Set          |                  |
|    | (France) SUB/ENZY                                   |                                      |                  |                  |
|    | OR Equivalent                                       |                                      |                  |                  |
| 26 | ASO Turbi. With                                     | Turbilatex 2x25ml,                   | 08 kits          |                  |
|    | Control/Calibrator                                  | 200 tests per kit                    |                  |                  |
|    | Merck/Ecoline (Germany) /                           | ,                                    |                  | }                |
|    | Innoline (France)                                   |                                      |                  |                  |
|    | OR Equivalent                                       |                                      |                  |                  |
| 27 | R. F. Turbi. With                                   | Turbilatex 2x25ml,                   | 12 kits          |                  |
|    | Control/Calibrator                                  | 200 tests per kit                    |                  | ]                |
|    | Merck/Ecoline (Germany) /                           |                                      |                  | ]                |
|    | Innoline (France)                                   |                                      |                  |                  |
|    | OR Equivalent                                       |                                      |                  |                  |
| 28 | Qualitative Hepatitis B-                            | One device per                       | 40,000           |                  |
| 20 | Surface Antigen (HBsAg)                             | test                                 | devices          |                  |
|    | determination by                                    | (636                                 | GOVICCS          | ]                |
|    | Immunochromatography in                             |                                      |                  |                  |
|    | Serum, plasma or whole                              |                                      |                  |                  |
|    | blood.  |                                      |                  |                  |
|    |   |                                      |                  |                  |
|    |   |                                      |                  |                  |

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| S.<br>No | NAME OF ARTICLE/ITEM  | UNIT  | ANNUAL<br>DEMAND        | RATE/<br>REMARKS |
|----------|---|---|-------------------------|------------------|
| 29       | Rapid anti-HCV test by<br>Immunochromatography in<br>Serum/Plasma or whole<br>blood | One device per<br>test  | 40,000<br>devices       |                  |
| 30       | Glass Slides for Laboratory<br>use 24.4x76.2mm (1" x 3"),<br>Thickness 1-1.2mm      | -   | 30,000 Glass<br>Slides. |                  |
| 31       | Test Tubes 12x75mm  |   | 5,000 test<br>tubes     |                  |
| 32       | Test Tubes 12x100mm   | -   | 3,000 test<br>tubes     |                  |
| 33       | Cover Glasses (Cover slips)<br>16x16mm  | -   | 12,000 cover<br>slips   |                  |
| 34       | Distilled water for laboratory use  | <del>-</del>  | 500 litres              |                  |
| 35       | Cell packs for electrolytes<br>SFRI, ISE Analyser 3000                              | Cell pack is of<br>700ml & it will<br>perform about<br>600 tests of<br>electrolytes<br>(Sodium,<br>Potassium &<br>Chloride) | 06 Cell Packs           |                  |
| 36       | Field Stain A. 25gm bottle<br>BD/Merck OR Equivalent                                | -   | 12 bottles              |                  |
| 37       | Field Stain B. 25gm bottle<br>BD/Merck OR Equivalent                                | -   | 12 bottles              |                  |
| 38       | Spirit Methylated   | •   | About 500<br>litres     |                  |
| 39       | Methanol 2.5 litres<br>Merck/BD OR Equivalent                                       | -   | 06 bottles              |                  |
| 40       | EDTA Merck/BD<br>OR Equivalent  | 1 kg  | 1kg                     |                  |

| S.<br>No | NAME OF ARTICLE/ITEM  | UNIT         | ANNUAL<br>DEMAND | RATE/<br>REMARKS |
|----------|---|--------------|------------------|------------------|
| 41       | i. Typhoid O Antigen 5ml Laboratory Diagnostics USA OR Equivalent   | -            | 50 vials         |                  |
|          | ii. Typhoid H Antigen<br>5ml Laboratory<br>Diagnostics USA<br>OR Equivalent   | -            | 50 vials         |                  |
|          | iii. Salmonella Group A<br>(Paratyphi AO)<br>Laboratory<br>Diagnostics USA<br>OR Equivalent   | <u>-</u>     | 50 vials         |                  |
|          | iv. Salmonella Group<br>Antigen 5ml<br>(Paratyphi A H), any<br>good brand available.<br>OR Equivalent   | -            | 50 vials         |                  |
|          | v. Salmonella Group<br>Antigen 5ml<br>(Paratyphi B. O.) Any<br>good brand available.<br>OR Equivalent   | <del>-</del> | 50 vials         |                  |
|          | vi. Salmonella Group<br>Antigen 5ml<br>(Paratyphi B H) Any<br>good brand available.<br>OR Equivalent  | <b>-</b><br> | 50 vials         |                  |
| 42       | <u>Urine Strip</u> , Any good quality<br>strip having the parameters<br>of Sp. Gravity PH, Leucocytes,<br>Nitrates, Proteins, Glucose,<br>Ketones, Urobilinogen, Bile,<br>RBC's & Hb. | _            | 200 packets      |                  |
| 43       | ICT Devices for MP, One step<br>Malaria Pf/Pan Antigen Test   | -            | 3,000 strips     |                  |

| S.       | NAME OF ARTICLE/ITEM                  |     | UNIT                    | ANNUAL           | RATE/    |
|----------|---------------------------------------|-----|-------------------------|------------------|----------|
| No       |                                       |     |                         | DEMAND           | REMARKS  |
| 44       | HbA₁C kit, Innoline (France).         | a)  | R 1x20ml                | All the          |          |
|          | Enzymatic Assay Method for            |     |                         | chemicals in     |          |
|          | Selectra Auto analyzer.               | b)  | R <sub>1</sub> (1x20ml. | the unit         |          |
| Ì        | OR Equivalent                         |     | Tris Buffer             | section i.e. R,  |          |
|          |                                       |     | 2.7mmol/L).             | R <sub>1</sub> , |          |
|          |                                       |     |                         | R₂&pretreatm     |          |
| İ        |                                       | c)  | R₂ (Fructosyl           | ent solution     | i        |
| <u> </u> | 1                                     |     | peptide                 | are the          |          |
|          |                                       | •   | oxidase 1500            | contents of      |          |
|          |                                       | į   | units/L &               | one kit & will   |          |
|          |                                       |     | peroxidase              | work             |          |
|          |                                       |     | 1500 units/L)           | concomitantly    |          |
|          |                                       |     | 1x7.5ml.                | & perform        |          |
|          |                                       |     |                         | approx 90        |          |
|          |                                       | (d) | Pretreatment            | tests per kit.   |          |
| i        |                                       |     | 5olution                | (08 kits).       |          |
|          |                                       |     | (Hemolysin              |                  |          |
|          |                                       |     | 5gm/L)                  |                  |          |
|          |                                       |     |                         |                  |          |
| 45       | Control HbA₁C (normal)                |     | 1x1ml                   | 02 controls      |          |
| 46       | Control HbA <sub>1</sub> C (abnormal) |     | 1x1ml                   | 02 controls      |          |
| 47       | Calibrator HbA₁C                      |     | 2x1ml                   | 01 calibrator    | <u>_</u> |

#### NOTE:

The equipment from Sr. No.01 to 05 are meant for CBC & the supplier is responsible for the originality of the chemicals & quality control of results as well as maintenance of equipments.

| Signature of Tende | erer                                    |
|--------------------|---|
| Name & Address (i  | in full)                                |
| Office Phone: -    |   |
| Residence Phone:   | *************************************** |

# GOVERNMENT OF SINDH HEALTH DEPARTMENT



# Tender for Purchase of Uniform/Linen Store Items @ Lyari General Hospital, Karachi) for the year 2015-16.

Tender No: LGH/Unif/2015-16

Due on: 20th October, 2015

#### GOVERNMENT OF SINDH HEALTH DEPARTMENT

TENDER NO. LGH/Unif:/2015-16

DUE ON: 20th October, 2015

#### **INVITATION FOR BIDS.**

- 1. Sealed bids are invited from eligible bidders for Supply of Uniform Liveries 2015-16 (Extendable for a further period of 90 days).
- 2. Bidding will be conducted under SPP Rules 2010 clause 46(2). Bidding procedures specified in this document is open to all interested bidders.
- 1. Interested bidders may obtain further information from the office of the undersigned and Monitoring & Inspection Cell, Health Department, Govt. of Sindh, Block-24, Shahrah-e-Liaquat, Karachi during the office hours.
- 2. A complete set of bidding documents may be purchased by interested bidders on the submission of a written application from the office of the undersigned and Monitoring & Inspection Cell Health Department, upon cash payment of nonrefundable fees of Rs.1000/- (One Thousands only).
- 3. Bids must be delivered to the address below up to 11:30 AM. All bids must be accompanied by a bid security / earnest Money @ 2 ½ % of the Total bid cost Rs.50,000/-(Rupees Fifty thousands only) in shape of pay order / bank draft. Late bids will be rejected. Bids will be opened in the presence of the bidder's authorized representatives who choose to attend at the address below at 12.00 Noon.

DR. ABÐÚL AZIZ SOOMRO

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MEDICAL SUPERINTENDENT SINDH GOVERNMENT LYARI GENERAL HOSPITAL KARACHI

# **Instructions to Bidders.**

- 1. Bids shall remain open for 30 days from the date of opening. A bid valid for a shorter period shall be rejected as being non-responsive.
- 2. The bidders shall quote their prices inclusive of all duties /taxes/Octroi transportation etc, and all other expenses on free delivery to Consignee's end.
- 3. Price should be quoted in Figures & words both, failing which the offer will be ignored.
- 4. The bid prepared by the Bidder shall comprise the following documents:
  - (a) Bid Form & Price Schedules duly completed by the Bidder.
  - (b) The Bidder shall furnish a bid security @ 2.5% Rs.50,000/-of the quoted value in the form of a pay order, bank draft.
- 5. The prices quoted by the Bidder shall be fixed during the performance of the contract and not subject to variation on any account. A bid submitted with an adjustable price or conditional will be treated as non-responsive and rejected.
- 6. The Bidder shall prepare bid comprise one single envelope containing separately financial proposal and technical proposal in original. The Envelop shall be marked as "FINANCIAL PROPOSAL" and "TECHNICAL PROPOSAL" in bold and legible letter to avoid confusion. The financial and technical bids, each consisting of the documents listed above.
- 7. In Technical Proposal the bidder must provide the original Data sheet, technical brochure, Income Tax, Sales Tax, Sole Agency certificate, a photocopy of security / earnest money, but its value must not be disclosed, this can be achieved by placing a piece of paper on the place where amount is mentioned and other documents, otherwise the bid will be ignored.
- 8. In Financial Proposal, the bidder should provide bid security / earnest money at the rate of 2.5% of the quoted value. A photocopy of the same should be attached with Technical Proposal but its value must not be disclosed and this can be achieved by placing a piece of paper on the place where amount is mentioned.
- 9. All pages of the bid, except for un- amended printed literature, shall be initialed by the person or persons signing the bid.
- 10. The bid shall contain no alterations, omissions, or additions, unless such corrections are initialed by the person or persons signing the bid.
- 11. Bids shall be submitted either by the manufacturer or its authorized contractor, if submitted by the manufacturer itself then bid of authorized contractor will be rejected.
- 12. Arithmetical errors will be rectified on the following basis. If there is a discrepancy between the unit price and the total price, which is obtained by multiplying the unit price and quantity, or between subtotals and the total price, the unit or subtotal price shall prevail, and the total price shall be corrected. If there is a discrepancy between words and figures, the amount in words will prevail. If the Bidder does not accept the correction of errors, its bid will be rejected.
- 13. The procuring agency may reject all are any bids subject to the relevant provision of SPPRA rules.

- 14. Prior to the expiration of the period of bid validity, the Purchaser will notify the successful Bidder through Advance acceptance. This will constitute the formation of the contract. Within seven (07) days after receipt of the Advance acceptance, the successful Bidder shall furnish the performance security @ 5% of the contracted amount and will sign the contract agreement.
- 15. Distributor once nominated by the manufacturer will be for the whole contract period and manufacturer cannot change its distributor during the year in any case. In exceptional cases the tendering authority may approve changes.

# **General & Special Conditions of Contract**

- i. The Contract shall be governed by and interpreted in accordance with laws of the Islamic Republic of Pakistan.
- ii. Store is required immediately. The bidder may however give their short guaranteed delivery period by which the supply will be completed. No Extension will be granted / accorded for the supply.
- iii. The manufacturer should provide an undertaking that if his authorized contractor fail to carry out any assignment in total or in part, manufacturer will be responsible to carry out the same.
- iv. Except as otherwise specifically provided in the Contract, the Contractor shall bear and pay all taxes, duties, levies and charges assessed on the Contractor.
- v. The Contract Price shall be made to the Contractor as specified in the Contract Agreement, subject to the general principle / procedure of the Government of Sindh.
- vi. The Contract shall be executed in accordance with the Contract Documents and procedures.
- vii. The Purchaser or its representative shall inspect the Machinery / Equipment / Furniture to confirm their conformity to the Contract specification. The inspection will be conducted at the premises of consignee after receipt of supply.
- viii. If the Contractor fails to attain Completion of the supply or installation within the Time for Completion shall pay to the Purchaser liquidated damages at the rate of 2% per month (0.5% per week) of the Contract Price, or the relevant part thereof. The aggregate amount of such liquidated damages shall in no event exceed the amount of 10%. Once the "Maximum" is reached, the Purchaser may consider termination of the Contract.
- ix. The Contractor warrants that the supplied equipment or any part thereof shall be free from defects in the design, engineering, materials etc. In case of defect in any part at the time of supply of installation it shall be replaced with new one instead of repair.
- x. The purchaser, without prejudice to any other remedy for breach of contract by written notice of default sent to the supplier, may terminate this contract in whole or in part:
  - (a) if the supplier fails to deliver any or all of the contracted items within the period(s) specified in the Contract, or within any extension thereof granted by the Purchaser.
  - (b) If the Supplier fails to perform any other obligation(s) under the Contract.
  - (c) If the supplier, in the judgment of the Purchaser has engaged in corrupt or fraudulent practices in competing for or in executing the Contract.

- xi. The bidder shall confirm the refund of cost difference if the same goods is/was supplied at lower rates to any other Govt./Semi Government institution or Armed Forces in the Province or out side in the same fiscal year.
- xii. The Purchaser reserves the right to increase/decrease or delete the quantities of goods etc. at the time of award of contract and also reserves the right to enhance the quantity by 25% of goods and services originally specified in the Schedule of Requirements without any change in unit price or other terms and conditions of goods at any time during the contract period.

# Criteria for evaluation of bids.

- 1. Technical Proposal should have the following documents:
  - I. Original Tender receipt.
  - II. Photocopy of Pay Order / Demand Draft of Earnest money in which amount should not be readable, otherwise the bid ignored,
  - III. Copy of the Bid offer without showing the rates.
  - IV. Registration Certificate with Ministry of Health / if applicable.
  - V. NTN /1ncome Tax Certificate
  - VI. Professional Tax Certificate
  - VII. GST Registration Certificate (if applicable).
  - VIII. Bidder should submit a sealed letter from Bank that they can perform business of more than / equal to Rs.5.000 Million.(Rupees Fifty lacs only).
- 2. Financial Proposal should have the following documents:
  - I. Original Pay Order / Bank Draft of Earnest money
  - II. Original copy of the Bid offer with Quoted price.
  - III. Printed Price List which should be duly signed and stamped by the Authorized person of the firm.

#### SINDH GOVERNMENT LYARI GENERAL HOSPITAL, KARACHI.

DATE OF OPENING TENDER 20-10-2015.

