**SINDH GOVERNMENT**

**SERVICES HOSPITAL**

**KARACHI, SINDH**

**Tender for Supply of Medical Equipment, Plant & Machinery**

**s.n.e (new) 2016-17**

**TENDER INQUIRY NO.\_\_\_\_**

**DUE ON 28.04.2017 11:00 AM**

**Single Stage - Two Envelope Bidding Procedure**

**IMPORTANT DATES**

|  |  |
| --- | --- |
| **Issuance of Tender Documents** | **From date of publication to**  **27-04-2017** |
| **Submission of Tender** | **28.04.2017 at 11:00 AM** |
| **Opening of Tender** | **28.04.2017 at 12:00 NOON** |

**Tender Notice**

1. Medical Superintendent Services Hospital & Civil Surgeon Karachi Sindh invites bids on DDP / C&F basis from Bidders registered with Income Tax & GST as per SPPRA Rules 2010 (Amended 2013 / 2014).

|  |  |
| --- | --- |
| Tender Enquiry No. |  |
| Name of Bid | Supply of Medical Equipment, Plant & Machinery. S.N.E (New 2016-17) |
| Bidding Procedure | Single Stage Two Envelope (Technical & Financial) |
| Bid Security | 2.5% of the total bid value |
| Bid Validity | 90 days |
| Tender Fee | Rs 2,000/- (non-refundable) |
| Issuance of Tender Documents | From date of publication to 27.04.2017 |
| Submission of Tender | 28.04.2017 at 11:00 AM |
| Opening of Tender | 28.04.2017 at 12:00 NOON |

1. Tender is open in the front of all original Manufacturers, within Pakistan & abroad or their Authorized representative / Distributors.
2. Complete set of tender documents containing Schedule of Requirements, Technical Specification with Term & Conditions can be purchased with a non-refundable fee in Rs 2,000/- from the admin office.
3. Tender documents can be downloaded from SPPRA website.
4. Bid shall include all government taxes/contribution etc. (if applicable)
5. Deduction in the bills will be done as per government rules.
6. Bid Security @ 2.5% of the total bid value of quoted items by the bidder in shape of pay order / demand draft / bank guarantee in favor of Medical Superintendant Services Hospital Karachi (original Pay order should be attached with financial Bid).
7. In case of discrepancies between the Tender Notice and the Tender Documents, the Tender Documents shall take precedence.
8. In case of announcement of public holiday or any un-favorable circumstance, the bids shall be submitted and opened as per given schedule on the next working day.
9. Queries can be addressed at the following numbers or in person during office hours.

Tel: 021-99215789

**Office of the Medical Superintendent**

**Services Hospital & Civil Surgeon**

**Karachi, Sindh**

**OFFICE OF THE MEDICAL SUPERINTENDENT**

**SERVICE HOSPITAL & CIVIL SURGEON, KARACHI**

**GOVERNMENT OF SINDH, KARACHI**

### TENDER NO. DUE ON: 28-04-2017

**INVITATION FOR BIDS**

1. Sealed bids are invited from eligible bidders for Supply of Plant & Machinery against SNE funds provided in the year 2016-2017.
2. Bidding will be conducted under **SPP Rule 2010 clause 46(2)** single stage two envelope bidding procedures of Sindh Public Procurement Rule 2010 (Amended 2013/14) specified in this document is open to all interested bidders.
3. Interested bidders may obtain further information from the office of Civil Surgeon, Sindh Government Services Hospital, M.A. Jinnah Road, 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 Office of Civil Surgeon, Sindh Government Services Hospital, M.A. Jinnah Road, Karachi, upon cash payment of nonrefundable fees of Rs. 2000/- (Two thousand only).
5. Bids must be delivered to the address below up to *11.00 a.m.* All bids must be accompanied by a bid security / earnest Money @ 2.5% of the Total bid cost in shape of pay order.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.*

***Address:***

**Services Hospital, Karachi.**

**M.A Jinnah Road, Opposite**

**Allah Wala Market, Karachi-Sindh**

**MEDICAL SUPERINTENDENT**

**SERVICES HOSPITAL & CIVIL SURGEON**

**KARACHI, SINDH**

**INSTRUCTIONS TO BIDDERS**

1. Bids shall remain valid for 90 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:
   1. Bid Form & Price Schedules duly completed by the Bidder.
   2. The Bidder shall furnish a bid security @ 2.5% of the quoted value in the form of a pay order/CDR.
   3. The original catalogue must accompany with offer and the equipment should comply/certified at CE/FDA approved.
   4. Sole Agent Certificate/distributorship letter from the Original manufacturer must be attested by concerned embassy of country of origin must be provided by the bidder. No sublet will be accepted.
   5. The service manual with circuit diagram will be provided (for equipment)
   6. The bidder must confirm free Installation / Demonstration at consignee’s end as specified, three years free Service from the date of installation, 05 years service contract and availability of spare parts.
   7. The supplier will be bound to supply the price list of spare parts and consumable at the time of tender i.e. for three years.
   8. The supplier will be bound to provide free service during warranty period and to supply spare parts accessories of the supplied equipment on demand.
   9. A certificate from the manufacturer that the offered machine / equipment being used in the country of origin.
   10. A detail data sheet having description of the essential technical and performance characteristics of the offered equipment.
   11. The original tender purchase receipt.
   12. Bidders shall purchase separate tender document and furnish purchase receipts for alternate offer, in case they want to submit alternate offer. Any item’s bid with alternate offers without separate purchase receipt (Original) is supposed to be rejected.
   13. The bidder shall furnish copy of valid Professional Tax (Excise & Taxation) Certificate/Income Tax Certificate/GST Registration Certificate.
   14. Tenderers shall submit guarantee letter that the supplied Machinery / Equipment is the original / meet required specification as well as advanced technology will be acceptable.
   15. Tenderers must enclosed list hospitals/Institutions where they have supplied the quoted equipment/items. Bidder must submit the proof for the availability of workshop & trained engineers and qualified persons for the machines at Sindh for after sale service.
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 vendor should furnished satisfactory performance certificate from one local custom where same model has been installed and has been working satisfactorily for last at least 1 year from date of commissioning, alongwith customers contact details.
7. 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.