TENDER FOR

TENDER CHARGES RS.1000/- PER SET

THE YEAR 2015-2016

NOTE:- TENDER MUST BE SUBMIT IN TWO ENVELOPS, TECHNICAL & FINANCIAL BIDS

| <del> </del> | FOR (UNIFORM/LINEN STORE ITEMS)  |                    |       |  |  |
|--------------|--|--------------------|-------|--|--|
| S.NO.        | NAME OF ITEMS  | APPROX<br>QUANTITY | RATES |  |  |
| 1            | Un-Bleached Long Cloth width 60" 20 x 20-60 x 60 (Best Quality) (Sample)                 | 4000 Meter.        | Rs    |  |  |
| 2            | Mattress Foam 6' x 3' x 4" (Diamond A-One/Master Molty) OR Equivalent (Sample)           | - 100 Nos          | Rs    |  |  |
| 3            | Hospital Blanket size 92" x 60" (with monogram of L.G.H). Woolen (Best Quality) (Sample) | - 100 Nos -        | Rs    |  |  |
| 4            | Hospital Bed Sheets (Cotton or Cotton+ Polyester) 96" X 60" Sample                       | - 4000 Nos         | Rs    |  |  |
| 5            | Bath Towel white (Cotton) size 48" x 18" (sample)  | - 100 Nos -        | Rs    |  |  |
| 6            | Mackintosh Sheeting (Pakistani) (Best Quality) Sample                                    | 1000 Meter<br>-    | Rs    |  |  |
| 7            | Pillow (Rubber Foam) Full Size (Diamond/Master) OR Equivalent Sample                     | - 100 Nos-         | Rs    |  |  |
| 8            | Patient Bushirt, Male (Cotton) (Stripped Cloth) stitched (Sample)                        | - 500 Nos -        | Rs    |  |  |
| 9            | Patient Pajama (Cotton) (Stripped Cloth) stitched (Sample) Male                          | -1000 Nos -        | Rs    |  |  |
|              | Female   | 500 Nos            | Rs    |  |  |
| 10           | Patient Kurta Female (Cotton) (Stripped Cloth) stitched (Sample)                         | - 500 Nos -        | Rs    |  |  |

| S.NO. | NAME OF ITEMS   | APPROX           | RATES |
|-------|---|------------------|-------|
| 11    | Ghaghra Cotton (Stripped Cloth) stitched (sample)   | - 50 Nos -       | Rs    |
| 12    | Cap for Security Guard with monogram of L.G.H. (sample)   | -100 Nos -       | Rs    |
| 13    | Leather Belt for Security Guard with monogram of L.G.H (sample)   | - 50 Nos -       | Rs    |
| 14    | Shoulder Badge for with monogram of L.G.H (sample)  | - 100 Nos-       | Rs    |
| 15    | Whistle with rope (sample)  | - 50 Nos-        | Rs    |
| 16    | Long Shoe for Security Guard (Sample)   | - 12 Nos-        | Rs    |
| 17    | Mattress Foam for Baby Cot size (Diamond A-One/Master Motly) OR Equivalent (sample)                                   | - 50 Nos -       | Rs    |
| 18    | Drill Cloth (sample)  | - 500 Meter-     | Rs    |
| 19    | Mattress Cover (Rexine) Local size 6' x 3' x 4" Best Quality (Sample)   | - 100<br>Meters- | Rs    |
| 20    | Pillow Cover (Rexine) Local<br>Best Quality (Sample)  | - 500 Nos -      | Rs    |
| 21    | Cot (White) Drill Cloth (Best Quality) Sample   | - 50 Nos-        | Rs    |
| 22    | Mattress Cover (Rexine) Local for Stretcher (Best Quality)  | - 100 Meter-     | Rs    |
| , 23  | Mattress Foam for Stretcher with Rexine Cover size 6 ½' x 18" x 2" (Diamond A-One /Master Molty) OR Equivalent Sample | - 50 Nos -       | Rs    |
| 24    | Pillow Cotton Full Size   | - 100 Nos-       | Rs    |

| S.NO. | NAME OF ITEMS  |                         | APPROX        | RATES |
|-------|--|-------------------------|---------------|-------|
| 25    | White Poplin (sample)  |                         | 500Meters-    | Rs    |
| 26    | Uniform for Ward Boy Pant & Bushcoat (Light Gray) stit<br>Drill Cloth (sample)                             | ched                    | - 250 Pairs   | Rs    |
| 27    | Uniform for Ward Boy Shalwar & Kameez (Light Gray) s<br>Wash & Wear, (sample)                              | stitched                | - 150 Pairs - | Rs    |
| 28    | Uniform for Sweeper Pant + Bushirt (Navy Blue) Stitched<br>Drill Cloth Sample                              |                         | - 50 Pairs -  | Rs    |
| 29    | Uniform for Chowkidar Pent & Shirt (Khaki) Stitched Drill Cloth (Sample)                                   |                         | - 50 Pairs -  | Rs    |
| 30    | Uniform for Chowkidar Shalwar & Kamiz (Khaki) Stitcher Wash & Wear (Sample)                                | d                       | - 50 Pairs -  | Rs.   |
| 31    | Uniform for Sweeper (Hindu) female<br>Sari, Petticoat & Blouse (Sky Blue) Stitched<br>Poplin (sample)      |                         | - 50 Pairs    | Rs    |
| 32    | Uniform for Sweeper (Christian) female<br>Shalwar, Kameez & Dupatta (Sky Blue) stitched<br>Poplin (sample) |                         | - 50 Pairs    | Rs    |
| 33    | Uniform for Sweeper Shalwar & Kameez (Navy Blue) Ma<br>Wash & wear Sample                                  | le                      | 50 Pairs      | Rs    |
|       |  | GNATURI<br>ONTRACT      |               |       |
|       | N.   | JPPLIER<br>AME OF<br>RM |               |       |
|       |  | DDRESS                  | TELEPHONE NO. |       |
|       |  |                         | OFFICE        | RES:  |

# GOVERNMENT OF SINDH HEALTH DEPARTMENT



# Tender for Purchase of Oxygen Gas Store Items @ Lyari General Hospital, Karachi) for the year 2015-16.

Tender No: LGH/Oxyg/2015-16

Due on: 20th October, 2015

#### GOVERNMENT OF SINDH HEALTH DEPARTMENT

TENDER NO. LGH/Oxyg:/2015-16

DUE ON: 20th October, 2014

#### INVITATION FOR BIDS.

- 1. Sealed bids are invited from eligible bidders for Supply of Oxygen Gas 2015-16. (Extendable for a further period of 90 days).
- 2. Bidding will be conducted under SPP Rules 2010 clause 46(2). Bidding procedures specified in this document is open to all interested bidders.
- 3. Interested bidders may obtain further information from the office of the undersigned and Monitoring & Inspection Cell, Health Department, Govt. of Sindh, Block-24, Shahrah-e-Liaquat, Karachi during the office hours.
- 4. A complete set of bidding documents may be purchased by interested bidders on the submission of a written application from the office of the undersigned and Monitoring & Inspection Cell Health Department, upon cash payment of nonrefundable fees of Rs.1000/- (One Thousands only).
- 5. Bids must be delivered to the address below up to 11:30 AM. All bids must be accompanied by a bid security / earnest Money @ 2 ½ % Rs.125,000/- of the Total bid cost in shape of pay order / bank draft. Late bids will be rejected. Bids will be opened in the presence of the bidder's authorized representatives who choose to attend at the address below at 12.00 Noon.

DR. ABDUL AZIZ SOOMRO.

MEDICAL SUPERINTENDENT SINDH GOVERNMENT LYARI GENERAL HOSPITAL KARACHI

## Instructions to Bidders.

- 1. Bids shall remain open for 30 days from the date of opening. A bid valid for a shorter period shall be rejected as being non-responsive.
- 2. The bidders shall quote their prices inclusive of all duties /taxes/Octroi transportation etc, and all other expenses on free delivery to Consignee's end.
- 3. Price should be quoted in Figures & words both, failing which the offer will be ignored.
- 4. The bid prepared by the Bidder shall comprise the following documents:
  - (a) Bid Form & Price Schedules duly completed by the Bidder.
  - (b) The Bidder shall furnish a bid security @ 2.5% Rs. 125,000/- of the quoted value in the form of a pay order, bank draft.
- 5. The prices quoted by the Bidder shall be fixed during the performance of the contract and not subject to variation on any account. A bid submitted with an adjustable price or conditional will be treated as non-responsive and rejected.
- 6. The Bidder shall prepare bid comprise one single envelope containing separately financial proposal and technical proposal in original. The Envelop shall be marked as "FINANCIAL PROPOSAL" and "TECHNICAL PROPOSAL" in bold and legible letter to avoid confusion. The financial and technical bids, each consisting of the documents listed above.
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- 13. The procuring agency may reject all are any bids subject to the relevant provision of SPPRA rules.
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- after receipt of the Advance acceptance, the successful Bidder shall furnish the performance security @ 5% of the contracted amount and will sign the contract agreement.
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- i. The Contract shall be governed by and interpreted in accordance with laws of the Islamic Republic of Pakistan.
- ii. Store is required immediately. The bidder may however give their short guaranteed delivery period by which the supply will be completed. No Extension will be granted / accorded for the supply.
- iii. The manufacturer should provide an undertaking that if his authorized contractor fail to carry out any assignment in total or in part, manufacturer will be responsible to carry out the same.
- iv. Except as otherwise specifically provided in the Contract, the Contractor shall bear and pay all taxes, duties, levies and charges assessed on the Contractor.
- v. The Contract Price shall be made to the Contractor as specified in the Contract Agreement, subject to the general principle / procedure of the Government of Sindh.
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- viii. If the Contractor fails to attain Completion of the supply or installation within the Time for Completion shall pay to the Purchaser liquidated damages at the rate of 2% per month (0.5% per week) of the Contract Price, or the relevant part thereof. The aggregate amount of such liquidated damages shall in no event exceed the amount of 10%. Once the "Maximum" is reached, the Purchaser may consider termination of the Contract.
- ix. The Contractor warrants that the supplied equipment or any part thereof shall be free from defects in the design, engineering, materials etc. In case of defect in any part at the time of supply of installation it shall be replaced with new one instead of repair.
- x. The purchaser, without prejudice to any other remedy for breach of contract by written notice of default sent to the supplier, may terminate this contract in whole or in part:
  - (a) if the supplier fails to deliver any or all of the contracted items within the period(s) specified in the Contract, or within any extension thereof granted by the Purchaser.
  - (b) If the Supplier fails to perform any other obligation(s) under the Contract.
  - (c) If the supplier, in the judgment of the Purchaser has engaged in corrupt or fraudulent practices in competing for or in executing the Contract.
- xi. The bidder shall confirm the refund of cost difference if the same goods is/was supplied at lower rates to any other Govt./Semi Government institution or Armed Forces in the Province or out side in the same fiscal year.

xii. The Purchaser reserves the right to increase/decrease or delete the quantities of goods etc. at the time of award of contract and also reserves the right to enhance the quantity by 25% of goods and services originally specified in the Schedule of Requirements without any change in unit price or other terms and conditions of goods at any time during the contract period.

## Criteria for evaluation of bids.

- 1. Technical Proposal should have the following documents:
  - I. Original Tender receipt.
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  - VI. Professional Tax Certificate
  - VII. GST Registration Certificate (if applicable).
  - VIII. Bidder should submit a sealed letter from Bank that they can perform business of more than / equal to Rs.5.000 Million.(Rupees Fifty lacs only).
- 2. Financial Proposal should have the following documents:
  - I. Original Pay Order / Bank Draft of Earnest money
  - II. Original copy of the Bid offer with Quoted price.
  - III. Printed Price List which should be duly signed and stamped by the Authorized person of the firm.

# SINDH GOVERNMENT LYARI GENERAL HOSPITAL, KARACHI.

**DATE OF OPENING TENDER 20-10-2015** 

TENDER FOR THE YEAR 2015-2016 TENDER CHARGES RS.1000/- PER SET

#### NOTE:- TENDER MUST BE SUBMIT IN TWO ENVELOPS, TECHNICAL & FINANCIAL BIDS

(Gas Cylinder)

| S.NO.  | TYPE OF GAS CYLINDER  | APPROX             | RATES |
|--------|---|--------------------|-------|
| 5.110. | THE OF GAS CIEMBER  | QUANTITY           | MILO  |
| 1      | MEDICAL OXYGEN  | As per requirement |       |
|        | a) Cylinder of 6.80 Cu. M.                                  | - 800 Nos -        | Rs    |
|        | b) Cylinder of 1.42 Cu. M.                                  | - do -             | Rs    |
|        | c) Cylinder of 0.71 Cu. M.                                  | - 340 Nos -        | Rs    |
| 2      | COMPRESSED AIR  |                    |       |
|        | a) Cylinder of 6.80 Cu. M.                                  | - 5 Nos -          | Rs    |
|        | b) Cylinder of 1.42 Cu. M.                                  | - do -             | Rs    |
| 3      | NITROGEN  |                    |       |
|        | a) Cylinder of 6.80 Cu.M.                                   | - 25 Nos -         | Rs    |
|        | b) Cylinder of 1.42 Cu. M.                                  | - do -             | Rs    |
| 4      | NITROUS OXIDE   |                    |       |
|        | a) Cylinder of 16,200 Liters                                | - 10 Nos -         | Rs    |
|        | b) Cylinder of 3,240 Liters                                 | - do -             | Rs    |
| 5      | SALES TAX   | - do -             | Rs    |
| 6      | COLLECTION & DELIVERY                                       | - do -             | Rs    |
| 7      | CYLINDER SECURITY DEPOSIT<br>OXYGEN, AIR & NITROGEN         |                    |       |
|        | a) Cylinder upto 6.80 Cu. M.                                | - do -             | Rs    |
|        | b) Cylinder of 1.42 Cu. M.<br>NITROUS OXIDE                 | - do -             | Rs    |
|        | c) Cylinder of 16,200 Liters<br>d) Cylinder of 3,240 Liters | - do -             | Rs    |

| S.NO. | NAME OF ITEMS  |                                   | APPROX | RATE |
|-------|--|-----------------------------------|--------|------|
| 8     | REPLACEMENT COST OF CYLIN OXYGEN, AIR & NITROGEN             | NDER                              |        |      |
|       | a) Cylinder upto 6.80 Cu. M.                                 |                                   | - do - | Rs.  |
|       | b) Cylinder of 1.42 Cu. M.<br>NITROUS OXIDE                  |                                   | - do - | Rs   |
|       | c) Cylinder of 16,200 Liters                                 |                                   | - do - | Rs   |
|       | d) Cylinder of 3,240 Liters                                  |                                   | - do - | Rs   |
| . 9   | REPAIR/MAINTENANCE<br>REPLACEMENT/VALVE<br>REPLACEMENT/VALVE |                                   |        |      |
|       | a) Oxygen, Nitrogen, Air                                     |                                   | - do - | Rs   |
|       | b) Nitrous Oxide   |                                   | - do - | Rs   |
| 10    | REPLACEMENT OF SPINDLE                                       |                                   |        |      |
|       | a) Oxygen, Nitrogen, Air                                     |                                   | - do - | Rs   |
|       | b) Nitrous Oxide   |                                   | - do - | Rs   |
|       | c) Hydraulic Testing Chemically Wa                           | shing                             | - do - | Rs.  |
|       | d) Hydraulic Testing Oxygen, Nitrog                          | gen, Air                          | - do - | Rs   |
| •     | e) Hydraulic Testing Nitrous Oxide                           |                                   | - do - | Rs   |
| 11    | DRYING MOISTURE  |                                   |        |      |
|       | a) Nitrous Oxide   |                                   | - do - | Rs   |
|       | b) Painting  |                                   | - do - | Rs   |
|       | c) Neck Ring   |                                   | - do - | Rs   |
|       |  | NATURE OF TENI<br>IE & ADDRESS (i | _      |      |
|       |  | CE PHONE:                         |        |      |

# GOVERNMENT OF SINDH HEALTH DEPARTMENT



# Tender for Purchase of Other Store Miscellaneous Items @ Lyari General Hospital, Karachi) for the year 2015-16.

Tender No: LGH/Misc/Consum/2015-16

Due on: 20th October, 2015

### GOVERNMENT OF SINDH HEALTH DEPARTMENT

TENDER NO. LGH/Misc:/2015-16

DUE ON: 20th October, 2015

#### **INVITATION FOR BIDS.**

- 1. Sealed bids are invited from eligible bidders for Supply of Miscellaneous /Consumable 2015-16. (Extendable for a further period of 90 days).
- 2. Bidding will be conducted under SPP Rules 2010 clause 46(2). Bidding procedures specified in this document is open to all interested bidders.
- 3. Interested bidders may obtain further information from the office of the undersigned and Monitoring & Inspection Cell, Health Department, Govt. of Sindh, Block-24, Shahrah-e-Liaquat, Karachi during the office hours.
- 4. A complete set of bidding documents may be purchased by interested bidders on the submission of a written application from the office of the undersigned and Monitoring & Inspection Cell Health Department, upon cash payment of nonrefundable fees of Rs.1000/-(One thousands only).
- 5. Bids must be delivered to the address below up to 11:30 AM. All bids must be accompanied by a bid security / earnest Money @ 2 ½ % Rs.27,500/- of the Total bid cost in shape of pay order / bank draft. Late bids will be rejected. Bids will be opened in the presence of the bidder's authorized representatives who choose to attend at the address below at 12.00 Noon.

DR. ABDUŁ AZIZ SOOMRO MEDICAL SUPERINTENDENT

SINDH GOVERNMENT LYARI GENERAL HOSPITAL KARACHI

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- 12. Arithmetical errors will be rectified on the following basis. If there is a discrepancy between the unit price and the total price, which is obtained by multiplying the unit price and quantity, or between subtotals and the total price, the unit or subtotal price shall prevail, and the total price shall be corrected. If there is a discrepancy between words and figures, the amount in words will prevail. If the Bidder does not accept the correction of errors, its bid will be rejected.
- 13. The procuring agency may reject all are any bids subject to the relevant provision of SPPRA rules.

- 14. Prior to the expiration of the period of bid validity, the Purchaser will notify the successful Bidder through Advance acceptance. This will constitute the formation of the contract. Within seven (07) days after receipt of the Advance acceptance, the successful Bidder shall furnish the performance security @ 5% of the contracted amount and will sign the contract agreement.
- 15. Distributor once nominated by the manufacturer will be for the whole contract period and manufacturer cannot change its distributor during the year in any case. In exceptional cases the tendering authority may approve changes.

## **General & Special Conditions of Contract**

- i. The Contract shall be governed by and interpreted in accordance with laws of the Islamic Republic of Pakistan.
- ii. Store is required immediately. The bidder may however give their short guaranteed delivery period by which the supply will be completed. No Extension will be granted / accorded for the supply.
- iii. The manufacturer should provide an undertaking that if his authorized contractor fail to carry out any assignment in total or in part, manufacturer will be responsible to carry out the same.
- iv. Except as otherwise specifically provided in the Contract, the Contractor shall bear and pay all taxes, duties, levies and charges assessed on the Contractor.
- v. The Contract Price shall be made to the Contractor as specified in the Contract Agreement, subject to the general principle / procedure of the Government of Sindh.
- vi. The Contract shall be executed in accordance with the Contract Documents and procedures.
- vii. The Purchaser or its representative shall inspect the Machinery / Equipment / Furniture to confirm their conformity to the Contract specification. The inspection will be conducted at the premises of consignee after receipt of supply.
- viii. If the Contractor fails to attain Completion of the supply or installation within the Time for Completion shall pay to the Purchaser liquidated damages at the rate of 2% per month (0.5% per week) of the Contract Price, or the relevant part thereof. The aggregate amount of such liquidated damages shall in no event exceed the amount of 10%. Once the "Maximum" is reached, the Purchaser may consider termination of the Contract.
- ix. The Contractor warrants that the supplied equipment or any part thereof shall be free from defects in the design, engineering, materials etc. In case of defect in any part at the time of supply of installation it shall be replaced with new one instead of repair.
- x. The purchaser, without prejudice to any other remedy for breach of contract by written notice of default sent to the supplier, may terminate this contract in whole or in part:
  - (a) if the supplier fails to deliver any or all of the contracted items within the period(s) specified in the Contract, or within any extension thereof granted by the Purchaser.
  - (b) If the Supplier fails to perform any other obligation(s) under the Contract.
  - (c) If the supplier, in the judgment of the Purchaser has engaged in corrupt or fraudulent practices in competing for or in executing the Contract.

- xi. The bidder shall confirm the refund of cost difference if the same goods is/was supplied at lower rates to any other Govt./Semi Government institution or Armed Forces in the Province or out side in the same fiscal year.
- xii. The Purchaser reserves the right to increase/decrease or delete the quantities of goods etc. at the time of award of contract and also reserves the right to enhance the quantity by 25% of goods and services originally specified in the Schedule of Requirements without any change in unit price or other terms and conditions of goods at any time during the contract period.

## Criteria for evaluation of bids.

- 1. Technical Proposal should have the following documents:
  - I. Original Tender receipt.
  - II. Photocopy of Pay Order / Demand Draft of Earnest money in which amount should not be readable, otherwise the bid ignored,
  - III. Copy of the Bid offer without showing the rates.
  - IV. Registration Certificate with Ministry of Health / if applicable.
  - V. NTN /Income Tax Certificate
  - VI. Professional Tax Certificate
  - VII. GST Registration Certificate (if applicable).
  - VIII. Bidder should submit a sealed letter from Bank that they can perform business of more than / equal to Rs.5.000 Million.(Rupees Fifty lacs only).
- 2. Financial Proposal should have the following documents:
  - I. Original Pay Order / Bank Draft of Earnest money
  - II. Original copy of the Bid offer with Quoted price.
  - III. Printed Price List which should be duly signed and stamped by the Authorized person of the firm.

## SINDH GOVERNMENT LYARI GENERAL HOSPITAL, KARACHI.

DATE OF OPENING TENDER 20-10-2015.

TENDER FOR

TENDER CHARGES RS.1000/-PER SET

THE YEAR 2015-2016

# OTHER STORE MISC; & CONSUMABLE ITEMS

NOTE:- TENDER MUST BE SUBMIT IN TWO ENVELOPS, TECHNICAL & FINANCIAL BIDS

| S.NO. | NAME OF ITEMS   | APPROX<br>QUANTITY | RATES |
|-------|---|--------------------|-------|
| 1     | Soap Lifebouy 95 gm (Lever Brother) OR Equivalent               | - 500 Nos -        | Rs    |
| 2     | Soap Lux 95gm OR Equivalent                                     | - 400 Nos -        | Rs    |
| 3     | Sufi Soap 1000gm (Bar) OR Equivalent                            | - 400 Nos          | Rs    |
| 4     | Soap Washing 1000gm (Nylon 101,990,707,Sufi) OR Equivalent      | - 2500 Kg -        | Rs    |
| 5     | Soda Washing (Best Quality) ( Sample)                           | - 3000 Kg -        | Rs    |
| 6     | Powder Cleaner (Vim) OR Equivalent (Sample)                     | - 200 Kg -         | Rs    |
| 7     | Powder Cleaning (loose) 1 Kg / bag OR Equivalent (Sample)       | - 3000 Kg -        | Rs    |
| 8     | Broom Gova 1 Kg (Thik Stick) OR Equivalent (Best Quality)       | - 1000 Kg -        | Rs    |
| 9     | Broom Gova 250 gm (Thik Stick) OR Equivalent (Best Quality)     | - 1000 Kg -        | Rs    |
| 10    | Broom Soft 250 gm (Best Quality)                                | - 700 Kg -         | Rs    |
| 11    | Bleaching Powder (Adamjee /Sitara) 1 Kg / bag OR Equivalent.    | - 3000 Kg -        | Rs    |
| 12    | Blue Washing (Big Bird Robin) OR Equivalent                     | - 10 Kg-           | Rs.   |
| 13    | Phenyl Liquid Concentrate 500ml / Bottle                        | -2000 Bottles      | Rs    |
|       | (Carolin Enterpris/Welcome/Finis/Martin) OR Equivalent (Sample) |                    |       |
| 14    | Phenyl Liquid loose (liter pack) (Best Quality)                 | - 1000 Packs       | Rs    |
| 15    | Coopex Oil Spray (1 ltr / Tin) OR Equivalent (Sample)           | - 500 Tins -       | Rs    |
| 16    | Coopex Powder (1 Kg / bag) OR Equivalent (Sample)               | - 200 Bags -       | Rs    |
| 17    | Sutli (jute) for Chindi (Best Quality) (Sample)                 | - 1000 Kg -        | Rs    |
| 18    | Sooter / Kg. (Sample)   | - 500 Kg -         | Rs    |
| 19    | Mope Cotton with Wooden Handle 4' long (Sample)                 | - 200 Nos -        | Rs    |
| 20    | Oil Kerosin 1 Ltr / Tin (Sealed)                                | - 1000 Tins -      | Rs    |
| 21    | Basket size 18" x 22" Plastic (Best Quality) (Sample)           | - 500 Nos -        | Rs.   |
| 22    | Bucket (Medium & Large) Plastic (Best Quality) (Sample)         | - 500 Nos -        | Rs    |
| 23    | Finis Spray Pump OR Equivalent (Sample)                         | - 200 Nos -        | Rs.   |

| S.NO. | NAME OF ITEMS   | APPROX        | RATE |
|-------|---|---------------|------|
| 24    | Bleach liquid (Packing of 10 ltr)   | - 2000 Pack - | Rs   |
| 25    | Hydro-Chloric-Acid (Paking of 10 ltr)   | - 2000 Ltr -  | Rs   |
| 26    | Sufi Pwoder 1000 Gm Pkt ( Lever Brother) OR Equivalent (Sample)   | - 500 Kg -    | Rs   |
| 27    | Washing Powder / loose 1Kg Pack (Good quality) (Sample)   | - 2500 Pack - | Rs   |
| 28    | Sulphuric Acid (Kala Tail for Washing Cloth) (Best Quality)   | - 1000Litrs - | Rs   |
| 1     | ELECTRIC ITEMS: Bulb Electric Clear (60 watts) (Philips/Silver/Comboh) OR Equivalent 2 pin (Sample)   | - 200 Nos -   | Rs   |
| 3     | Bulb Electric Clear (100 watts) (Philips/Silver/Comboh) OR Equivalent 2 pin (Sample) Bulb Electric Clear (200 watts) (Philips/Silver/Comboh) OR Equivalent 3 pin (Sample) | - 200 Nos -   | Rs   |
|       | OR Equivalent 2 pin (Sample)  | - 100 Nos-    | Rs   |
| 4     | Bulb Murcury (160 watts) 2 pin (Philips) OR Equivalent 2 pin (Sample)   | - 200 Nos -   | Rs   |
| 5     | Bulb Holder Metal (Brass) 2 pin (Sample) Plug Shue 2 pin 5 amp (P.P.I.) OR Equivalent 2 pin   | - 500 Nos-    | Rs   |
| 6     | (Sample) Plug Shue 3 pin 5 amp (P.P.I.) OR Equivalent 2 pin   | - 20 Nos -    | Rs   |
| 7     | (Sample)  | - 20 Nos -    | Rs   |
| 8     | Plug Shue 3 pin 15 amp (P.P.I.) OR Equivalent 2 pin (Sample)  | - 20 Nos -    | Rs   |
| 9     | Socket 2 pin 5 amp (P.I.I.) OR Equivalent 2 pin (Sample)  | - 20 Nos -    | Rs   |
| 10    | Socket 3 pin 5 amp (P.I.I.) OR Equivalent 2 pin (Sample)  | - 20 Nos -    | Rs   |
| 11    | Socket 3 pin 15 amp (P.I.I.) OR Equivalent 2 pin (Sample)   | - 20 Nos -    | Rs.  |
| 12    | Plug Round for Sterlizer OR Equivalent 2 pin(Sample)  | - 20 Nos -    | Rs   |
| 13    | Plug Flat for Sterlizer OR Equivalent 2 pin (Sample)  | - 20 Nos -    | Rs   |
| 14    | Switch Piyono (P.P.I) OR Equivalent 2 pin (Sample)  | - 20 Nos -    | Rs   |
| 15    | Switch with Socket combined 15 amp (P.P.I) or Equivalent (Sample)   | - 20 Nos -    | Rs   |
| 16    | Tube l Light (Rod) 2' long 20 watts (Hitachi/Philips) OR Equivalent (Sample) Tube Light (Rod) 4' long 40 watts (Hitachi/Philips)  | - 100 Nos -   | Rs   |
| 17    | OR Equivalent (Sample)  | - 500 Nos -   | Rs   |
| 18    | T.L. Choke 20 watts, (Hitachi/Philips) OR Equivalent (Sample)   | - 100 Nos -   | Rs   |
| 19    | T.L. Choke 40 watts, (Hitachi/Philips) OR Equivalent (Sample)   | - 500 Nos -   | Rs   |
| 20    | T.L. Starter 40 watts,(Philips/China) OR Equivalent (Sample)  | - 500 Nos -   | Rs   |
| 21    | T.L. Starter 20 watts,(Philips/China) OR Equivalent (Sample)  | - 100 Nos -   | Rs   |
| 22    | T.L. Patti Fitting 4' long with choke & Starter (Best Quality)  | - 500 Nos -   | Rs   |
| 23    | T.L. Patti Fitting 2' long with choke & Starter   | - 200 Nos -   | Rs   |
| 24    | Electric Wire Gage No.  | - 20 Rim -    | Rs   |

| S.NO.      | NAME OF ITEMS   | APPROX<br>QUANTITY   | RATES |
|------------|---|--|-------|
|            | MISC. ITEMS:  | As per requirement   |       |
| 1          | Cell Batterey Large ( Three Star ) Or Equivalent (Sample) |  |       |
| · 1        | Rope size 1/2" Cotton Thick                               | - 100 Meter -  | Rs    |
| 2          | Rubber Pipe 1/2", 1", per                                 | - 100 Meter -  | Rs    |
| 3          | White Choona per 40Kg Bag ( Sample)                       | - 5 Bag -  | Rs    |
| 4          | Capacitor for Fan.  | - 500 Nos -  | Rs    |
| 5          | Torch (Two Cell)Plastic                                   | - 200 Nos -  | Rs    |
| 6          | Torch (Three Cell) Plastic                                | - 200 Pkt -  | Rs    |
| 7          | Plastic Drums with Cork capacity 100 liter water (Sample) | - 20 Nos -   | Rs    |
| 8          | Wiper size (Medium & Large) (Sample)                      | - 200 Nos -  | Rs    |
| 9          | Pencil Cell per Nos.                                      | - 200 Nos -  | Rs    |
| NOTE ALL Q | UOTED ITEMS SHOULD BE ACCOMPANED WITH SAME                | PLE  |       |
|            |   | SIGNATURE OF CONTRACTIONS/ SUPPLIER/ MANUFACTURES WITH RUBBER STAMP & FULL ADDRESS |       |

Corente.

## SINDH GOVERNMENT LYARI GENERAL HOSPITAL, KARACHI

# DATE OF OPENING TENDER 20th October, 2015 TENDER FOR REPAIR OF MACHINARY/EQUIPMENTS. TENDER NO. MS/LGHK/2015-16 TENDER FORM TENDER F

TENDER FEE Rs.500/= (Non - Refundable)

Date of Submission & Time

20-10-2015 @ 11.30 AM

Date of Opening & Time:

20-10-2015 @ 12:00 Noon

The detailed list of Machinery/Equipment for Job/Repair work is as under:

| Item No. | Description of Job/Repair Work   | Qty | Rate           |
|----------|--|-----|----------------|
| 01.      | Echocardiography Toshiba Color Doppler XARIO                                     | -   | <del>- 1</del> |
|          | Model: SSA – 660A  |     |                |
|          | WORK REQUIRED  | 01  |                |
|          | 1) Repair/Replacement of CPU-ASSAY   |     | ···            |
| 02       | Anesthesia Machine Penlon  |     |                |
|          | Model: SP-102  |     |                |
|          | WORK REQUIRED  | 01  |                |
|          | 1 Replacement of Alarm Block and internal High Pressure tube Oxygen/Air/Nitrous. |     |                |
| 03       | Anesthesia Machine Penlon  |     |                |
|          | Model: AV-900 UK   | 01  |                |
|          | WORK REQUIRED  |     |                |
|          | 1) Replacement of Soleniod Valve.  |     |                |
| 04       | Ultrasound A+B-Scan (Alcon) Imaging System                                       | 01  |                |
|          | S.No.0401613301x, P.N. 607-00000503.   |     |                |
|          | WORK REQUIRED  |     |                |
|          | Replacement / Repair of Mother Board,  |     |                |
| 05       | Ultrasound Machine.  | 01  | · <u>-</u>     |
|          | Kantron-Sigmo30 Colour Doppler,  |     |                |
|          | WORK REQUIRED  |     |                |
|          | Repair of Monitor.   |     |                |
| 06       | Ultrasound Machine Toshiba-Famio 5   | 01  |                |
|          | WORK REQUIRED  |     |                |
|          | Repair for Resolution TGC & Trackball.   |     |                |
| 07       | Ultrasound Machine Toshiba-Famio 5   | 02  | <u>-</u>       |
|          | WORK REQUIRED  |     |                |
|          | Repair of Probe/ trackball and resolution.                                       |     |                |
| 08       | Repair Surgical Diathermy HILL MED   | 02  |                |
|          | Model HM-930 (China)   | 1   |                |
|          | WORK REQUIRED  |     |                |
|          | Repair   |     |                |
| 09       | Repair Surgical Diathermy MEDITOM  | 01  |                |
|          | Model DT-400P (Korea)  |     |                |
|          | WORK REQUIRED  |     |                |
|          | Defected Circuit   |     |                |
|          | Repair / Replacement of Accessories.   |     |                |

| 10 | Repair Suction Machine (Hospivac Italy)         | 01 | Prid. |
|----|---|----|-------|
|    | WORK REQUIRED                                   |    |       |
|    | i) Repairing of pumping, piping required        |    |       |
|    | ii) Body fitting required.                      |    |       |
| 11 | Laproscope (Olympus) WORK REQUIRED              | 01 |       |
| 1  | a) Light Source Lead. Repair/replacement        |    |       |
|    | b) Camera Model: OTV-SPIC-G Repair              |    |       |
|    | c) Insufflators Model: UHI-3 Repair/replacement |    |       |
|    | d) Laproscope Scissors Repair/replacement       |    |       |

#### **TERMS & CONDITIONS:**

- 1. Warranty period for repair work must be given with offer if the repaired equipment is out of order during the warranty period the same will be repaired without charging any cost by the concerned firm,
- 2. If the offer / quoted amount value is more than Rs. 25,000- 2% Security deposit in shape of pay order in favour of Medical Superintendent Lyari General Hospital, Karachi, should be attached with offer. The same will be refunded after 03 Months, if not received any complain of the repaired equipment.
- 3. The bid shall be opened on the above said date & time in the presence of the Hospital Procurement Committee (For Repair). The offer will be evaluated on best evaluated basis.
- 4. Under taking on Rs.50 .00 Non judicial stamp paper that the firm is not involved in any litigation of Abandoned any work in the department. (One Undertaking is sufficient for this Tender Job).
- 5. Affidavit to the effect that the firm / contractor has not been black listed previously by any procuring / executing agency.
- 6. (i) All the applicable taxes should be inclusive with offer.
  - (ii) The Government Taxes will be deducted from the bills of the Contractors / Suppliers.
- 7. Conditional offer against the SPPRA-2010 will not be entertained.
- 8. Address of Bio Medical Work Shop of the Supplier / Contractor be provided.
- 9. List of Bio Medical Engineer / Bio-Medical Technician may be attached.
- 10. List of Technical Staff who will perform this job / work along with Qualification / Experience may also be attached.
- 11. Incomplete and without the required information, offer will not be entertained and offer will be rejected.