In Technical Proposal the bidder must provide the original Data sheet and Technical brochure, Income Tax, Sales Tax, Sole Agency certificate and other documents; otherwise the bid will be ignored.

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.

1. Bidders shall quote rates on CIF and DDP which should be valid till June 30th, 2017.
2. In case of Purchase order issued on C.I.F basis, the suppliers / contractor will be entitled / eligible to claim payment of 80% of the purchase order amount upon submission of copy of L/c or shipping documents. Balance 20% amount can be claimed after delivery of goods at consignee site by submission of original delivery challan.
3. In case of Purchase order issued on DDP basis, the suppliers / contractor will be entitled / eligible to claim payment of 100% of the purchase order amount after delivery of equipment by submission of original delivery challan and inspection note.
4. All the (applicable) Government taxes (Income Tax / Stamp Duty) of the value of the contract amount will be deducted from the bills of the Contractors / Suppliers.
5. The purchaser will initially open only the envelopes marked “Technical Proposal” in the presence of Bidders or their representatives who chose to be present at the time of bid opening date, time and place specified in the tender documents. The Bidder or their representative who are present shall sign the attendance sheet. The envelope marked “Financial Proposal” shall be retained in the custody of purchaser without being opened till the completion of the Technical Evaluation.
6. Initially the bid evaluation will be performed after that Technical Specification will be evaluated by Technical Committee on the basis of the data sheet and the literature provided / submitted by the firm. Financial bids of technical qualified firms will be opened.
7. The equipment offered must be of latest version / generation and in case an old model is offered, it will not be considered, even though it is as per the tender specifications.

1. All pages of the bid, except for un- amended printed literature, shall be initialed by the person or persons signing the bid.
2. The bid shall contain no alterations, omissions, or additions, unless such corrections are initialed by the person or persons signing the bid.
3. Bids shall be submitted either by the manufacturer or its sole agent, if submitted by the manufacturer itself then bid of authorized sole agent will be rejected. No sublet will be allowed.
4. 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.
5. The Purchaser reserves the right to accept or reject any bid, and to annul the bidding process and reject all bids at any time prior to award of contract under the relevant provisions of SPP Rules 2010 (Amended 2013-14), without thereby incurring any liability to the affected Bidder or bidders or any obligation to inform the affected Bidder or bidders of the grounds for the Purchaser’s action.
6. The Purchasers reserves the rights to increase or decrease the quantity as per SPP Rule-2010 (Amended 2013-14).
7. 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 which shall be valid till warranty period and sign the contract agreement.
8. Bid validity can be extended as per SPP Rule 2010 (Amended 2013-14).
9. 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.
10. The warranty period will commence from the date of commissioning of the unit as per report of the end user/technical person.
11. The system will have the minimum uptime 95% in case of down time beyond this period the following penalty will be applied:
    * 1. 95% to 100% No penalty.
      2. 90% to 95% the warranty period will be extended by the number of days system in down.
      3. 85% to 90% warranty period will be extended 1.5 time the down time period.
      4. 80% to 85% warranty period will be extended two time for the down time period and supplier is supposed to give justification of delay.
      5. Uptime less than 80% hospital will complain to the Principal to take action against the supplier and warranty will be the three time for the down time period.
      6. However, PPM (Periodic Preventive Maintenance) will not consider in the down time and PPM of the system will be done as per manufacturer recommendation.
12. Manufacturers should provide on-site training pre-inspection of equipment before delivery.

General & Special Conditions of Contract

1. The Contract shall be governed by and interpreted in accordance with laws of the Islamic Republic of Pakistan.
2. Store is required immediately. The bidder may however give their short guaranteed delivery period by which the supply will be completed but not later than 45days from date of purchase order. No Extension will be granted / accorded for the supply.
3. The manufacturer should provide an undertaking that if his authorized contractor fails to carry out any assignment in total or in part, manufacturer will be responsible to carry out the same.
4. Except as otherwise specifically provided in the Contract, the Contractor shall bear and pay all taxes, duties, levies and charges assessed on the Contractor.
5. 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.
6. The Contract shall be executed in accordance with the Contract Documents and procedures.

1. The Purchaser or its representative shall inspect the Machinery / Equipment to confirm their conformity to the Contract specification. The inspection will be conducted at the premises of consignee after receipt of supply.
2. 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.
3. 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 and can take action under 35 of SPPRA.
4. 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.
5. If the Supplier fails to perform any other obligation(s) under the Contract.
6. If the supplier, in the judgment of the Purchaser has engaged in corrupt or fraudulent practices in competing for or in executing the Contract.
7. 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 outside in the same fiscal year.
8. 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 increase/ decrease the quantity of goods and services originally specified in the contract without any change in unit price or other terms and conditions of goods at any time during the contract period as per SPPRA Rule.
9. Service charges @ current prevailing charges of the value of the Contract will realized/charged by the A.G. Sindh, while making payment to the contractors for award of each contract.

**Criteria for evaluation of bids**

1 Earnest money submission.

2 Compliance of terms and conditions, required documents / information as described in the Instructions of bidders, General and special conditions of the bid document. Bidder must qualify the bid evaluation. Only qualified bid evaluation bidders will be evaluated technically.

3 Relevant Experience and past performance of manufacturer / sole distributor in terms of supply & after sale service.

4 After sale service facility with availability of work shop, Technical staff, Tools and spare parts.

5 Authority letter from manufacturer with validity period not less than two years.

6 Submission of original Catalogue with complete mailing address of the company, telephone / Fax Nos. and Web site for each quoted item.