#### NOTE:

- 1. Preference will be given to those firms, who are authorized agent of the Equipment which repair work is needed.
- 2. Documentary Evidence must be attached if the work /job is being offered / quoted on Authorized agent / Dealer basis which repair is needed.

| Pay Order DD/C.D No.         | SIGNATURE  |
|------------------------------|------------|
| Dated:                       | NAME:      |
| For Rs                       | STAMP      |
| (Enclosed by the Contractor) | N.T.N NO   |
|                              | GST NO     |
|                              | CONTACT NO |

#### **INSTRUCTIONS:-**

- a) Each bid shall comprise one Single Envelope containing the required information.
- b) Bid Security may be attached in shape of DD / Pay Order / Bank Guarantee issued by the scheduled Bank(s) in Pakistan.
- c) Bid should be dropped in the office of the Additional Medical Superintendent (Admn) Block Sindh Govt. Lyari General Hospital Karachi by mail or by hand in due course of time and the same will be opened in committee room, Sindh Govt. Lyari General Hospital Karachi
- d) Bid / offer will be evaluated as per criteria and the bid's terms & conditions.
- e) Bid should be inclusive all Government taxes (If applicable) and the same will be paid themselves by the Contractor except withholding tax which will be deducted at source in office of the Accountant General Sindh Karachi.

f) Sindh Govt. Lyari General Hospital Karachi shall disqualify a contracotr, whether pre-qualified or not, if it find at any time, that the information submitted by him concerning his qualification and professional, technical, financial, legal, or managerial competence as contractor was false and materially inaccurate or incomplete, at any stage

**CRITERIA FOR EVALUATION OF THE BID:-**

| Authorized Dealer / Agent of the equipments which repair work is required                                  | 20 Points  |
|--|--|
| List of Qualified / Technical Staff and their qualification with address of Bio Medial workshop in Karachi | 30 Points  |
| Compliance of Terms & Conditions / Instructions mentioned in the Bid Form.                                 | 30 Points  |
| Relevant Experience  | 10 Points  |
| Registration with Income Tax / Sales Tax.  | 10 Points  |
|  | repair work is required  List of Qualified / Technical Staff and their qualification with address of Bio Medial workshop in Karachi  Compliance of Terms & Conditions / Instructions mentioned in the Bid Form.  Relevant Experience |

#### Note:-

- Only those firms will be qualified, who will get 70 points.

Signature of Contractor

Stamp

GOVERNMENT OF SINDH

LYARI GENERAL HOSPITAL, KARACHI
TENDER NO.MS/LGH/2015-2016------

TENDER FOR THE PURCHASE OF DRUGS / MEDICINES ETC. FOR THE FINANCIAL YEAR 2015 - 2016, DUE ON 20<sup>th</sup> OCTOBER, 2015

| COST OF TENDER DOCUMENTS:        | Rs. 2,000/= Rupees Two Thousand Only (Non-Refundable)                                |
|----------------------------------|--|
| TENDER SELLING DATE:             | From the date of publishing to 20-10-2015  |
| TENDER SUBMISSION DATE AND TIME: | On 20-10-2015 from 09.00 a.m. to 11:00 a.m.  |
| TENDER SUBMISSION PLACE:         | Office of the A.M.S (Admn) (Procurement) Sindh Govt. Lyari General Hospital Karachi. |
| TENDER OPENING DATE AND TIME:    | On 20-10-2015 at 12.00 Noon.   |
| TENDER OPENING PLACE:            | Committee Room<br>Sindh Govt. Lyari General Hospital, Karachi.                       |

Bidders are required to comply with all the clauses mentioned in the Terms and Conditions of the Bid Documents and any deviation will forbid them from competing in the tender.

#### **TERMS & CONDITIONS**

Bid will be valid for 90 days from the date of opening for technical and financial evaluation. The bidders shall quote their prices inclusive of all applicable duties and Taxes / Logistic Charges etc. and all other expenses on free delivery to Consignee's end at Sindh Govt. Lyari General Hospital, Karachi basis. Price should be quoted in Figures & Words both, failing which the offer will be ignored.

| ITEM<br># | NOMENCLATURE / PRODUCT NAME<br>WITH MANUFACTURER     | QUANTITY DEMANDED | PRICE PER UNIT |
|-----------|--|-------------------|----------------|
|           | DETAILS OF ITEMS & QUANTITY<br>ATTACHED ANNEXURE "B" |                   |                |

DELIVERY PERIOD------VALIDITY: ------VALIDITY:

#### 1. GENERAL CONDITIONS & INSTRUCTIONS:

- 1.1. The quoted rates must be valid up to 30<sup>th</sup> June, 2016 or till the finalization of next tender. Orders will be placed as per requirement after receiving of the budget from Health Department, Government of Sindh.
- 1.2. The tender shall be submitted with all documents in sealed envelopes. The envelope must contain tender inquiry No. on the top, the name of the Bidder should be affixed on the face of the envelope on the left side. The Bidder should prepare the Tender in form of Technical and Financial proposals separately. The envelope should be marked Technical Proposal and Financial Proposal in BOLD and legible letters to avoid confusion. Envelopes should be sealed and addressed to Medical Superintendent, Sindh Govt. Lyari General Hospital Karachi and inserted in Tender box by hand or mail on the scheduled date and time, else tender will not be entertained and would be returned unopened to the bidders.

#### 1.3. Technical Proposal should have the following documents:

- II. Photocopy of Pay Order / Demand Draft of Security Deposit should be attached after hiding the amount in figure and words of the Pay Order / Demand Draft, otherwise the bid will not be considered.
- III. Copy of the Bid offer without showing the rates.
- IV. Valid Manufacturing License, Valid Drug Sales License whichever is applicable.
- V. N.T.N / Income Tax Certificate
- VI. FDA Certificate
- VII. Valid Professional Tax Certificate.
- VIII. GST Registration Certificate (if applicable).
- I.X Bidder should submit a sealed letter from Bank that they can perform business of more than / equal Rs. 100 Million.

#### 1.4. Financial Proposals should have the following documents:

- I. Original Pay Order / Demand Draft of Security Deposit
- II. Original copy of the Financial Proposals with Quoted price.
- III. Printed Price List of the Manufacturer / Importer indicating Trade Price and Retail Price which should be duly signed and stamped by the Authorized person of the Firm.
- 1.5. Only Manufacturers / Importers or their authorized distributors can participate in the Tender. The Distributor should submit authorization letter in Original (as per specimen) addressed to Medical Superintendent Sindh Govt. Lyari General Hospital Karachi with reference to this Tender.

#### 1.6. (A) For Manufacturer:

All the Bidders (Manufacturers or their Distributors) should fill the Company Profile Performa which should be filled by the Manufacturer, duly signed and stamped and should be submitted at the specified time of Tender submission along with the relevant certificate and documents otherwise the bid offer will be ignored. The Company Profile Proforma should have the following documents:

- I. Photocopy of Drug Registration Certificate issued by Ministry of Health Islamabad.
- II. Manufacturing license of the drug.
- III. GMP and CGMP Certificate issued by Ministry of Health Islamabad during last 03 years.
- IV. The Bio-availability / Bio-equivalence report should be submitted or a certificate of analysis carried by the Sindh Provincial Drugs Testing Laboratories and if that is not available then the Federal Drugs Testing Laboratories certificate be submitted. The consignee shall carry out the physical examination after receipt of supplies and standard test / analysis report of the laboratory as mentioned above. (Copy of quality assurance certificate for each batch must be provided along with supplies)
- V. Federal Drug Inspector report of the Manufacturer for last 03 years.
- VI. Other relevant documents as required in Company Profile Proforma.

to

1.6. **(B) For Importer:** 

All the bidders (Importer or their authorized distributors) should fill the Sole Agent Proforma duly signed and stamped and should be submitted at the specified time of tender submission along with the relevant documents as required in the Proforma otherwise the bid offer will be ignored.

- 1.7. Tenders must be completed by typing in the column provided / on separate Letter Head duly signed. Soft copies of tender form, Company profile and Sole Agent Proforma may be obtained from the office of the AMS (Procurement), LGH.
- 1.8. The tender must be free from erasing, cutting and over writing. In case of erasing, cutting and over writing, authorized person should initial it duly stamped, else the offer will not be entertained.
- 1.9. The rates of each item should be written in figures as well as in words. Arithmetical errors will be rectified on this basis. If there is a discrepancy between the unit price and the total price that is obtained by multiplying the unit price and the quantity, the unit price shall prevail and the total price shall be corrected. In case of discrepancy the price in words will be authenticated and final.
- 1.10. Conditional Tenders against the Govt. Rules / policy will not be considered / entertained / accepted.
- 1.11. Tenders shall be accompanied by Bid Security @ 2.5 % of the value of store(s) quoted by them in form of Pay Order / Demand Draft in favor of Medical Superintendent, Sindh Govt. Lyari General Hospital Karachi.
- I. Pay order of Tender Fee amounting to Rs. 1000/- (Non-Refundable) must be attached with Technical Proposal (In Original), else the bids will be rejected. For alternate offer a separate Pay order of Tender Fee amounting to Rs. 1000/- (Non-Refundable) shall be submitted, otherwise both Proposals will be ignored.
- 1.12. All Bidders should provide at least six samples free of cost of the quoted products.
- 1.13. The following words shall be printed and stamped with indelible ink prominently in English "SINDH GOVT. LYARI GENERAL HOSPITAL, KARACHI" & "NOT FOR SALE" outside and inside the Packing on all goods.
- 1.14. The tendered rate should be inclusive of all applicable taxes to Federal & Provincial Govt. or local bodies and will be deducted from the bill of the contractors / suppliers.
- 1.15. All the (applicable) Government taxes (Income Tax / Sindh Sales Tax (if applicable) / 0.30% Stamp Duty of the value of the contract amount will be deducted from the bills of the Contractors /Suppliers.
- 1.16. If the Contractors / Suppliers require Tax exemption facility regarding non deduction of Advance Income Tax vide CR No. 1(10)WHT/2001, dated 11<sup>th</sup> April, 2002, the required documents shall be submitted. The exemption certificate issued by the concerned authority must be attached and on C.I.F basis a copy of Bill of Entry & Tax paid Challan copy should be attached with the bill.
- 1.17. One "SAMPLE TENDER PROFORMA" is supplied with the list of items to be purchased. The items have to be quoted on the Proforma; duly filled stamped & signed by the authorized bidder. Only those items shall be typed on the Proforma / separate letter head (as per serial of Proforma) for which the rates are to be quoted. Any alteration / correction must be initialed and each page is to be signed and stamped at the bottom.
- 1.18. Schedule is prepared with the generic name; however the bidder may also mention the brand name against the generic name.

- 1.19. The dosage form, strength and pack size offered for bidding in the tender shall be those which are registered / approved by the Ministry of Health. The dosage form, strength and pack size quoted by the bidder shall confirm to the ones mentioned in the tender form, dosage should be submitted for quoted items.
- 1.20. Registration number, make or origin of the country of the drug must be mentioned for each item, for which quotation is given, otherwise it will not be considered. The bidder will also provide original warranty of Manufacturer / Importer with Batch number and Quantity at the time of supply of medicines.
- 1.21. The quoted rates once offered by the firms will not be changed during the contract period.
- 1.22. It is mandatory that drugs quoted are registered with the Federal Ministry of Health.
- 1.23. The supplies should be in commercial pack as per drug act 1976 and delivered at the designated place of Sindh Govt. Lyari General Hospital Karachi by the authorized representative of the firm at the risk and cost of the supplier. Any breakage or shortage of stock will be recovered from the supplier.
- 1.24. All documents should be submitted duly paginated / flagged and the detailed of the documents should also be mentioned in front of the Index.

#### 2. **SPECIAL CONDITIONS:**

- 2.1. Stores are required as early as possible. The bidder may, however, give their short guaranteed delivery period by which the supply will be completed positively.
- 2.2. The bidders shall quote their firm and final price both in figure and in words on free delivery basis to Sindh Govt. Lyari General Hospital Karachi.
- 2.3. Distributor once nominated by the manufacturer / importer will be for the whole contract period and manufacturer / importer cannot change its distributor during the year in any case. In exceptional cases the tendering authority may approve changes.
- 2.4. No manufacturer / importer shall authorize their distributor / agent / any firm or person to quote the same item, which the manufacturer is quoting itself in any tender. Failing those offers of both the manufacturer as well as other bidder shall be ignored.
- 2.5. The manufacturer / importer of sub-standard adulterated spurious, counterfeit, misbranded or contaminated medicine(s) item(s) etc, may be black listed by the competent authority as per judgment of the drugs court or any other authority whose decision will be final and in accordance with the offence and hence their earnest money may not be released till the case is decided by the court or any other authority.
- 2.6. If goods are declared sub-standard the Manufacturer and their Distributor are equally responsible and are bound to supply additional quantity of whole batch free of cost.
- 2.7. The successful bidder shall pay the testing fees directly to the Provincial Drug Testing Lab, for the batches to be supplied and should supply extra quantity of drug / drugs used for testing purpose.
- 2.8. The drugs shall be accompanied by the necessary warranty on Form 2-A (on non-judicial stamp paper) in accordance with the provision of the Drugs Act 1976 and rules framed there under.
- 2.9. The sample of the drugs supplied by the vendors will be drawn from this hospital by the concerned Inspector of Drugs for test and analysis purpose under Drugs Act 1976.
- 2.10. The supply should be executed in minimum number of batches.

- 2.11. The vendors who quote dispensing items (Methylated spirit, paraffin etc.) must possess re-packing License issued from Ministry of Health Islamabad or their offer will be ignored.
- 2.12. The Technical evaluation carried out by the Formulary Committee Sindh Govt. Lyari General Hospital Karachi will be final, which will be assessed on clinical experience basis of the consultant (s) in the relevant specialty.
- 2.13. Only items approved by the Formulary Committee will be considered by the Hospital Procurement Committee.
- 2.14. Only those item's Financial offer will be announced / considered which were technically qualify by the Formulary Committee, If any firm wants to give the separate item wise financial bid they are advised to give separate item wise sealed envelope (s) of every item and should mention the name of the item and tender serial number on the front in BOLD and legible letters to avoid confusion, else the Financial Proposal Envelope will be opened on qualified item basis and it will not be challenged by the Suppliers / Contractors to open the Financial Proposal of the disqualified items.
- 2.15. If a sample of a batch of drug or item is declared in contravention of section 3 / 23 of drugs act 1976 on the basis of test analysis report of CDL, Karachi or on presence of any foreign particle seen by the competent authority, those will be destroyed and payment will not be made to the supplier. The supplier will be responsible to provide the fresh stock of standard quality within 45 days against the rejected batch. Otherwise amount equivalent to the supplied quantity of defective goods will be deducted from their bill and action will be initiated against the offending firm according to the Drugs Act. 1976 on terms and condition of the tender, whichever is applicable.
- 2.16. Manufacturer / Importer will issue an authorization letter as per attached sample proforma along with technical proposal.
- 2.17. Manufacturer / Importer of vaccines, Sera and recombinant DNA products should submit Lot Release certificate issued by Federal Government Analyst National Control Laboratory for Biologicals (NCLB), WHO approved vaccines, will be considered only.
- 2.18. Manufacturers & Importers will directly supply as per supply order along with Bill of Warranty and Quality Certificate of each batch.
- 2.19. The Supplies should carry expiry date at least 02 year from the date of supply. The Supplies left over (not used) shall be returned back & if needed be replaced by new batch.

#### 3. PURCHASER'S RIGHT TO VARY QUANTITIES

The Hospital Authority reserves right to increase / decrease or delete the quantities of Drugs / Medicines etc. at the time of award of contract and also reserves the right to enhance the quantity of goods / services originally specified in the schedule of requirement without any change in unit price or other terms and conditions of goods at any time during contract period.

#### PURCHASER'S RIGHT TO ACCEPT ANY BID AND REJECT ANY OR ALL BIDS:

The Hospital Authority reserves the right to purchase full or part of the store or ignore / scrap / cancel the tender as per relevant rules of SPPRA-2010 (Amended 2013/14).

#### 5. **PERFORMANCE SECURITY:**

The successful bidders will have to deposit the requisite security in the shape of a Pay Order / Demand Draft at 2.5% value of the order amount. The same will be released after successful completion of stores. After the acceptance of the Tender by the Vendor, a purchase order may be issued during the validity period and if offer is not accepted by the Vendor, the Bid Security shall be forfeited to the Government Treasury.

#### 6. SHELF LIFE REQUIRED:

No supply will be accepted having expiry date less than 80% of shelf life for the National manufacturer and 70% for imported items (wherever applicable).

#### 7. REDRESSAL:

Redressal of Grievances & settlement of dispute will be as per SPPRA Rule-2010 (Amended - 2013/14).

#### 8. <u>BID EVALUATION (T.E.R):</u>

Bid evaluation will be considered on following grounds for approval of company.

# (1) CRITERIA FOR EVALUATION OF THE BID LABORATORY ITEMS

| CRITERIA   | YES | NO |
|--|-----|----|
| Copy of Registration National Tax Number (NTN) (Mandatory) / General Sale Tax (GST) (If applicable)                                    |     |    |
| Copy of Undertaking regarding supply of required items within stipulated time with quality certificate from the authorized Laboratory. |     |    |
| Financial Turn-over for the last three years with bank certificate regarding financial soundness of the firm                           |     |    |
| Relevant experience (Documentary Evidence should be attached) for the last three years with large Hospitals.                           |     |    |

# NOTE: The offer will not be entertained if the required documents have not been found attached. (ii)

| FOR PHARMACEUTICALS  | FOR IMPORTERS  |
|--|--|
| Previous performance in the Hospital (last three years)                                | Previous performance in the Hospital (last three years)  |
| Federal Drug Inspector / Drug licensing Board (Rating) of last three years             | Company agreement with principal duly countersigned by Pakistan Embassy/Consulates (If applicable) |
| Financial Soundness of the Company   | Financial Soundness of the Company   |
| Assay procedure / References Standard / Evidence of Bio-availability / Bio Equivalence | Assay procedure / References Standard / Evidence of Bio-availability / Bio Equivalence             |
| Quality Control Department Assessment  | Quality Control Department Assessment  |
| Warehouse assessment as per attached Performa  | Warehouse assessment as per attached Performa  |

|                        | Market Share more than 50% of the product in comparison to Government |
|------------------------|---|
|                        | Government Share more than 50% of the product in comparison to market |
| Source of Raw Material | Source of Raw Material  |

Technical evaluation of the products will be assessed on clinical experience of the consultant (s) of the relevant specialty.

#### 9. UNDERTAKING ON RS.100/- NON JUDICIAL STAMP PAPER

- 9.1. 1 / we read / understand the conditions specified in the tender inquiry and undertake:
- 9.2. That 1 / we will remain bound to supply any item as an additional quantity at the same rate on which said item I/ we have supplied during the contract period.
- 9.3. That 1 / we agree whether our tender accepted for total, partial or enhanced quantity for all or any single item.
- 9.4. I / we also agree to supply and accept the said item at the rates for the supply of contracted quantity within the stipulated period shown in the contract.
- 9.5. I / we understand and ensure for the supply of quality medicines. I/ we also agree to supply the 100% additional quantity without any additional charges, if the supplies/part of the supplies declared sub standard.
- 9.6. I / we undertake that, if any of the information submitted in accordance to this tender inquiry found incorrect, our contract may be cancelled at any stage on our cost and risk.
- 9.7. I / we undertake to deposit the Drug Testing fees per batch to the Provincial/Central Drugs Testing Laboratories, the said-fees will be deposited directly to POL / CDL, if the assignment given to the said laboratories.
- 9.8. I / we undertake that, I/ we will replace the drugs three month before its expiry.
- 9.9. 1 / we undertake that, I/ we have never been black listed.

| Signature of Contractor / Supplier: |       |       |
|-------------------------------------|-------|-------|
| Name of Firm with full Address:     | ····· |       |
| E mail Address:                     |       |       |
| Office Telephone #                  | Fax#  | Cell# |

# TERMS AND CONDITIONS ACCEPTANCE CERTIFICATE 10. is hereby confirmed that we have carefully read all terms and I / we, M/s. conditions of the tender and also agreed to abide SPPR-2010 (Amended 2013/14) for procurement of Drugs / Medicines etc. during the validity of the tender. Signature of Vendor Name of Authorized Person Designation Seal and Address \_\_\_\_\_ Tel No. \_\_\_\_ Fax No. \_\_\_\_ E-mail address \_\_\_\_ Witness 1) Name\_\_\_\_\_\_Signature\_\_\_\_\_ 2) Name Signature SPECIMEN FOR AUTHORIZATION LETTER BY MANUFACTURER/IMPORTER FOR THEIR DISTRIBUTOR: I/We, M/s. hereby authorize M/s. Address: \_\_\_\_\_\_ as our authorized Distributor for Sindh Govt. Lyari General Hospital Karachi for the financial year of 2015-2016 or till the finalization of the next tender. We give undertaking that if there is any sub-standard spurious, counterfeit, misbranded or contaminated and short supply of item(s) by our Distributor, we will be responsible for the same. We also undertake that we have read and understood the terms and conditions of the tender enquiry. Signature of Manufacturer / Importer Name & Designation

#### Note:

Address:

- i) All the above said instructions must be read carefully for compliance; else the offer will be ignored / rejected.
- ii) Department reserves the right to ask and verify any document from the participants related with Manufacturer / Importer of item, to assess the quality.

#### **ANNEXURE-"A"**

#### **Contract Form**

| THIS AGREEMENT made the day of 2<br>Procuring agency] (here in after called "the Procuring<br>country of Supplier] (here in after called "the Supplier  | gagency")  | of the one part and [name of Supplier] of [city and |
|---|------------|---|
| WHEREAS the Procuring agency invited bids for ce goods and services] and has accepted a bid by the Su of [contract price in words and figures] (here in after contract price in words and figures)  | pplier for | the supply of those goods and services in the sum   |
| NOW THIS AGREEMENT WITNESSETH AS FO   | OLLOW      | S:  |
| 1. In this Agreement words and expressions shall have the Conditions of Contract referred to.   | ve the san | ne meanings as are respectively assigned to them in |
| 2. The following documents shall be deemed to form  | and be re  | ead and construed as part of this Agreement, viz:   |
| <ul> <li>(a) The Bid Form and the Price Schedule subn</li> <li>(b) The Schedule of Requirements;</li> <li>(c) The Technical Specifications;</li> <li>(d) The General Conditions of Contract;</li> <li>(e) The Special Conditions of Contract; and</li> <li>(f) The Procuring agency's Notification of Aw</li> </ul> |            | the Bidder;   |
| 3. In consideration of the payments to be made by the the Supplier hereby covenants with the Procuring ager therein in conformity in all respects with the provision  | ncy to pro | ovide the goods and services and to remedy defects  |
| 4. The Procuring agency hereby covenants to pay the services and the remedying of defects therein, the Conthe provisions of the contract at the times and in the materials.   | tract Pric | e or such other sum as may become payable under     |
| IN WITNESS whereof the parties hereto have cause respective laws the day and year first above written.  | ed this Ag | greement to be executed in accordance with their    |
| Signed, sealed, delivered   | by         | the (for the Procuring Agency)                      |
| Signed, sealed, delivered   | by         | the (for the Supplier)                              |

#### SINDH GOVT. LYARI GENERAL HOSPITAL KARACHI HEALTH DEPARMENT

#### PHARMACEUTICAL COMPANIES PROFILE

#### Note.

- a. Please fill in the correct information carefully, submission of wrong/ vague information may lead to disqualification of the firm.
- b. Each page of the Proforma must be duly signed & stamped.
- c. Provide a soft copy (CD) along with duly filled Proforma in triplicate.

#### **GENERAL INFORMATION**

| 1.  | Name of the company   |  |
|-----|---|--|
| l.a | Year of establishment   |  |
| l.b | Form of the company Annex copy of registration  Individual Private limited Public limited Partnership Corporation Other (specify) |  |
| l.c | Address of the firm  Registered office, Telephone no. Fax No. E mail address etc.   |  |
| 1.d | Location of the firm Annex certificate     Industrial     Commercial     Residential     Agricultural     Other (specify)         |  |
| l.e | Enlistment with any stock exchange (in Pakistan / overseas. If any. Annex details)  |  |
| 1.f | Blacklisting / complaint against the firm (by any govt. or other org. if any)   |  |
| 2.  | Drugs manufacturing license number (Annex copy of Drugs manufacturing License)  |  |
| 2.a | Type of activity being carried out by the company:  Formulation • Repacking • Other (specify)                                     |  |

| 2.b | Name & Address of the companies / subsidiaries and associated companies, if any, With whom there is collaboration or joint venture                 | 1<br>2<br>3 |                   |        |              |
|-----|--|-------------|-------------------|--------|--------------|
| 2.c | Annual sales turnover of the firm in the previous 3 years (In millions)  • 1.  | Year        | Domestic<br>Sales | Export | Govt. Sector |
|     | • 2.   |             |                   |        |              |
| 2.d | <ul> <li>3.</li> <li>Certificate from bank that manufacturer is capable of doing business up to and</li> <li>financial worth of company</li> </ul> |             |                   |        |              |

| 3   | Total area of the unit (in sq ft)  |  |
|-----|--|--|
| 3.a | Total Covered Area (in sq ft) Annex copy of approved lay out plan by Ministry of Health, Islamabad)  |  |
| 3.b | Total covered Area of production (in sq ft)  |  |
| 3.c | Total covered area of quality control department(Sq ft)  |  |
| 3.d | Total covered area of administration block (in Sq ft)  |  |
| 3.e | Plant layout, design & finishes  • Enable avoidance of cross contamination  • Enable proper cleaning, drainage, sanitization as per written sanitation program  • Enable proper ventilation, air conditioning and maintenance. |  |
| 4.  | Income Tax no (NTN)  • Attach copy of certificates,  • Attach details of tax paid during past 3 years  • Attach copy of last annual income tax return  |  |
| 5.  | Sales Tax Registration No. (if any. Applicable ) Attach copy of certificate, and details of sales tax Paid during past 3 years   |  |
| 6.  | G M P compliance certificate & GMP audit report (attach report/ certificate)   |  |

| 7.          | <ul> <li>Assay procedure of all product</li> <li>Reference Standard</li> <li>Bio-availability/ Bio-equivalence report of all product</li> </ul> |  |
|-------------|---|--|
| 8           | Technical personnel involved in Manufacture of pharmaceutical products (Attach section wise list with qualification & experience)               |  |
| 8.a         | Production  |  |
|             | Pharmacist  |  |
|             | • Chemist   |  |
| _           | Other technical persons   |  |
| 8.b         | Quality Control   |  |
|             | Pharmacist  |  |
|             | Chemists/ biochemist/ microbiologist  |  |
|             | Other Technical Persons   |  |
| 8.c         | Product/ formulation Development Section  |  |
|             | Pharmacist/chemist/other  |  |
| 9           | Total Employees (including Technical staff)   |  |
|             | Management  |  |
|             | Production  |  |
|             | Quality control   |  |
|             | Research & Development Sales and Marketing Administration   |  |
| <del></del> | Others  |  |
|             | Total Head Count  |  |

| 10    | <ul> <li>Training of personnel</li> <li>On job training schedule</li> <li>Schedule/program for training of technical staff</li> <li>Schedule/program for training of worker (Including GMP and hygiene)</li> </ul>  |   |
|-------|---|---|
| 11    | Medical chednp erwwtan-  Prior to induction  Annual  Periodic (worker doing optical checking)   |   |
| 12    | Manufacturing information   |   |
| 12. a | No of registered drugs  |   |
| 12.b  | No of drugs being manufactured (active)   | V4.0                                      |
| 12.c  | No of PV listed items (Attach list)   |   |
| 13.   | Raw materials (Active ingredients) (Name of the source companies along with country of origin)  |   |
| 14.   | Dosage form and production capacity   |   |
|       | Dosage Form   | Production capacity (per 8 hours)         |
|       | <ol> <li>Solid</li> <li>Liquid</li> <li>Inject able (liquid)</li> <li>Inject able (Dry powder)</li> <li>Ointments/ Creams/ Gels</li> <li>Capsules</li> <li>IV infusions</li> <li>Dialysis solutions</li> <li>Repacking / External preparations Etc</li> </ol> | 1<br>2<br>3<br>4<br>5<br>6<br>7<br>8<br>9 |
| 15    | Cleanliness & maintenance of:   |   |
|       | • Equipments - List   | W.B.                                      |
| 16    | Emergency power supply arrangements<br>(For at least critical areas of the unit)  |   |
| 17    | Drug recalls system (volunteer) & SOPs for recall (Annex details)   |   |
| 18    | Inspection record of the company  |   |
|       | Years Inspecting Authority  | Brief remarks of the inspecting authority |

| <b>}</b> | 1   |  |
|----------|---|--|
|          | 2   |  |
|          | 3   |  |
| 19       | Market Availability and Since when (mention year)  • Products routinely manufactured  • Only occasionally / on request (Annex six batches certificates) |  |
| 20       | Number of distributors/ authorized Agents (Attach list indicating name, address / approx sales range of each)   |  |
| 21       | Source of Raw Material  |  |

# MANUFACTURING INFORMATION STORES / WARE HOUSES

| Covered area | (Annex       | details | of each  | store) |
|--------------|--------------|---------|----------|--------|
| Covered area | / * FIII 1 F | a curio | 01 00011 |        |

| S.#  | Criteria  | Available as<br>per SOPs,<br>GMP or cGMP | Partial | Not<br>available | Remarks |
|------|---|--|---------|------------------|---------|
| i.   | Separate stores for:  Raw material  Labels & packaging material and  Finished products  |  |         |                  |         |
| ii.  | Separate quarantine facilities for :-Incoming raw material Packaging materials  |  |         |                  |         |
| Hi   | <ul> <li>Cold rooms facility for:</li> <li>Vaccines, biological and other controlled temperature products</li> <li>Cold chain facility</li> </ul> |  |         |                  |         |
| Ιν   | Temperature & humidity control facility in the stores.  |  |         |                  |         |
| V.   | Identification slips for raw material:  • Approved  • Rejected  • Quarantine  |  |         |                  |         |
| Vi   | Source of raw materials  • Active and  • Inactive (Annex list of the source companies with countries of their origin, as at SR No 16)             |  |         |                  |         |
| Vii  | Separate dispensing area & equipment  |  | _       |                  |         |
| Viii | Proper storage of materials as per storage instructions on the label  |  |         |                  |         |
| Ix   | Adequate space for the orderly storage of all materials   |  |         |                  |         |
| X    | Segregation of material as;  • Quarantine  • Approved,  • Rejected  • Recalled  • Expired material/ drugs   |  |         |                  |         |

| Xi  | Storage of materials:-  |      |  |
|-----|---|------|--|
|     | On pallet, stands   |      |  |
|     | Shelves / racks   |      |  |
|     | • Off the floor,  |      |  |
|     | Off the walls (in all stores)   |      |  |
| Xii | Safe/ separate storage of inflammable / hazardous materials / chemicals               |      |  |
| Xiv | Separate storage facility for expired raw/ other materials                            |      |  |
| Xv  | Dispensing of materials according to prescribed SOP & GMP requirements                |      |  |
| Xvi | Traceability of specific batch from the distribution / sale records of finished good. | <br> |  |

| S.#         | covered area of the sectionBarrels   | Available as                | Partial | Not       | Remarks                                 |
|-------------|--|-----------------------------|---------|-----------|---|
| <b>5.</b> π | Citteria   | per SOPs,<br>GMP or<br>cGMP |         | available |   |
| Ι.          | Water source City water supply/ deep-well other  |                             |         |           |   |
| ii.         | Water treatment plant Multi effect, fabricated with GMP standard lines, de-ionized water |                             |         |           |   |
| iii.        | Treated water storage capacity   |                             |         |           |   |
| iv.         | Equipments washing/ cleaning facility  |                             |         |           | · · ·                                   |
| v           | Mixing equipments  |                             |         |           |   |
| Vi          | Heat source (Electricity, gas o r oil )  |                             |         |           |   |
| Vii         | Storage capacity (No of containers with capacity)  |                             |         |           | ,                                       |
| Viii        | In-process production & quality control records  | / 2.18**                    |         |           |   |
| Ix          | Filtration equipment   |                             |         |           |   |
| X           | Water outlets system (concealed or open drain system)                                    |                             |         |           |   |
| Xi          | Bottles De-Carton ing Room   |                             | _       |           |   |
| Xii         | Facility for Bottles;  • Washing  • Drying  • Blowing                                    |                             |         |           | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| xiii.       | Automatic Filling Line & Machines (No, Type & Capacity                                   |                             |         |           |   |
| xiv.        | Caps Sealing Machines (No, Type & Capacity)  |                             |         |           |   |
| XV.         | Mode of Labeling (Manual / Automatic)  |                             |         |           |   |
| xvi.        | In Process Filling and QC Record   |                             |         |           |   |
| xvii.       | Transfer & Filling Lines Pipes (SS or Other)   |                             |         |           |   |