7 Technical evaluations as per tender specification.

8 Operational cost (In case of equipment).

9 Delivery schedule.

10 Evaluation of quoted price.

**Note : All the participants are hereby requested to read the instruction, General, Special Condition and Evaluation Criteria of Bid carefully because no additional documents will be entertained and considered after opening of the bids. Bid evaluation and technical evaluation would be carried out only on the basis of documents provided in the bid.**

**Bidder Evaluation Criteria**

The following merit point system for weighing evaluation criteria will be applied for technical proposals.

|  |  |  |  |
| --- | --- | --- | --- |
| **S. No.** | **Parameter** | **Max Points** | **Points** |
|  | **Conformity to the Technical Specifications** | **20** |  |
|  | 1. Fully compliant with the required specifications | 20 |  |
|  | 1. Compliant with minor deviation ≤10% (subject to main function is not affected) | 15 |  |
|  | **Warranty** | **10** |  |
|  | 1. Warranty (period more than required) | 10 |  |
|  | 1. Warranty (period as required) | 5 |  |
|  | **Bidder’s Financial Status** | **30** |  |
|  | 1. Bank Certificate | 3 |  |
|  | 1. Financial Turnover: 25 million and above | 10 |  |
|  | 1. Below 25 (M) to 20 (M) | 8 |  |
|  | 1. Below 5 (M) | 5 |  |
|  | 1. Income Tax Return for annual business of ≥ 20 million rupees (last year) | 2 |  |
|  | 1. Audited Financial Statement (last year) | 2 |  |
|  | **Bidder’s After Sales Services in Sindh** | **6** |  |
|  | 1. Service Workshop | 3 |  |
|  | 1. Qualified & Trained Personnel (BE/BSc/DAE) with Bio-Data | 3 |  |
|  | **Original Equipment Manufacturer (OEM) or Brand Quoted** | **34** |  |
|  | 1. Manufacturer’s Website | 3 |  |
|  | 1. Brochure or Catalogue (original) | 3 |  |
|  | 1. CE | 3 |  |
|  | 1. FDA | 4 |  |
|  | 1. JIS | 2 |  |
|  | 1. References of OEM brand / model & Experience |  |  |
|  | * 1. Experienced at about 3 to 5 years | 5 |  |
|  | * 1. Experienced less then 3 or 2 years | 2 |  |
|  | * 1. Government / Semi-Government Teaching Hospital / Institute | 6 |  |
|  | * 1. Armed Forces / NGOs Hospital / Institute | 2 |  |
|  | * 1. Private Renowned Teaching Hospital / Institute | 2 |  |
|  | * 1. International Hospital / Institute | 2 |  |
| **TOTAL POINTS** | | **100** |  |

**Bidder’s Eligibility Criteria**

|  |  |  |  |
| --- | --- | --- | --- |
| **SR #** | **Certificates** | **YES** | **NO** |
|  | NTN & GST Certificate |  |  |
|  | Professional Tax Certificate |  |  |
|  | SECP Incorporation Certificate |  |  |
|  | ISO 9001 / ISO 13485 Certificate |  |  |
|  | Purchase Orders of last year worth ≥ 1 million rupees (2 point/each order copy) |  |  |
|  | Manufacturer’s Valid Authorization Certificate |  |  |

Note:

* If a bidder fails to (a) obtain minimum 15 Marks, against the criteria “Conformity to the Purchaser's Specifications”, and (b) have not fulfill of Bidders Eligibility Criteria, his offer will not be considered for further evaluation and rejected.
* Bidders achieving minimum 70 marks and fulfill the eligibility criteria will be considered only.

**Documents Checklist**

Please review the following list of all possible documents to be enclosed with the Technical Proposal.

|  |  |  |  |
| --- | --- | --- | --- |
| **S. No.** | **Document Description** | **Yes / No** | **Page No.** |
| **General Bid Documents:** | | | |
|  | Tender Purchase Receipt (Original) |  |  |
|  | Bid Security (Pay Order / Bank Draft) Photocopy |  |  |
|  | General & Special Conditions of Contract |  |  |
|  | Schedule of Requirements |  |  |
|  | Technical Specifications |  |  |
| **Bidder’s Documents:** | | | |
|  | Manufacturer’s Authorization (*as per sample form*) |  |  |
|  | Undertaking (*as per sample form*) |  |  |
|  | Certificate (*as per sample form*) |  |  |
|  | Income Tax & GST Registration Certificate |  |  |
|  | Professional Tax Certificate (Sindh) |  |  |
|  | SECP Incorporation Certificate (*if applicable*) |  |  |
|  | Company Profile |  |  |
|  | Bank Certificate shows financial capabilities |  |  |
|  | Income Tax Return (last year) |  |  |
| **Original Equipment Manufacturer (OEM) or Brand Quoted:** | | | |
|  | Catalogue / Brochures (original) |  |  |
|  | ISO 9001 / ISO 13485 |  |  |
|  | CE / FDA / JIS |  |  |
|  | References of the quoted brand & model (*local*) |  |  |
|  | References of the quoted brand & model (*international*) |  |  |
| **Additional Documents:** | | | |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Note:

* Mandatory documents are mentioned in ‘Instructions to Bidders’.
* All pages of the bid, except for un-amended printed literature, shall be initialed by the Bidder.

**Bidder's details for notice purposes:**

|  |  |
| --- | --- |
| Bidder Name: |  |
| Address: |  |
| Tel No |  |
| Fax No. |  |
| Contact Person: |  |
| Mobile No. |  |
| Email Address: |  |

**[SAMPLE FORM: A]**

**Manufacturer’s Authorization Form**

To:

**Office of the Medical Superintendent**

**Services Hospital & Civil Surgeon**

**Karachi, Sindh**

WHEREAS **[name of the Manufacturer]** who are established and reputable manufacturers of **[name and/or description of the goods]** having factories at **[address of factory]**

do hereby authorize **[name and address of Agent]** to submit a bid, and subsequently negotiate and sign the Contract with you against **Tender Enquiry No. [reference of the Tender Notice]** for the above goods manufactured by us.

We hereby extend our full guarantee and warranty as per Terms & Conditions of the tender document and General Conditions of Contract for the goods offered for supply by the above firm against this tender.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[*Signature for and on behalf of Manufacturer*] [*Date*]

***Note:*** *This letter of authority should be on the letterhead of the Manufacturer and should be signed by a person competent and having the power of attorney to bind the Manufacturer. It should be enclosed inside the Technical Proposal by the Bidder.*

**[SAMPLE FORM: B]**

**Undertaking**

WHEREAS [Bidder Name] hereby undertake against the Tender Enquiry No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to abide by the following clauses.