#### **TABLETS SECTION**

| (Please give make, model, typlist) | e, No and value of the equipment along with availability stilus, |
|------------------------------------|--|
| Total covered Area                 | Batch Capacity   |

| S#   | Criteria  | Available as per<br>SOPs GMP or<br>cGMP | Not<br>Availabl<br>e | Remarks |
|------|---|---|----------------------|---------|
| 1    | Mixer (wet and Dry) (type / Capacity)   | , , , ,                                 |                      |         |
| li   | Granulator (wet and Dry) (No, Type / Capacity )   |   |                      |         |
| lii  | Dryers (FB / Tray) (No, Type / Capacity)  |   |                      |         |
| Iv   | Quarantine:  • Facility and Procedures for storing of granules prior to QC release for compression  • Facility and procedures for storing of tables prior to QC release for packing |   |                      |         |
| V    | Compression machines (No, Type & Number)  |   |                      |         |
| Vi   | In process QC and compression record [Weight variation / Hardness]  |   |                      |         |
| Vii  | Mode of Coating being done (Film / Sugar/Automatic/manual   |   |                      |         |
| Viii | Film Coating Machine, if available (Number / capacity)  |   |                      |         |
| iX   | Coating pans (Film & sugar) (Number / capacity)   |   |                      |         |
| X    | Ventilation & Exhaust system for film coating section [for coating section]   |   |                      |         |
| Xi   | Batch Coating Capacity (In consistent with batch capacity   |   |                      |         |
| Xii  | Strip Packing Machines (Number / Capacity)  |   |                      |         |
| Xiii | Blister Packing Machines (Number / Capacity)  |   |                      |         |
| Xiv  | Printing Machines (Inject / Laser/ Other)   |   |                      |         |
| Xv   | QC Batch Release Certificate (prior to packing)   |   |                      |         |

# **CAPSULES SECTION**

(Please give make, model, type, no & value of the equipment along with availability status, attach complete list)

Total covered area\_\_\_\_\_\_\_Batch Capacity

| S#   | Criteria  | Available as<br>per GMP,<br>cGMP &SOPs | Partial | Not<br>available | Remarks |
|------|---|--|---------|------------------|---------|
| I    | Powder Mixer No, Type & Capacity  |  |         |                  |         |
| li   | Capsule filling Machine (Auto / semi Auto No, Type, Capacity)   | _                                      |         |                  |         |
| Hi   | Temperature and humidity Control (HV AC System)   |  |         |                  |         |
| Ιν   | Dehumidifiers for capsules filling (if being used, type)  |  |         |                  |         |
| V    | In processing filling & QC record   |  | -       |                  |         |
| Vi   | Blister packing Machines Number / capacity, Make  |  |         |                  |         |
| Vii  | Blister Batch & Expiry Date Printing Facility (inject, Laser / Other)   |  |         |                  |         |
| Viii | Quarantine Facility • For storing of material prior to QC release for filling • For storing of Capsules prior to QC release for packing |  |         |                  |         |

DRY POWDER (ORAL)

(Please give make, model, type, no & value of the equipment along with availability status, attach complete list)

Covered area\_\_\_\_\_\_ Batch Capacity

| S.#  | Criteria   | Available as<br>per SOPs<br>GMP or<br>cGMP | Partial | Not<br>available | Remarks |
|------|--|--|---------|------------------|---------|
| 1    | Powder Mixer No, Type & Capacity   |  | -       |                  |         |
| li   | Temperature and Humidity Control (HV AC System)  |  |         |                  |         |
| lii  | Filling Machine Manual / Automatic/ Semi   |  |         |                  |         |
| Iv   | Bottles:     De Cartooning     Washing Facility     Drying Facility     Blowing Facility |  |         |                  |         |
| V    | In process Filling and QC Record   |  |         |                  |         |
| Vi   | Labeling & Packing Manual/ Automatic   | <u> </u>                                   |         |                  |         |
| Vii  | Quarantine Facilities In process / Finished  |  | - †-    |                  |         |
| Viii | Maintenance and Cleanliness  |  |         |                  |         |

OINEMENTS / CREAMS / GELS/
(Please give make, model, type, no & value of the equipment along with availability status, attach complete list) Total covered area Batch Capacity

| S.#   | Criteria   | Available as<br>per SOPs<br>GMPor cGMP | Partial | Not<br>available | Remarks |
|-------|--|--|---------|------------------|---------|
| i.    | Homogenizer / Mixing equipments (Type / capacity)                      |  |         |                  |         |
| ii.   | Preparation & Mixing Equipments (Type / Capacity)                      |  |         |                  |         |
| iii.  | Tube Filling / Sealing Equipments [Manual / Semi Automatic/ Automatic] |  |         |                  |         |
| iv.   | Temperatures / Humidity Control  |  |         |                  |         |
| V.    | Type of preparation being produced [crams, Ointment, Gels]             |  |         |                  |         |
| vi.   | Batch printing Facility (Laser/Inject / Other)                         |  |         |                  |         |
| vii.  | In process Filling Record & QC Record                                  |  |         |                  |         |
| viii. | Equipment washing facility   |  |         |                  |         |
| ix.   | Batch Record   | <u> </u>                               |         |                  |         |
| X.    | Quarantine Facility  |  |         |                  |         |
| xi.   | Maintenance of the area  |  |         |                  |         |

| T) I  | (DRY POWDERS se give make, model, type, no & value of the equipment  | t along with av                            | ailahility si | atus attach      | complete l |
|-------|--|--|---------------|------------------|------------|
|       | covered area  Batch Capacity   | it along with av                           | anaomity 3    | atus, attuon     | complete.  |
| S#    | Criteria   | Available as<br>per SOPs<br>GMP or<br>cGMP | Partial       | Not<br>available | Remarks    |
| i.    | Dedicated Air Handling Unit ( HV AC System) as per requirement of the area   |  |               |                  |            |
| ii.   | Positive Pressure (positive Pressure maintained in each filling room <0.05 inch of water column, Manometer               |  |               |                  |            |
| iii.  | Area.  • Sterilization record  • Fumigation record  • Mopping Record   |  |               |                  |            |
| iv.   | Vials Washing Drying Blowing & Sterilization Facilities (washing with filtered water under HEPA filter, if being washed) | ****                                       |               |                  |            |
| V.    | Laminar Flow Hood (Over the filling machine)   |  |               |                  |            |
| vi.   | Change Rooms Air Lock & Buffers (Before filling / processing room)   |  |               |                  |            |
| vii.  | Nitrogen / Inert gas flushing of the vials/ ampoules, if required so   |  |               |                  |            |
| viii. | Vials Filling Machine [Number, Type and capacity, & Make]  |  |               |                  |            |
| ix.   | Vials sealing Machine Number type, Capacity Make flip off cap or other   |  |               |                  |            |
| X.    | Written procedure for handling of rejected vials   |  |               |                  |            |
| xi.   | Vials batch over printing facility (Laser, Inject / Other)   | ·  |               |                  |            |
| xii.  | Labeling & Packing ( Automatic semi automatic Manual)  |  |               |                  |            |
| xiii. | SOPs for the sterile area  | - <del>12</del>                            |               |                  |            |
| Xiv.  | Equipment Cleaning Facility / Scheme   | ·  |               |                  |            |

**GENERAL / ANTIBIOTIC (LIQUID INJECTABLE)** 

| (Please give make, | odel, type, no & value of the equipment along with availability status, attach complete | list |
|--------------------|---|------|
| Total covered area | Batch Capacity  |      |

| S.#   | Criteria  | Available<br>per<br>GMP<br>cGMP | e as<br>SOPs<br>or  | i | Not<br>available | Remarks |
|-------|---|---------------------------------|---------------------|---|------------------|---------|
| i.    | Dedicated Air Handling Unit HVAC System (As per requirement of the area)  |                                 | <del>-</del> •, _ · |   |                  |         |
| ii.   | Positive pressure Positive Pressure maintained in each filling room <0.05 inch of water col. Manometer installed  |                                 | -                   |   |                  |         |
| iii.  | Water Treatment Plant Multi effect Multi col, Fabricated with GMP standard SS lines & pyrogen free water  |                                 |                     |   |                  |         |
| iv.   | Water Storage Facility & Capacity, If stored (SS storage tank, with sufficient capacity, kept at 80c with 24 hrs circulation through loop under UV light) |                                 |                     |   |                  |         |
| V.    | Filtration of solution (aseptically, through recommended filter   |                                 |                     |   | 1                |         |
| vi.   | Laminar Flow Hood for filling Machine   |                                 |                     |   |                  |         |
| vii.  | Change Rooms & Buffers (Change Room, air lock and buffer room prior to filling room)  |                                 |                     |   |                  |         |
| viii. | Sterilization and de-hydrogenation of filling equipment & their parts (In autoclave prior to use)   | .,                              |                     |   |                  |         |
| ix.   | Bulk Solution held under positive pressure during filling   |                                 |                     |   |                  |         |
| X.    | Ampoules Filling Machines (Number, Type, Capacity & Make)   |                                 |                     |   |                  |         |
| xi.   | Equipment cleaning with treated water   | <u>.</u>                        |                     |   |                  |         |
| xii.  | Aseptic batching area sterilization Facilities /<br>Mechanism   |                                 |                     |   |                  |         |
| xiii. | Environmental monitoring program for the aseptic batching area, sterile filling room and filling line   |                                 |                     |   |                  |         |

| xiv.  | Integrity monitoring System for laminar flow hood and HVAC, serving sterile area |          |   |   |  |
|-------|--|----------|---|---|--|
| XV.   | Ampoules Batch Printing Facility (Laser / Inject / Other)                        | μ        |   |   |  |
| xvi.  | Labeling & Packing (Automatic / Manual)  |          |   |   |  |
| xvii. | Equipment cleaning Facility/ Scheme  |          |   |   |  |
| Xviii | Biological indicators used in sterilization process                              | 1.450-00 | - |   |  |
| Xix   | Record of sterilization cycle (Temp / time)                                      |          |   |   |  |
| Xx    | Optical Checking Room Facility   |          |   |   |  |
| Xxi   | Eye Examination Record of Optical Inspectors                                     |          | _ |   |  |
| Xxii  | Rejection Record   |          |   | - |  |

| Xxiii | Ampoule Printing Facility (overprinting)  |      |             |
|-------|---|------|-------------|
|       | Area and Environment Monitoring Record & SOPs   |      |             |
|       | • installation, Operational & Performance of all equipments being conducted & maintained                        |      |             |
| Xxiv  | Aseptic filling process monitoring through<br>media fill and broth fill trial performed (biannually<br>minimum) |      |             |
|       | Calibrations of all measuring and monitoring devices being conducted / maintained regularly                     |      |             |
| Xxv   | Class of the Sterile Area (As per std requirement of the areas)   |      |             |
| Xxvi  | Quarantine for the product waiting QC release   | <br> | <del></del> |

# **QUALITY CONTROL / QUALITY ASSURANCE**

Equipments
(Please give make, model, type, no & value of the equipment along with availability status, attach complete list) covered area \_\_\_\_

| S.# | Criteria                                       | Available as<br>per SOPs<br>GMPor cGMP | Partial        | Not<br>Available | Remarks               |
|-----|--|--|----------------|------------------|-----------------------|
| ĺ   | UV , Spectrophotometer                         |  | L –            |                  | -                     |
| 2   | HPLC   |  |                |                  |                       |
| 3   | Moisture Analyzer                              |  |                |                  |                       |
| 4   | PH Meter                                       |  | <u></u>        | <del>  -</del> - | <u></u>               |
| 5   | Disintegration Apparatus                       | <u> </u>                               |                |                  |                       |
| 6   | Dissolution Apparatus                          | <del> </del>                           |                |                  |                       |
| 7   | Friability Testing Apparatus                   |  |                | <del> </del> -   |                       |
| 8   | Hardness tester                                |  |                |                  |                       |
| 9   | Melting point apparatus                        | -                                      |                |                  |                       |
| 10  | Electric Ovens                                 |  |                | <del>  -</del>   |                       |
| 11  | Digital balance                                |  |                |                  |                       |
| 12  | Gas Chromatography                             |  |                |                  |                       |
| 13  | Floury Meter                                   |  |                |                  |                       |
| 14  | Refract meter                                  |  |                | <del> </del>     |                       |
| 15  | Polari meter                                   |  | · <del>-</del> | <u> </u>         | <u> </u>              |
| 16  | I R Spectrophotometer                          |  |                |                  | , ,,, <del>,,</del> , |
| 17  | Micro Lab                                      |  |                |                  | •                     |
| 18  | Pyrogen Testing Apparatus / Facility           |  | . <del>.</del> |                  |                       |
| 19  | Laminar Flow Hood & Sterility Testing Facility |  |                |                  |                       |
| 20  | Particle Counter                               |  | <u>.</u>       |                  |                       |
| 21  | Colony Counter                                 |  |                |                  | <u>.</u> .            |
| 22  | Incubators Hot & cool                          |  |                |                  |                       |

| г  |   |             |   |          |              |
|----|---|-------------|---|----------|--------------|
| 23 | Electric Ovens  |             |   |          |              |
| 24 | Quality Control Procedures and Analytical<br>Methods  |             |   |          |              |
|    |   |             |   |          |              |
| 25 | Analytical Record Of: Active Raw Material Inactive Material In process products packing & Packaging Materials Finished Products   |             |   |          |              |
| 26 | Shelf Life / Stability Studies  |             |   |          |              |
| 27 | Complete Batch History and Record   |             |   |          |              |
| 28 | Batch Release Certificates Record   |             |   | <u> </u> | <del>-</del> |
| 29 | In process Q C Inspector [Appointed or Not]   | <del></del> |   |          |              |
| 30 | No of Technical personal working in the Lab with qualification (attach list)  Chemist  pharmacists  Biochemist  Microbiologist  Others  |             |   |          |              |
| 31 | Quality Standards being followed  United State Pharmacopoeia British Pharmacopoeia Japanese Pharmacopoeia Pakistan Pharmacopoeia Chinese Pharmacopoeia Any other / Own specifications |             | - |          |              |
| 32 | Retention samples of each batch in its original container   |             |   |          |              |
| 33 | Quality Control tests invariably conducted for: Active Non Active Packaging Materials In process / Intermediate Bulk and Finished products  |             |   |          |              |
| 34 | SOPs / Prescribed procedure for approval of vendor / source of starting materials   |             |   |          |              |

| 35 | Testing from each container of active starting material or other random sampling    |  |
|----|---|--|
| 36 | Procedures for releasing finished products SOP's                                    |  |
| 37 | Person responsible for release of batch (qualification & experience)                |  |
| 38 | Time period for retention of control samples (till expiry or one year after expiry) |  |
| 39 | Other details of quality assurance/ QC procedures, if any (Annex Details)           |  |
| 40 | Stability tests and shelf life studies (for each products)                          |  |
| 41 | Testing from each container of active starting material or other random sampling    |  |

| Signature_ | _   |        |        |
|------------|-----|--------|--------|
| (With name | and | Design | ation) |

Stamp of Company

## SINDH GOVT. LYARI GENERAL HOSPITAL KARACHI HEALTH DEPARMENT

## **IMPORTER / SOLE AGENT**

### Note.

- a. Please fill in the correct information carefully, submission of wrong/ vague information may Lead to black listing of the firm.
- b. Each page of the Performa must be duly signed & stamped.
- c. Provide a soft copy (CD) along with duly filled Performa in triplicate.
- d. Company/firm agreement with principle duly signed by embassy is mandatory.

### GENERAL INFORMATION

|    | GENERAL INTORNA   | IATION |
|----|---|--------|
| 1. | Name of the company   |        |
| 2. | Year of establishment   |        |
| 3. | Address of the firm  Registered office,  Telephone no.  Fax No. E mail address etc.   |        |
| 4. | Location of the Company     Industrial     Commercial     Residential   |        |
| 5. | Form of the company Annex copy of MO A/ registration Individual Private limited Public limited Partnership Corporation Other (specify)                              |        |
| 6. |   |        |
| 7. | Blacklisting / Complaint / Litigation against the firm (By any govt. or other org. if any)  |        |
| 8. | Drugs sale license number, if applicable (Annex copy License)   |        |
| 9. | Type of activity being carried out by the company :- • Manufacturing • Assembly /Repacking • Import • Other (specify)  Name & Address of the Principal(s) companies |        |
| •  |   |        |

| 11. | Capital value of the firm/sole agent;  Authorized Capital  Paid up capital  |           |             |              |
|-----|---|-----------|-------------|--------------|
| 12  | Annual sales turnover of the firm in the previous 3 years (In millions)   | Year      | Market Sale | Govt. Sector |
|     | • 1.  |           |             |              |
|     | • 2.  |           |             |              |
|     | • 3.  |           |             |              |
| 13. | Income Tax no (NTN)  • Attach copy of certificates,  • Attach details of tax paid during past 3 years  • Attach copy of last annual income tax return |           |             |              |
| 14. | Sales Tax Registration No. (if any. Applicable) Attach copy of certificate, and details of sales tax Paid during past 3 years                         |           |             |              |
| 15. | G MP compliance certificate & GMP audit report of the Principal(s) (Attach report/ certificate) (if applicable)                                       |           |             |              |
| 16. | Free Sale Certificate of the items in the country of origin   | ·         |             | <del>-</del> |
| 17. | Registration with MOH, Islamabad where applicable Drugs/Surgical Disposable, attach separate sheet  |           |             |              |
| 18. | List of Technical personnel with qualification (Attach List)  |           |             | <del></del>  |
| 19. | Total Employees (Including Technical staff)   |           |             |              |
|     | Administration  |           |             |              |
|     | Technical   |           |             |              |
|     | Management  |           |             |              |
|     | Sales / Marketing   |           |             |              |
| 20. | Market Availability Products routinely manufactured/imported Only occasionally / on request   | <u></u>   |             |              |
| 21. | No of registered / items of the principals (In case of drugs only)  | · <u></u> |             |              |

| 22. | No of Thermo labile drugs (if any)   |
|-----|--|
| 22  | O. P. Hui  |
| 23. | Storage Facilities [For thermo labile drugs]                                   |
| 24. | Storage Facilities   |
|     | [For the drugs to be stored at room temperature]                               |
| 25. | Cold Chain Facility including cold room / storage and during transport         |
| 26. | GMP Certificate of the Principals, from the country of origin                  |
| 27. | Export of the products to the countries other than Pakistan                    |
| 28. | Drug registration Certificate in the country of origin (In case of drugs only) |
| 29. | Emergency power supply arrangements (For at least critical area)               |
|     | · · · · · · · · · · · · · · · · · · ·  |

(With name and Designation)

Stamp of Company

TABLET S/ CAPSULES

| Ite    | A/U     | Nomenclature/Generic              | Requirement | Name of Product | Manufacturer | Packing | Trade | Rate  | Total | _ |
|--------|---------|-----------------------------------|-------------|-----------------|--------------|---------|-------|-------|-------|---|
| #<br>E |         |                                   | •           |                 |              | Size    | Price | /unit | Value |   |
| 1      | Tab.    | Misoprostol 200 mg                | 12000 Tabs  |                 |              |         | (1:1) | _     |       | _ |
| 2      | Tab.    | Aspirin 75mg                      | 50000 Tabs  |                 |              |         |       |       |       |   |
| 3      | Tab.    | Glyceryl Trinitrate 0.5mg         | 12000 Tabs  |                 |              |         |       |       |       | _ |
| 4      | Tab.    | Domperidon 10mg                   | 50000 Tabs  |                 |              |         |       |       |       | _ |
| S      | Tab.    | Potassium Chloride 500mg          | 5000 Tabs   |                 |              |         |       |       |       | _ |
| 9      | Tab.    | Tranxaminic acid 500mg            | 10000 Tabs  |                 |              |         |       |       |       | _ |
| 7      | Tab     | Folic Acid 5 mg                   | 100000 Tabs |                 |              |         |       |       |       | _ |
| œ      | Tab     | Metformin 250mg                   | 50000 Tabs  |                 |              |         |       | ŀ     |       | _ |
| 6      | Tab     | Metformin 500mg                   | 50000 Tabs  |                 |              |         | ļ.    |       |       | _ |
| 10     | Tab     | Nifedipine 10mg                   | 30000 Tabs  |                 |              |         |       |       |       |   |
| 11     | Tab     | Nifedipine 30mg                   | 30000 Tabs  |                 |              |         |       |       |       |   |
| 12     | Tab.    | Nifedipine 60mg                   | 30000 Tabs  |                 |              |         |       |       |       |   |
| 13     | Tab.    | Nifedipine 20mg                   | 10000 Tabs  |                 |              |         |       |       |       |   |
| 14     | Tab.    | Telethromycin 400mg               | 20000 Tabs  |                 |              |         |       |       |       |   |
| 15     | Tab.    | Desvenlafaxime 50mg               | 10000 Tabs  |                 |              |         |       |       |       | _ |
| 16     | Tab.    | Desvenlafaxime 100mg              | 10000 Tabs  |                 |              |         |       |       |       | _ |
| 17     | Tab.    | Paracetamole 500mg + Thiaridazine | 50000 Tabs  |                 |              |         |       |       |       | _ |
|        |         | 3mg + Caffeine Anhydrous 70mg     |             |                 |              |         |       |       |       |   |
| 18     | Tab/Cap | Diacerein 50mg                    | 15000 Tabs  |                 |              |         |       |       |       |   |
| 19     | Tab     | Otilonium Bromide 40mg            | 15000 Tabs  |                 |              |         |       |       |       |   |
| 70     | Tab     | Calcium Lactate                   | 50000 Tabs  |                 |              |         |       |       |       |   |
| 21     | Tab/Cap | Erdodsteine 15mg                  | 25000 Tabs  |                 |              |         |       |       |       |   |
| 22     | Tab     | Clopidogral 75 mg                 | 50000 Tabs  |                 |              |         |       |       |       |   |
| 23     | Tab     | Solifenacin Succinate 5mg         | 5000 Tabs   |                 |              |         |       |       |       |   |
|        |         |                                   |             |                 |              |         | -     |       | 7     | _ |

# Signature of Contractor / Supplier

Name of Firm with full Address \_\_\_

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Office Telephone #.

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DROPS-CREAM/OINTMENTS

| Ιtο           | 11/4      | Nomenclature/Conorio              | Degminent      | Nome of December | 7            | -       |        |       |       |
|---------------|-----------|-----------------------------------|----------------|------------------|--------------|---------|--------|-------|-------|
| 7             |           |                                   | medan ement    | Name of Froduct  | Manufacturer | Packing | I rade | Kate  | Total |
| ‡<br><b>∃</b> |           |                                   |                |                  |              | Size    | Price  | /unit | Value |
| 1             | Drop      | Chloramphenicol Ear / Eye Oint    | 20000          |                  |              |         |        |       |       |
| 7             | Oint/crea |                                   | 10000          |                  |              |         |        |       |       |
|               | ш         | Clobetasol propionate 10gm        |                |                  |              |         |        |       |       |
| m             | Oint/     |                                   | 20000          |                  |              |         |        |       |       |
|               | Cream     | Aceclofenic Acid 20gm             |                |                  |              |         |        |       |       |
| 4             | Cream     | Bufexamac 20+5gm                  | 2000           |                  |              |         |        |       |       |
| S             | Oint      | Premethrin Cream 30gm             | 2000           |                  |              |         |        |       |       |
| 9             | Oint      | Betamethasone 15gm                | 2000           |                  |              |         |        |       |       |
| 7             | Oinnt     | Polyfex Eye Ont                   | 10000          |                  |              |         |        |       |       |
| ∞             | Drops     | Tropicamide 0.5%                  | 100            |                  |              |         |        |       |       |
| 6             | Drops     | Tropicamide 1%                    | 100            |                  |              |         |        |       |       |
| 10            |           | Proparacaine Hcl 0.5%+            | 100            |                  |              |         |        |       |       |
|               | Drops     | Benzalkonium Chloride 0.01%.      |                |                  |              |         |        |       |       |
| 1             | Drops     | Cyclopentolate 1%                 | 100            |                  |              |         |        |       |       |
| 12            | Drops     | Phenylephrine0.12%                | 100            |                  |              |         |        |       |       |
| 13            | Drops     | Phenylephrine 2.5%                | 100            |                  |              |         |        | ,     |       |
| 4             | Drops     | Phenylephrine 10%                 | 100            |                  |              |         |        |       |       |
| 15            | Cream     | Gentamicin 0.1%/ Hydrocardozin 10 | 10 20000 Tubes |                  |              |         |        |       |       |
|               |           |                                   |                |                  |              |         |        | _     |       |

Syrup

| Ite<br>m # | A/U | Nomenclature/Generic      | Requirement   | Name of Product | Manufacturer Packing Size | Trade<br>Price | Rate<br>/unit | Total<br>Value |
|------------|-----|---------------------------|---------------|-----------------|---------------------------|----------------|---------------|----------------|
|            |     |                           |               |                 |                           |                |               |                |
| _          | Syp | Cephradine 250mg/5ml 60ml | 20000 bottles |                 |                           |                |               |                |
| •          |     |                           |               |                 |                           |                |               |                |
| 7          | Syp | Metronidzole Benzoate     | 20000 bottles |                 |                           |                |               |                |
|            |     | 200mg/5ml 60 ml           |               |                 |                           |                |               |                |

Signature of Contractor / Supplier

Name of Firm with full Address \_\_\_\_

E mail Address.

Office Telephone#.

INJECTIONS

| Item<br># | A/U  | Nomenclature/Generic  | Requirement | Name of Product | Manufacturer | Packing<br>Size | Trade<br>Price<br>(T.P) | Rate<br>/unit | Total<br>Value |
|-----------|------|---|-------------|-----------------|--------------|-----------------|-------------------------|---------------|----------------|
| 1         | Įu,  | Chlorpheneramine 1ml Amp                                    | 50000 Nos   |                 |              |                 |                         |               |                |
| 2         | Inj. | Vancomycin 500mg Vial                                       | 1500 Nos    |                 |              |                 |                         |               |                |
| 3         | Inj  |   | 24000 Nos   |                 |              |                 |                         |               |                |
| 4         | in   | Insulin N 100mg/1ml Vial                                    | soN 0009    |                 |              |                 |                         |               |                |
| 5         | Inj  | Insulin R 100mg/1ml Vial                                    | soN 0009    |                 |              |                 |                         |               |                |
| 9         | Inj  | Potassium Chloride 10ml Amp                                 | 1000 Nos    |                 |              |                 |                         |               |                |
| 7         | Inj  | Dextrose Water 25% 20ml Amp                                 | 12000 Nos   |                 |              |                 |                         |               |                |
| <b>∞</b>  | Īŋ   | Transaminic Acid500mg/5mlAmp                                | 2400 Nos    |                 |              |                 |                         |               |                |
| 6         | Inj  | Magnessium Sulphate 10ml Amp                                | 1200 Nos    |                 |              |                 |                         |               |                |
| 10        | Inj  | Atrcurium Mesylate 5mg/ml Amp                               | 5000 Nos    |                 |              |                 |                         |               |                |
| =         | Inj  | Metacrorpropamide 1ml Amp                                   | 24000 Nos   |                 |              |                 |                         |               |                |
| 12        | Īij  | Lidocaine plain 1.8ml Cartridge                             | 1000 Nos    |                 |              |                 |                         |               |                |
| 13        | in.  | Recombinant Factor VII (1.2 mg)                             | 20 Nos      |                 |              |                 |                         |               |                |
| 4         | Inj. | Anti-D (Rho) Immunoglobulin 300                             | 1500 Nos    |                 |              |                 |                         |               |                |
| ,         |      | (1500 iu) Vial  |             |                 |              |                 |                         |               |                |
| 15        | Inj. | Potassium Chloride 7.4% (I.V) 20ml. Vial                    | 30000 Nos   |                 |              |                 |                         |               |                |
| 16        | Inj. | Sodium Bicarbonate 0.7% (I.V)                               | 20000 Nos   |                 |              |                 |                         |               |                |
|           |      | Joint vial  |             |                 |              |                 |                         |               | _              |
|           | Ė    | Dextrose 5% + Sodium Chloride 0.9% 1000 ml. (Drip with mono | 5000 Bagss  |                 |              |                 |                         |               |                |
|           |      | cap)  |             |                 |              |                 |                         |               |                |
| <u>∞</u>  | Juj  | Dextrose Saline 1/2 Strength<br>500ml. (Drip with mono cap) | 8000 Bags   |                 |              |                 |                         |               |                |
| 19        | Inj. | Dextrose Saline 1/5 Strength                                | 20000 Bags  |                 |              |                 |                         |               |                |
| 20        | lni. | Dextrose Water 5% 1000 ml (Drin                             | 20000 Bags  |                 |              |                 |                         |               |                |
|           | ,    | with mono cap)  | record Caps |                 |              |                 |                         |               |                |
| 21        |      | Dextrose Water 5% 500 ml (Drip                              | 30000 Bags  |                 |              |                 |                         |               |                |
|           | ini. | with mono cap)  |             |                 |              |                 |                         | -             |                |
| 22        | Inj  | Ketamine Vials  | 5000 Nos    |                 |              |                 |                         |               |                |
| 23        | ini  | Labetolol 50mg/10ml Vials                                   | 3000 Nos    |                 |              |                 |                         |               |                |
| 24        | inj. | Leuprorelin Acetate 3.75mg Depot Iml Vial                   | 10 Nos      |                 |              |                 |                         |               |                |
| 25        | Inj. | Mannitol 20 % 500 ml. (Drip with                            | 2000 Nos    |                 |              |                 |                         |               |                |
|           |      | mono cap) or equivalent Vial                                |             |                 |              |                 |                         |               |                |