1. Whether our tender accepted for total, partial or enhanced quantity for all or any single item. I/We also agreed to supply and accept the said item(s) at the rates for the supply of contracted quantity within the stipulated period shown in the contract.
2. We understand and confirm the refund of cost difference if the same goods is/was supplied at lower rates to any other Govt./Semi Govt. institution in the province in the same fiscal year.
3. If any of the information submitted in accordance to this tender Enquiry found incorrect, our contract may be cancelled at any stage on our cost and risk.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[*Signature for and on behalf of Bidder*] [*Date*]

***Note:*** *This undertaking should be on a stamp paper of Rs. 100/- arranged by the Bidder. It should be enclosed inside the Technical Proposal by the Bidder.*

**[SAMPLE FORM: C]**

**Certificate**

To

**Office of the Medical Superintendent**

**Services Hospital & Civil Surgeon**

**Karachi, Sindh**

WHEREAS [Bidder Name] hereby certify against the Tender Enquiry No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to abide by the following clauses.

1. We guarantee to supply the stores exactly in accordance with the requirement specified in the tender documents.
2. We guarantee letter that the supplied Medical Equipment, Plant & Machinery is the original / brand new product.
3. Our firm is not black listed in any Government Department.

Authorized Sign & Stamp

[Bidder Name]

***Note:*** *This certificate should be on the letterhead of the Bidder and should be signed by a person competent and having the power of attorney to bind the Bidder. It should be enclosed inside the Technical Proposal by the Bidder.*

**[SAMPLE FORM: D]**

**Contract Agreement**

THIS AGREEMENT made the \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_ 20\_\_\_\_\_ between [name of Procuring Agency] of [country of Procuring agency] (hereinafter called “the Procuring agency”) of the one part and [name of Supplier] of [city and country of Supplier] (hereinafter called “the Supplier”) of the other part:

WHEREAS the Procuring agency invited bids for certain goods and ancillary services, viz., [brief description of goods and services] and has accepted a bid by the Supplier for the supply of those goods and services in the sum of [contract price in words and figures] (hereinafter called “the Contract Price”).

NOW THIS AGREEMENT WITNESSETH AS FOLLOWS:

1. In this Agreement words and expressions shall have the same meanings as are respectively assigned to them in the Conditions of Contract referred to.
2. The following documents shall be deemed to form and be read and construed as part of this Agreement, viz.:
   1. the Bid Form and the Price Schedule submitted by the Bidder;
   2. the Schedule of Requirements;
   3. the Technical Specifications;
   4. the General Conditions of Contract;
   5. the Special Conditions of Contract; and
   6. the Procuring agency’s Notification of Award.
3. In consideration of the payments to be made by the Procuring agency to the Supplier as hereinafter mentioned, the Supplier hereby covenants with the Procuring agency to provide the goods and services and to remedy defects therein in conformity in all respects with the provisions of the Contract
4. The Procuring agency hereby covenants to pay the Supplier in consideration of the provision of the goods and services and the remedying of defects therein, the Contract Price or such other sum as may become payable under the provisions of the contract at the times and in the manner prescribed by the contract.

IN WITNESS whereof the parties hereto have caused this Agreement to be executed in accordance with their respective laws the day and year first above written.

**Purchaser Supplier**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Signature & Official Stamp Authorized Signature & Official Stamp

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Procuring Agency Name Bidder Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact No. Contact No.

**[SAMPLE FORM: E]**

**Performance Guarantee/Security Form**

To:

**Office of the Medical Superintendent**

**Services Hospital & Civil Surgeon**

**Karachi, Sindh**

Whereas **[Name of Bidder]** (hereinafter called "the Bidder") has undertaken, in pursuance of Contract No. **[number]** dated **[date]** to supply **[description of goods]** (hereinafter called "the Contract").

And whereas it has been stipulated in the said Contract that the Bidder shall furnish to the Procuring Agency with a Bank Guarantee by a scheduled bank for the sum of 5% of the total Contract amount as Security for compliance with the Bidder's performance obligations in accordance with the Contract.

And whereas we have agreed to provide a Guarantee: for the said Bidder

Therefore, we hereby unconditionally and irrevocably guarantee, on behalf of the Bidder, up to a total of **[Amount of the Guarantee in Words and Figures]** and we undertake to pay you, upon your first written demand declaring the Bidder to be in default under the Contract and without requiring the Procuring Agency to initiate action against the Bidder and without cavil or argument any sum or sums within the limits of **[Amount of Guarantee]** as aforesaid. The amount stated in the demand made under this guarantee shall be conclusive proof of the amount payable by the Guarantor under this guarantee.

The obligations of the Guarantor under this guarantee shall be valid for four months after the completion of delivery of supplies by the Bidder to the Procuring Agency of the full quantity of the goods for which this Guarantee is being given, and until all and any obligations and sums due have been paid in full.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[*Signature and Seal of the Guarantors / Bank*]