| mono cap) or equivalent Vial Inj. Metronidazole 100 ml. Vial Ringer Lactate 1000 ml (Drip with mono cap) or equivalent Ringer Lactate 500 ml. (Drip with mono cap) or equivalent Inj. Sodium Chloride 0.9% 1000ml (Drip with mono cap) or equivalent Inj. Sodium Chloride 0.9% 500ml (Drip with mono cap) or equivalent Inj. Folinic Acid (Leucovorin) 3mg / Vial Inj. Folinic Acid (Leucovorin) 50mg / Vial Inj. Folinic Acid (Leucovorin) 50mg / Vial Inj. Folinic Acid (Leucovorin) 50mg / Vial Inj. Cyclophosphamide Igm /ml Vial Inj. Cyclophosphamide Igm /ml Vial Inj. Cyclophosphamide Igm /ml Solution Inj. Cefepime 500 mg Vial Inj. Cefepime 500 mg Vial Inj. Cefepime 1000 mg Vial   | 26  | Ini.    | Mannitol 20 % 100 ml. (Drin with        | 1000 Nos                              |           |   |   |   |  |
|--|-----|---------|---|---------------------------------------|-----------|---|---|---|--|
| Inj. Metronidazole 100 ml. Vial  Inj. Ringer Lactate 1000 ml (Drip with mono cap) or equivalent  Ringer Lactate 500 ml. (Drip with mono cap) or equivalent  Inj. Sodium Chloride 0.9% 1000ml (Drip with mono cap) or equivalent  Inj. Sodium Chloride 0.9% 500ml (Drip with mono cap) or equivalent  Inj. Folinic Acid (Leucovorin) 3mg/ Vial  Inj. Folinic Acid (Leucovorin) 15mg/ Vial  Inj. Folinic Acid (Leucovorin) 50mg/ Vial  Inj. Cyclophosphamide Igm/ml Vial  Inj. Cyclophosphamide Igm/ml Vial  Inj. Cyclophosphamide Igm/ml Solution  Inj Cefepime 500 mg Vial  Inj Cefepime 500 mg Vial  Inj Cefepime 1000 mg Vial  |     | ,       | mono cap) or equivalent Vial            |                                       |           |   |   |   |  |
| Inj. Ringer Lactate 1000 ml (Drip with mono cap) or equivalent Inj. Rodium Chloride 0.9% 1000ml (Drip with mono cap) or equivalent (Drip with mono cap) or equivalent Inj. Sodium Chloride 0.9% 500ml (Drip with mono cap) or equivalent Inj. Folinic Acid (Leucovorin) 3mg/Vial Inj. Folinic Acid (Leucovorin) 15mg/Vial Inj. Folinic Acid (Leucovorin) 50mg/Vial Inj. Folinic Acid (Leucovorin) 50mg/Vial Inj. Cyclophosphamide Igm/ml Vial Inj. Cyclophosphamide Igm/ml Vial Inj. Cyclophosphamide Igm/ml Solution Inj. Cefepime 500 mg Vial Inj. Cefepime 500 mg Vial Inj. Cefepime 1000 mg Vial   | 27  | Inj.    | Metronidazole 100 ml. Vial              | 200000 Nos                            |           |   |   |   |  |
| Ringer Lactate 500 ml. (Drip with mono cap) or equivalent Inj. Sodium Chloride 0.9% 1000ml (Drip with mono cap) or equivalent Inj. Sodium Chloride 0.9% 500ml (Drip with mono cap) or equivalent (Drip with mono cap) or equivalent Inj. Folinic Acid (Leucovorin) 3mg / Vial Inj. Folinic Acid (Leucovorin) 15mg / Vial Inj. Folinic Acid (Leucovorin) 50mg / Vial Inj. Folinic Acid (Leucovorin) 50mg / Vial Inj. Cyclophosphamide Igm /ml Vial Inj. Cyclophosphamide Igm /ml Vial Inj. Cyclophosphamide Igm /ml Vial Inj. Cefepime 500 mg Vial Inj Cefepime 500 mg Vial Inj Cefepime 1000 mg Vial   | 28  | Inj.    | Ringer Lactate 1000 ml (Drip with       | 120000 Bags                           |           |   |   |   |  |
| Ringer Lactate 500 ml. (Drip with mono cap) or equivalent  Inj. Sodium Chloride 0.9% 1000ml (Drip with mono cap) or equivalent  Inj. Sodium Chloride 0.9% 500ml (Drip with mono cap) or equivalent  Inj. Folinic Acid (Leucovorin) 3mg / Vial  Inj. Folinic Acid (Leucovorin) 15mg / Vial  Inj. Folinic Acid (Leucovorin) 50mg / Vial  Inj. Folinic Acid (Leucovorin) 50mg / Vial  Inj. Cyclophosphamide Igm /ml Vial  Inj. Cyclophosphamide Igm /ml Vial  Inj. Cyclophosphamide Igm /ml Vial  Inj. Cefepime 500 mg Vial  Inj Cefepime 500 mg Vial  Inj Cefepime 1000 mg Vial  |     |         | mono cap) or equivalent                 |                                       |           |   |   |   |  |
| Inj. Sodium Chloride 0.9% 1000ml (Drip with mono cap) or equivalent (Drip with mono ca | 56  |         | Ringer Lactate 500 ml. (Drip with       | 50000 Bags                            |           |   |   |   |  |
| Inj. Sodium Chloride 0.9% 1000ml (Drip with mono cap) or equivalent (Drip with mono cap) or cquivalent (Drip with mono ca |     | Ξ.      | mono cap) or equivalent                 |                                       | _         |   |   |   |  |
| (Drip with mono cap) or equivalent  Inj. Sodium Chloride 0.9% 500ml (Drip with mono cap) or equivalent  Inj. Infliximab 100mg / ImVial  Inj. Folinic Acid (Leucovorin) 3mg / Vial  Inj. Folinic Acid (Leucovorin) 15mg / Vial  Inj. Folinic Acid (Leucovorin) 50mg / Vial  Inj. Folinic Acid (Leucovorin) 50mg / Vial  Inj. Cyclophosphamide Igm /ml Vial  Inj. Inj. Tirofiban Hydrochloride MS 0.25mg / 50ml (USA/EEC/Japan or equivalent) Solution  Inj Cefepime 500 mg Vial  Inj Cefepime 1000 mg Vial  | 30  | Inj.    | Sodium Chloride 0.9% 1000ml             | 110000 Bags                           |           |   |   |   |  |
| Inj. Sodium Chloride 0.9% 500ml (Drip with mono cap) or equivalent Inj. Infliximab 100mg / ImVial Inj. Folinic Acid (Leucovorin) 3mg / Vial Inj. Folinic Acid (Leucovorin) 15mg / Vial Inj. Folinic Acid (Leucovorin) 50mg / Vial Inj. Cyclophosphamide Igm /ml Vial Inj. Cyclophosphamide Igm /ml Vial O.25mg / 50ml (USA/EEC/Japan or equivalent) Solution Inj Cefepime 500 mg Vial Inj Cefepime 1000 mg Vial Inj Cefepime 1000 mg Vial  |     |         | (Drip with mono cap) or                 | 1                                     | _         |   |   |   |  |
| Inj. Sodium Chloride 0.9% 500ml (Drip with mono cap) or equivalent Inj. Infliximab 100mg / ImVial Inj. Folinic Acid (Leucovorin) 3mg / Vial Inj. Folinic Acid (Leucovorin) 15mg / Vial Inj. Folinic Acid (Leucovorin) 50mg / Vial Inj. Cyclophosphamide Igm /ml Vial Inj. Cyclophosphamide Igm /ml Vial O.25mg / 50ml (USA/EEC/Japan or equivalent) Solution Inj Cefepime 500 mg Vial Inj Cefepime 1000 mg Vial Inj Cefepime 1000 mg Vial  |     |         | equivalent                              |                                       |           |   |   |   |  |
| (Drip with mono cap) or equivalent  Inj. Infliximab 100mg / ImVial  Inj. Folinic Acid (Leucovorin) 3mg / Vial  Inj. Folinic Acid (Leucovorin) 15mg / Vial  Inj. Folinic Acid (Leucovorin) 50mg / Vial  Inj. Cyclophosphamide Igm /ml Vial  Inj. Cyclophosphamide Igm /ml Vial  Inj. Inj. Tirofiban Hydrochloride MS 0.25mg / 50ml (USA/EEC/Japan or equivalent) Solution  Inj Cefepime 500 mg Vial  Inj Cefepime 1000 mg Vial  | 31  | Inj.    | Sodium Chloride 0.9% 500ml              | 50000 Bags                            |           |   |   |   |  |
| Inj. Infliximab 100mg / ImVial Inj. Folinic Acid (Leucovorin) 3mg / Vial Inj. Folinic Acid (Leucovorin) 15mg / Vial Inj. Folinic Acid (Leucovorin) 50mg / Vial Inj. Cyclophosphamide Igm /ml Vial Inj. Cyclophosphamide Igm /ml Vial Inj. Inj. Tirofiban Hydrochloride MS 0.25mg / 50ml (USA/EEC/Japan or equivalent) Solution Inj Cefepime 500 mg Vial Inj Cefepime 1000 mg Vial Inj Cefepime 1000 mg Vial  |     | <u></u> | (Drip with mono cap) or                 | · · · · · · · · · · · · · · · · · · · |           |   |   |   |  |
| Inj. Infliximab 100mg / ImVial Inj. Folinic Acid (Leucovorin) 3mg / Vial Inj. Folinic Acid (Leucovorin) 15mg / Vial Inj. Folinic Acid (Leucovorin) 15mg / Vial Inj. Cyclophosphamide Igm /ml Vial Inj. Cyclophosphamide Igm /ml Vial Inj. Inj. Tirofiban Hydrochloride MS 0.25mg / 50ml (USA/EEC/Japan or equivalent) Solution Inj Cefepime 500 mg Vial Inj Cefepime 1000 mg Vial Inj Cefepime 1000 mg Vial  |     |         | equivalent                              |                                       |           |   | - |   |  |
| Inj. Folinic Acid (Leucovorin) 3mg / Vial Folinic Acid (Leucovorin) 15mg / Vial Folinic Acid (Leucovorin) 15mg / Vial Folinic Acid (Leucovorin) 50mg / Vial Inj. Cyclophosphamide Igm /ml Vial Inj. Cyclophosphamide Igm /ml Vial Inj. Inj. Tirofiban Hydrochloride MS 0.25mg / 50ml (USA/EEC/Japan or equivalent) Solution Inj Cefepime 500 mg Vial Inj Cefepime 1000 mg Vial Inj Cefepime 1000 mg Vial   | 32  | .inj    | Infliximab 100mg/1mVial                 | 12 Nos                                |           |   |   |   |  |
| Inj. Folinic Acid (Leucovorin) 15mg/ Vial Inj. Folinic Acid (Leucovorin) 50mg/ Vial Inj. Cyclophosphamide Igm/ml Vial Inj. Inj. Tirofiban Hydrochloride MS 0.25mg / 50ml (USA/EEC/Japan or equivalent) Solution Inj Cefepime 500 mg Vial Inj Cefepime 1000 mg Vial Inj Cefepime 1000 mg Vial   | 33  | lnj.    | Folinic Acid (Leucovorin) 3mg/<br>Vial  | 40 Nos                                |           |   |   |   |  |
| Inj. Folinic Acid (Leucovorin) 50mg/ Vial Cyclophosphamide Igm/ml Vial Inj. Inj. Tirofiban Hydrochloride MS 0.25mg / 50ml (USA/EEC/Japan or equivalent) Solution Inj Cefepime 500 mg Vial Inj Cefepime 1000 mg Vial Inj Cefepime 1000 mg Vial  | 34  | Inj.    | Folinic Acid (Leucovorin) 15mg/<br>Vial | 40 Nos                                |           |   |   |   |  |
| Inj. Cyclophosphamide Igm/ml Vial Inj. Inj. Tirofiban Hydrochloride MS 0.25mg / 50ml (USA/EEC/Japan or equivalent) Solution Inj Cefepime 500 mg Vial Inj Cefepime 1000 mg Vial Inj Cefepime 1000 mg Vial   | 35  | .inj    | Folinic Acid (Leucovorin) 50mg/         | 20 Nos                                |           |   |   |   |  |
| Inj. Inj. Tirofiban Hydrochloride MS 0.25mg / 50ml (USA/EEC/Japan or equivalent) Solution Inj Cefepime 500 mg Vial Inj Cefepime 1000 mg Vial Inj Cefepime 1000 mg Vial   | 3,5 | ļi      | Cyclophoenhamida [cm /m] Vial           | 400 Nies                              |           |   |   | ļ |  |
| Inj. Inj. Tirofiban Hydrochloride MS 0.25mg / 50ml (USA/EEC/Japan or equivalent) Solution Inj Cefepime 500 mg Vial Inj Cefepime 1000 mg Vial Inj Cefepime 1000 mg Vial   | 3   | .i.     | Cyclopitospitaniiluc igiii / IIII Y Iai | 400 1008                              | <br> <br> |   |   |   |  |
| 0.25mg / 50ml (USA/EEC/Japan or equivalent) Solution Inj Cefepime 500 mg Vial Inj Cefepime 1000 mg Vial Inj Ceftriazone I gm Vial  | 37  | Inj.    | Inj. Tirofiban Hydrochloride MS         | 300 Nos                               |           |   |   |   |  |
| or equivalent) Solution  Inj Cefepime 500 mg Vial  Inj Cefepime 1000 mg Vial  Inj Ceftriazone 1 gm Vial  |     |         | 0.25mg / 50ml (USA/EEC/Japan            |                                       |           |   |   |   |  |
| Inj Cefepime 500 mg Vial Inj Cefepime 1000 mg Vial Inj Ceftriazone 1 gm Vial   |     |         | or equivalent) Solution                 |                                       |           |   |   |   |  |
| Inj Ceftriazone 1 gm Vial  | 38  | Inj     | Cefepime 500 mg Vial                    | 1000 Nos                              |           | - |   |   |  |
| Inj Ceftriazone I gm Vial  | 39  | Inj     | Cefepime 1000 mg Vial                   | 1000 Nos                              |           |   |   |   |  |
|  | 40  | Inj     | Ceftriazone 1 gm Vial                   | 5000 Nos                              |           |   |   | ļ |  |

# Signature of Contractor / Supplier

Name of Firm with full Address

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SURGICAL SUNDRIES (DISPOSABLE ITEMS)

Ite | A/U | Name of Item | H

| _       | 2  | <b>A</b> C | Name of Item   |  |                   |              |                 |                |               |                |
|---------|--|------------|--|--|-------------------|--------------|-----------------|----------------|---------------|----------------|
| =       | #<br>E   |            |  | ment                                     | ivaine of Product | Manufacturer | Packing<br>Size | Trade<br>Price | Rate<br>/unit | Total<br>Value |
|         |  |            | Surgical Gloves (Sterile) (Assorted Sizes)   | 200000<br>Pairs                          |                   |              |                 | (T.P)          |               |                |
| 7       |  |            | Surgical Gloves (Sterile) Powder Free<br>(Assorted Sizes)  | 10000<br>Pairs                           |                   |              |                 |                |               |                |
| m       |  |            | Dual Protection, Double Gloves set<br>(Assorted sizes)   | 15000<br>Pairs                           |                   |              |                 |                |               |                |
| 4       |  |            | I.V Cannula with Heparin lock of same origin triple faceted needle tip with back cut bevel long indwelling period Size 14 & 16 G (F.E.P upgraded material)                 | 5000 Nos                                 |                   |              |                 |                |               |                |
| w       |  |            | I.V Cannula with Heparin lock of same origin triple faceted needle tip with back cut bevel long indwelling period Size 18, 20, 22 G (F.E.P upgraded material)              | 250000<br>Nos                            |                   |              |                 |                |               |                |
| 9       |  |            | I.V Cannula with Heparin lock of same origin triple faceted needle tip with back cut bevel long indwelling period Size 24 G (F.E.P upgraded material)                      | 50000<br>Nos                             |                   |              |                 |                |               |                |
| r ∞     |  |            | Butterfly Needles (Assorted Sizes) Disposable Syringe with Needle 1cc BD or Equivalent   | 50000<br>Nos<br>700000<br>Nos            |                   |              |                 |                |               |                |
| 9 10 11 | <del>                                     </del> |            | Disposable Syringe with Needle 2.5 cc / 3 cc BD or Equivalent Disposable Syringe with Needle 5 cc BD or Equivalent Disposable Syringe with Needle 10 cc / BD or Equivalent | 700000<br>No<br>1000000<br>Nos<br>600000 |                   |              |                 |                |               |                |
|         | -  |            |  | Nos                                      |                   |              |                 |                |               |                |

| 40000<br>Nos                                   | 200 Nos               | 200 Nos              | 100 Nos               | 500 Nos                         | 250<br>Dozene                  | 1000 Nos                                   | 1000 Nos   | 1000 Nos                    | 2000 Nos             | 500 Nos                     | 1000 Nos                            | 1000 Nos | 200 Nos | 200 Nos                 | 1001                           | 100 Nos              | 1000 Nos               | 620000 | Nos              | 200000 | Meters |                         | <u> </u>        | 00030   | Nos | 20 Packs              |
|--|-----------------------|----------------------|-----------------------|---------------------------------|--------------------------------|--|--|-----------------------------|----------------------|-----------------------------|-------------------------------------|----------|---------|-------------------------|--------------------------------|----------------------|------------------------|--------|------------------|--------|--------|-------------------------|-----------------|---------|-----|-----------------------|
| Paediatric I.V. Chamber 100ml BD or Equivalent | Radium Bulb 24 x 25 W | Radium Bulb 24 x 50W | Halogen Bulb 12x150 W | Mount Catheter (Assorted Sizes) | Silk Reel (#0,1,2/0,3/0 & 4/0) | Blood Transfusion Set. (JMS) or Equivalent | Disposable Needle 27 G x 1/2<br>BD or Equivalent | Foly's Catheter 3way (24FR) | Foly's Catheter 2way | Uretric Catheters (4Fr.5Fr) | Guide wires (0.032Inch & 0.035Inch) | (BN)     |         | Uretric Baloon Catheter | Double Limon Diplicit Onthotos | Straight 12 Fr 16 Cm | Disposable Yellow Tips | ┼─     | k or equivalent) |        |        | Texture 19-15 per inch, | 20 Meter Thaan. | Stonger |     | Ethilon 10% (12/Pack) |
| 12   | 13                    | 14                   | 15                    | 91                              | 17                             | 18   | 19   | 20                          | 21                   | 22                          | 23                                  | 24       | 25      | 26                      | 7.2                            | /7                   | 28                     | 29     |                  | 30     |        | _                       |                 | 31      |     | 32                    |

| _  |                                  |          |
|----|----------------------------------|----------|
| 33 | Luman Cathater All Size          | 100 Nos  |
| 34 | Bacty Guard Cathater All sizes   | 100 Nos  |
| 35 | Cotton Wool (Absorbent) 500 gm   | 2000 Nos |
| 36 | Cotton Bandages 15cm             | 1000     |
|    | (12/Pack)                        | Packs    |
| 37 | Cotton Bandages 10cm             | 1000     |
|    | (12/Pack)                        | Packs    |
| 38 | Cotton Bandages 5cm              | 1000     |
|    | (12/Pack)                        | Packs    |
| 39 | Blade Surgical All Size & Shapes | 50 Packs |
|    | (100/Pack)                       |          |
|    |                                  |          |

Signature of Contractor / Supplier

Name of Firm with full Address \_\_\_

E mail Address.

Fax

Office Telephone #.

OTHER DRUGS / MEDICINES

| <u>†</u> | A.II.               |  |              |                 |              |                 |                |               |       |
|----------|---------------------|--|--------------|-----------------|--------------|-----------------|----------------|---------------|-------|
| # =      |                     | Nomenciature/Generic   | Requirement  | Name of Product | Manufacturer | Packing<br>Size | Trade<br>Price | Rate<br>/unit | Total |
|          | Sol.                | Hard Surface Cleaner (5 Liters<br>Packing)                   | 300 Pack     |                 |              |                 | (T.P)          |               |       |
| 7        | T.                  | Benzion Co 450 ml / Bottle                                   | 2000 Bottle  |                 |              |                 |                |               |       |
| က        | Lotion              | Benzyl Benzoate 25% Lotion 60 ml Bottle                      | 15000 Bottle |                 |              |                 |                |               |       |
| 4        | Cream /<br>ointment | Neomycin, (0.5% 15gm/Tube)                                   | 500<br>Tubes |                 |              |                 |                |               |       |
| 4        | Cream /<br>ointment | Bacitracin 15gm Oint / 15gm<br>cream                         | 500<br>Tubes |                 |              |                 |                |               |       |
| w        | Liquid              | Diatrizoate Meglumine and Diatrizoate Sodium 100ml / Bottles | 300 Botts.   |                 |              |                 |                |               |       |
| 9        | Liq                 | Formaldehyde (Formalin)                                      | 500 Ltrs     |                 |              | -               |                |               |       |
| - 6      | Gel<br>Gel          | Xylocain Gell (2%, 5%, 10%)<br>(15gm / tubc)                 | 1000 Tubes   |                 |              |                 |                |               |       |
| × c      | Sol                 | Tin. Ioden 450 ml /Bottle                                    | 500 bottles  |                 |              |                 |                |               |       |
| , 0      | [S. [S.             | Sprit (Methydoed)  | 6000 Ltrs    |                 |              |                 |                |               |       |
| =        | Sol                 | Hydrogen Peroxide 450ml / Bottle                             | 2000 Ltr     |                 |              |                 |                |               |       |
|          |                     | Amor / 111000  | 1000 DOTTIES |                 |              |                 |                |               |       |

Signature of Contractor / Supplier

Name of Firm with full Address\_\_\_

E mail Address.

Office Telephone#.

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