Address

Date

# Schedule of Requirements

| **S. No.** | **Item Description** | **Qty** | **Model** | **Brand** | **Country of Origin** | **Delivery** |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Laparoscopic System** | 1 |  |  |  |  |
|  | **Weight Machine** | 1 |  |  |  |  |
|  | **O2 Cylinder480 cu ft** | 10 |  |  |  |  |
|  | **Drip Stand** | 10 |  |  |  |  |
|  | **Diathermy Machine** | 2 |  |  |  |  |
|  | **Multi-Parameter Monitor** | 3 |  |  |  |  |
|  | **Suction Machine** | 1 |  |  |  |  |
|  | **Autoclave Pulse Steam Double Door 350 to 400 Liter** | 1 |  |  |  |  |
|  | **Blood Warmer** | 1 |  |  |  |  |
|  | **Instrument Trolley (SS)** | 1 |  |  |  |  |
|  | **Mayo Stand Mobile** | 1 |  |  |  |  |
|  | **General Set** | 4 |  |  |  |  |
|  | **D&C Set** | 1 |  |  |  |  |
|  | **Surgical Drum** | 2 |  |  |  |  |
|  | **Larangoscope Set** | 1 |  |  |  |  |
|  | **Electric Operating Table** | 1 |  |  |  |  |
|  | **Patient Shifting Trolley** | 2 |  |  |  |  |
|  | **Nitrous Cylinder Bull Nose (Large)** | 5 |  |  |  |  |
|  | **Hot Air Autoclave** | 2 |  |  |  |  |
|  | **Rubber Band Ligator** | 2 |  |  |  |  |
|  | **Laparoscopic Instrument Set** | 1 |  |  |  |  |
|  | **Mobile OT Light with battery** | 2 |  |  |  |  |
|  | **Lithotomy Pole** | 1 |  |  |  |  |
|  | **Oxygen Cylinder Key** | 4 |  |  |  |  |
|  | **IV Stand** | 11 |  |  |  |  |
|  | **EPI Spot Light** | 1 |  |  |  |  |
|  | **Auto Processor** | 1 |  |  |  |  |
|  | **Ophthalmoscope & Retinoscope Set** | 1 |  |  |  |  |
|  | **ECG Machine 6 Channel** | 3 |  |  |  |  |
|  | **Desktop Computer** | 5 |  |  |  |  |
|  | **Split Air Conditioner (1.5 ton)** | 10 |  |  |  |  |
| **Total No. of Items Quoted:** | | | | | | |

Sign & Stamp \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bidder Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Schedule of Requirements / Technical Specification

PLANT & MACHINERY

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **S.#** | **Description of Item / Specification.** | **Qty** | **D.D.P Price** | | **CIF Price** | |
| **Unit Price** | **Total Price** | **Unit Price** | **Total Price** |
|  | **Laparoscope Diagnostic & Operative with all accessories and Tower Trolley**  laparoscopic with three chip camera system & instruments HD-Camera Unit With Objective  **Full-HD Endoscopy Camera 3CCD, HD, PAL,**  Specifications:  Resolution: 1920 x 1080 Pixel Full Hd  Aspect Ratio: 16:9  Light Sensitivity: minimum 3 lux  Digital Zoom  Freeze Function  Auto White Balance  Up to 3 User Profile In Memory  Electronic Shutter: 1/50 To 1/10,000 Sec  Noise Ratio: 54db  Definition: >1000 Lines  I. HD Camera (Generation, Enhanced / High  Definition, NTSC / Preferably Pal Camera  System).  2. Resolution 1920 X 1080 Pixels, Sensitivity  0.1lux  3. A Keyboard For Reporting / Teaching  Purpose.  4. Electronic Zooming With Programmable  Presets.  5. An Autoclave Able Camera Head, Fully  Compatible With HD Camera System.  6. Picture In Picture (Feature As Per Usage /  Requirement.  7. Camera Head With Multiple Remote  Buttons.  8. Protection Against Electric Shock.  **Tv-Adapter Vario-Zoom F 15 -35mm, C-Mount, Soak able**  **Xenon Light Source**  Cold Light Source Xenon 300, Intensity Control Automatic with BNC Video Cable.  Xenon High Density Fibre Optic Cable 3,5mm, 2300mm, Complete  Specifications  La pm 300 Watt Xenon  Color Temp 5600° K  Working Life 500 Hrs  Intensity Control: Electronically, mechanical  Diaphragm  Line Voltage: 100-240 VAC 50 – 60 Hz  Power: 400 W approx.  **Insufflator 30 Ltrs**  Flow 30 L/M  Pressure 1-30 mmHg ( max. 50 mmHg)  Line Voltage 100-240 VAC 50 – 60 Hz  Power: 25 – 40 W  Accessories  1 Sterile Filter  Spanner set for CO2 Bottle  1 Insufflation Tube 2.5 m  High Pressure Tube 1 m  **Suction Irrigation Unit**  Suction-Irrigation Unit Complete with all standard accessories  Specifications:  Suction Max 3.000 ml/min  Irrigation Max 3.000 ml/min  Line Voltage 100-240 VAC 50 – 60 Hz  Power: 60 W  Accessories  Bottle Holder To Take Glass Secretion Bottle 2 L.  Secretion Glass Bottle (2L), Complete.  Hydrophobic Sterile Filter With LL-Connectors at Both Ends (2 Pcs)  One Piece Puncture Tube  Set Of Silicone Tube  Connectors: (1 x 0.8 m LL-Female, 1 x 0.8mm LL-Male, 2 x 2.5m)  **Medical Grade Monitor 21" or more**  HD Flat screen Monitor Medical grade with Monitor Stand  Specifications  LCD Panel TFT Active Matrix  Visual Image 16’/48 cm  Pixel pitch in mm 0.294 x 0.294  Resolution 1280 x 1024 Lines (SXGA)  Aspect Ratio 5:4  Color 16.8 mill  Viewing Angle 178°  Brightness 450 cd/m²  Contrast Ratio 650:1 10 – 16 ms  Video Inputs HD-SDI, DVI-D, SDI, RGBS, Y/C VGA Composite  Video Inputs HD-SDI, SDI, RGBS, Y/C  Composite  Picture in Picture Multi Modality  Connectors Serial Remote  OSD Multi Modality  Nominal Voltage 24 VDC,DC power supply,  100-240 VAC, 50 – 60 Hz  Power: 65 W  Operating Temp. 0° C to + 40° C  **High frequency Electro-Surgical Unit (Diathermy), 400 Watt With Mono polar and Bipolar Cutting & Coagulation**  Specifications  Power Supply: 230/115 VAC ± 10%, 50/60 Hz  Power Cons.: Max. Power: 830VA / Switching  On: 860VA/Stand By: 110 VA  Protective Resistance Lower Then  Earth Resistance: 0,1Ω (in compliance with IEC 601-1  Cooling By convection  Outputs 2 x mono polar, 1 x bipolar  Memories 9 or more  Dimensions 400 x 400 x 180 mm  Hosing and Metal Case painted and  front panel: protected against the seeping  in of liquids, front panel with  Integrated Push Buttons.  **Standard Accessories for Diathermy Unit**  Footswitch Universal, Mono/Bipolar. Double Pedal.  Electrode Handle With Cable 3,5m Manual Control, 2,4mm Connection.  Electrode Handle With Cable 3,5m Length Without Manual Control, For Electrodes 2.4 mm  Knife Electrode 2,5x20mm; 2,4mm D. Shaft 130mm  Needle Electrode 0,8x20mm; Thick, 2,4mm Shaft 40mm  Needle Electrode 0,5x20mm; Thin, 2,4mm D Shaft 40mm  Ball Electrode 2mm D., Shaft 2,4mm 40mm  Ball Electrode 4mm D., Shaft 2,4mm 40mm  Loop Electrode 5mm, Shaft 2,4mm, 40mm  Disposable Neutral Electrode Incl. Cable 3m,For Adults/Children, Fixing Belt for Neutral Plates  **Country of origin: USA/Europe** | 1 |  |  |  |  |
|  | **Standing Weight Machine (Chest)**  **Imported** | 1 |  |  |  |  |
| 1. **D** | **O2 Cylinder 240 cft + 48 cft**  BOC tested  Country of origin EU only | 10 |  |  |  |  |
|  | **Drip Stands**  Local, export quality | 10 |  |  |  |  |
|  | **Diathermy Machine**  HF surgical unit for mono polar and bi polar cutting and coagulation for use in different surgeries.  Patient and operators safety indicator.  Different panels for mono polar and bipolar programs selection and display.  Output frequency: 350 KHz or more .  Electrical Output power: 400 W or more  Monopolar cutting: 320 W/200 Ω or more  Pulse: 40W/200 Ω  Blend: 250W/200 Ω  TUR (transurethral resection): 350 W/200 Ω  TUR-Pulse: 50 W/200 Ω  Monopolar coagulation  Soft: 100 W/200 Ω  Force (bi force): 120 W/200 Ω  Spray: 120 W/200 Ω  High Force: 120 W/200 Ω  Bipolar Cutting  Bipolar cutting (bipo pulse): 130 W/100 Ω  Pulse: 130 W/100 Ω  Bipolar Coagulation  Bipolar coagulation: 100 W/100 Ω  Monopolar and bipolar leads 2 each with bipolar forceps  Monopolar Hand piece .  Bipolar lead with forceps  Foot Switch.  Ground plate  Operation guide.  Power cord.  Or equivalent  Country of origin: USA/Europe | 2 |  |  |  |  |
|  | **Multiparameter Monitor**  Monitor to display ECG, Resp, NIBP, SpO2 & Temp as standard.  15˝ color TFT Touch Screen display resolution 1024 x 768  Waveforms display 8 or better  Trend recording: 1-72 hour or better  ECG : Input: 5 lead ECG cable as standard  Lead choice : I, II, III, aVF, AVL, V, Test  Gain choice : x0.5, x1, x2, x4  HR Display Range: 30-300bpm  NIBP : Method: automatic oscillating measurement  Pulse Rate Range: 30-250(bpm)  Adult / Pediatric Mode:  Sys 40-250 (mmHg) DIA: 15-200(mm Hg)  Neonatal Mode  Sys: 40-135 (mmHg) DIA:15-100(mmHg)  SP02 : Anti Motion Sp02  Sp02% Range : 0-100%  Pulse rate Range: 30-250bpm  Sp02 probe: red light LED wavelength 660nm 5nm  Temperature :  Range: 25- 50( ºC ). Display Resolution: 0.1 ºC  Channel : 2 channels  Respiration:  Method : RA-LL impedance  Range : 0-120rpm  Or equivalent  Country of origin: USA/UK/Europe | 3 |  |  |  |  |
|  | **Suction Machine**  Suction Machine with two polycarbonate collection Jars.  4 antistatic castors , 2 with brakes.  Suction control knob with 3 m cable  Pump flow: 40L/min or better.  4 liters jars with scale up to 3500ml and safety valve for overflow prevention.  Hydrophobic PTFE filter.  3 m PVC Suction tube.  Metallic handle,  Metallic curved and straight catheter .  Or equivalent  Country of origin: USA/UK/Europe | 1 |  |  |  |  |
|  | **Auto Clave Steam Sterilizer 350 – 400 liters**  **Country of Origin: U.K/U.S.A/EU**  Chamber Volume: 350 - 400 liters.  Weight: < = 1500 kg  Power Supply: < = 40 kW  System must be designed for sterilization of surgical instrument, textile, clothes, rubber items, metals, plastic & glass ware. System should be useful for hospitals, including CSSD, theaters, Kitchens, Laundries, as well as in laboratories. System must be automatic controlled, user friendly, cost efficiency and Eco-friendly.  **Features:**  Sterilizer must be double door  Hinged door with automatic locking device  Rectangular chamber, completely made of stainless steel **AISI 316L** and entirely covered with a full steam jacket  Double stage vacuum pump  5 integrated sterilization programs and wide range of customizable ones, allowing to select sterilization time and temperature, drying and cooling  2 test programs (Leak test and Bowie-Dick test for control of steam generation into porous materials)  A wide range of parameter adjustment is available for each program  7" color touch screen display indicating in real time  - Cycle phases and parameters, both in numerical and graphic forms  - Anomalies, alarms  - Main components maintenance status  Output of sterilization parameters on the built-in printer  Built-in steam generator  Chamber door cannot be opened when chamber is pressurized  Two chamber doors  A cycle cannot start if the door is open or not properly locked  Water Softener must be supplied  All installation, electrical & plumbing work will be done by vendor | 1 |  |  |  |  |
|  | **Blood Warmer**  Free setting of temperature from 37 °C to 41 °C in 0.5 °C increments.  Easy to read display.  Optimized warming circuit.  Simultaneous warming of multiple transfusions/infusions.  Splash proof (IPX4).  High- and low temperature alarm.  Permanent running self-tests.  Integrated handle.  Or equivalent  Country of origin: USA/UK/Europe | 1 |  |  |  |  |
|  | **Stainless Steel Trolley (Instrument Trolley)**  Local, (Export Quality)  Certification (ISO 9001)  CE or FDA approved | 1 |  |  |  |  |
|  | **MAYO trolley**  Local, (Export Quality)  Certification (ISO 9001)  CE or FDA approved | 1 |  |  |  |  |
|  | **General Set Surgery (complete)**  Local, (Export Quality)  Certification (ISO 9001)  CE or FDA approved | 4 |  |  |  |  |
|  | **D&C Set (complete)**  Local, (Export Quality)  Certification (ISO 9001)  CE or FDA approved | 1 |  |  |  |  |
|  | **Surgical Drum 18/12**  Local, (Export Quality)  Certification (ISO 9001)  CE or FDA approved | 2 |  |  |  |  |
|  | **Laryngoscope Set**  Local, (Export Quality)  Certification (ISO 9001)  CE or FDA approved | 1 |  |  |  |  |
|  | **Electro Hydraulic OT Table**  Multipurpose Electro Hydraulic Operation table with table top slid function.  Remote control switch for all electrical function  Foot pump for hydraulic function.  In case of complete failure of electrical power, table should work on manual hydraulic system.  Patient weight capacity up to 450kg or more  Built in x-ray cassettes channel.  Radio translucent table top.  Self diagnosis system with instant error code display.  Safety side rail and emergency stop button  Hand switch with a special function of patient positioning, up and down, left and right tilt, up and down back , sliding function etc  Essential function such as lock/unlock, level, flex/reflex incorporated.  Normal orientation slide to head end 50” or more  Normal orientation slide to leg end 15” or more  Reserve orientation slide to leg end 25”or more  Range of table movement  Head up : 90°  Head down : 90°  Back: : +80°/-50°  Leg up : 80°  Leg down : 105°  Trendelungburg : +/-30°  Lateral tilt : +/-20°  Longitudinal slide : 12” or more  Slide : 12” or more  Anesthesia Screen  Infusion Stand  Arm Rest, Pair  Leg holders  Body Restraint Strap  Or equivalent  Country of origin : USA/UK/Europe | 1 |  |  |  |  |
|  | **Patient Shifting Trolley**  Local, (Export Quality)  Certification (ISO 9001)  CE or FDA approved | 2 |  |  |  |  |
|  | **Nitrous cylinder bull nose (1620 cft) (5 no)**  1 Co2 & 1 O2 Cylinder 48 cft Pin Index small size  (02 no) BOC tested | 7 |  |  |  |  |
|  | **Hot Air Autoclave**  Fully automatic Micro-processor control system.  40 liter Chamber capacity  Auto lock pressure door with double lock .  With Auto dry, re dry and exhaust function.  Door close indicator. Low water indicator.  Chamber and tank water level indicator.  Unit should capable for automatic shutdown if over pressure.  Sterliztion temperature / pressure:121C(1.05KG/CM2/134C (2.07KG/CM2).  140 ° Design temperature. 3 KW Power consumption  Or equivalent  Country of origin: USA/UK/Europe | 2 |  |  |  |  |
|  | **Rubber band ligator**  Local, (Export Quality)  Certification (ISO 9001)  CE or FDA approved | 2 |  |  |  |  |
|  | **Instruments for Hysteroscopy and**  **Laparoscopic Surgery**   * Laparoscope 10mm D., 0°, 310mm HD * Laparoscope 10mm D., 30°, 310mm HD * Trocar Sheath 5,5 Mm W,Multifunctional Valve+Stopcock, W.Trocar Pyramidal (02) * Trocar Sheath 11,0 Mm W,Multifunctional Valve+Stopcock, W.Trocar Pyramidal (02) * Reduction Sleeve, 11mm To 5,5 Mm * Veress Insufflation Needle 2,0x150mm * Suction Tube Standard 5x330mm 4 Holes (2) * Suction/Irrigation Handle 5 Mm With Sliding Valve (2) * Spatula Electode, Unipolar 5 Mm D. 330mm * Hook Electrode 90°,Monopolar 5 Mm D.330m (2) * Metzenbaum Scissors Straight, Complete 5mm, 33 Cm W/O Ratchet (2) * Metzenbaum Scissors Curve, Complete 5mm, 33 Cm W/O Ratchet * Biopsy Forceps, complete 5mm, 33 Cm W/O Ratchet. * Claw grasping forceps, complete 5 mm, 33 Cm with Ratchet. * Dolphin-Nose Forceps, With Ratchet 5mm 33 Cm, Double Action * Maryland Grasping Fcps. Cvd,5mm,33cm, Coarse Ser.,Cmpl.W. Rat.,D. Act. (2) * Grasping Forceps Strong, Tooth, 5 Mm 33cm,Cmpl,Double Action, Ratchet * Grasping Forceps Kelly, Complete 5 Mm, 33cm,Double Action, Ratchet (2) * Clip Application Fcps.10mm, 360° Rotat. Detacha. Compl. F.Ethicon Clips Med/Large * Needle Holder Axial Handle 5mm 32cm Tc, Left Curved Ll-Connector * Needle Holder Axial Handle 5mm 32cm Tc, Right Curved, Ll-Connector * Monopolar Cable 5 M, Male 4mm / Female 4mm * **Hysteroscope** 4mm D., 30°, 302mm Hd * Outer Sheath For Continuous Flow, D.8mm With 1 Stopcock * Obturator Blunt For continuous flow sheath * Examination Sheath W.Instrument Channel F.Semi-Rigid Instr., 1 Stopcock, 7 Ch. * Grasping Forcecps, Serrated, Allig. Jaw 40cm, 7 Charr.,Semi-Rigid, Double Action * Biopsy forceps, oval, 40 cm, 5 charr, semi rigid, double action   Country of origin: USA/Europe | 1 |  |  |  |  |
|  | **Mobile OT Light with battery back up**  LED light. 60,000 LUX intensity  color rendering Ra > 95  4500K Color temperatures  No of LEDs: 8 nos or more.  Mobile stand with flexible arm and four castors with from same Manufacturer.  FDA approved  Korea/Taiwan/Malaysia/ Japan or equivalent | 2 |  |  |  |  |
|  | **Lithotomy pole**  Local, (Export Quality)  Certification (ISO 9001)  CE or FDA approved | 1 |  |  |  |  |
|  | **Oxygen Cylinder key**  BOC tested | 4 |  |  |  |  |
|  | **I/V Stands**  Local, (Export Quality)  Certification (ISO 9001)  CE or FDA approved | 11 |  |  |  |  |
|  | **EPI Spot Light**  Imported (Export Quality)  Certification (ISO 9001)  CE or FDA approved | 1 |  |  |  |  |
|  | **Auto processor Branded**  Tabletop film processor which can process all common film-types and formats used in conventional standard radiography, X-Ray Film Processor with Continuous roller transport system. 3 selectable processing speed of 90 sec/120sec/180 sec. Can have a speed to process minimum 100 Sheets per hour at 90sec speed, 10 x 12” film or better for the maximum size film. Can process 8” X 10” to 14” x 17” size films. Should have tank capacity of 3.5L or more for developer, 2L or more for fixer and 2L or more for washer with an additional replenishment tank for developer and fixer. Thermistor controlled for developer and dryer . Over heat prevention system, circuit breaker.  Or equivalent  Country of origin: USA/UK/Europe | 1 |  |  |  |  |
|  | **Ophthalmoscope + Retinoscope set**  Ophthalmoscope and Retinoscope complete set with 02 separate reachable handles with Battery and Charger and 03 extra bulbs.    Country of origin: USA/UK/Europe | 1 |  |  |  |  |
|  | **ECG Machine 6 Ch**  LCD display. 58 mm printouts. Battery & mains powered. Auto-adaptive filters  for outstanding signal quality. Loose leads indicator. Auto, manual and user-defined  profiles. Alpha-numeric keyboard. Pacemaker detection. Connection to PC software  Connection to vacuum electrode system. Diagnostics upgrade . Graphic display  Alphanumeric and functional key board. Indication of connect of each electrode  Printer: Paper width (mm) : 58. Paper type: roll. Paper speed (mm/s): 5, 10, 25, 50  Signal Processing Number of channels : 3. Number of leads : 12. Sensitivity (mm/mV):  2.5, 5, 10, 20. Stored records (10-sec long strips): 6. Long ECG recording 1 lead /  2 leads (min) : 9/no.  Or equivalent  Country of origin: USA/UK/Japan/Europe | 3 |  |  |  |  |
|  | **Computer System (Complete)**  Core i7 high quality, 4.5Ghz optical drive super combo, 500 GB HDD 4 GB DDR 3 RAM, with Graphic Card and H.P Laser Printer + Scanner & Photocopier)  17” LCD Monitor  Key Board & Mouse | 5 |  |  |  |  |
|  | **Split Air conditioner (1.5) ton**  Complete with DC inverter, cabling and installation  Dawlance/LG/Haier/Kenwood/Gree/Orient | 10 |  |  |  |  |

Sign & Stamp: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bidder Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Supplier Questionnaire**

***Note:*** *This document should be filled by the Bidder for each item (separately) offered in the Bid and should be signed by a person competent and having the power of attorney to bind the Bidder. It should be enclosed inside the Technical Proposal by the Bidder.*

|  |  |  |  |
| --- | --- | --- | --- |
| ­­­­­­­­­Equipment: |  | Manufacturer: |  |
| Model: |  | Supplier: |  |

Are you Authorized Representative of Manufacturer: 🞎 Yes 🞎 No

Year of Introduction of the offered model: \_\_\_\_\_\_\_\_ Version: \_\_\_\_\_\_\_\_\_\_\_\_

Equipment life period (No. of Years) \_\_\_\_\_\_\_\_

Number of Equipment Installed:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| International |  | Pakistan |  | Sindh |  |

(Note: Please provide names of institution for Pakistan/ Karachi)

Equipment documents to be provided: 🞎 User Manual 🞎 Parts List

🞎 Service Manual 🞎 Electrical Drawing/Schematics

Spare Parts Availability

|  |  |  |
| --- | --- | --- |
| Guarantee  (No. of years) | Local Source Lead Time  (No. of days) | Overseas Source Lead Time  (No. of days) |
|  |  |  |

Do you hold specialized tools/test equipment required for: 🞎 Maintenance 🞎 Calibration

Annual Maintenance Contract Price: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parts and Labour: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Labour without parts: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On call service charges; Minimum: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Per day: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For in-house maintenance by LUH engineers are you willing to provide following during post warranty period.

Back up engineer support whenever requested: 🞎 Yes 🞎 No

Prompt supply of spares/ consumables: 🞎 Yes 🞎 No

Number of factory trained engineer available locally on offered equipment: \_\_\_\_\_\_\_\_

Warranty period: \_\_\_\_\_\_\_\_ Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Uptime Guarantee: \_\_\_\_\_\_\_\_ %

Response Time to Service Call: \_\_\_\_\_\_\_\_ Hours

No. of PPM/Year: \_\_\_\_\_\_\_\_ Times/Year

Do you have any objection/ concerns to use similar specification spares of alternate/ other manufacturer during warranty of maintenance contract (if available) 🞎 Yes 🞎 No

Comprehensive LUH engineer training: 🞎 Yes 🞎 No

If yes state what included: 🞎 Training Fees 🞎 Free of Charge

🞎 Airfare 🞎 None

🞎 Boarding/Lodging

Up-gradation possibility: 🞎 Hardware 🞎 Software

If above has any cost please provide the details of up-gradation with estimated price:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please state safety standard conformance (e.g. IEC 601,FDA, AAMI etc):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pre-Installation services requirements:

|  |  |  |  |
| --- | --- | --- | --- |
| Power (kW) |  | Voltage (V/Hz) |  |
| Gas (Cu. ft/ Hr) |  | Water (L/Hr) |  |
| Air (psi) |  | Water (pis) |  |
| Vacuum (mmHg) |  | pre-treated |  |
| Other: Drain, Exhaust, Physical facility change etc | | | |

Environmental Parameters Limits:

Temperature\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_ C/ F Humidity \_\_\_\_\_\_\_\_\_to \_\_\_\_\_\_\_\_ % RH

Any other specific requirement (e.g. UPS, Voltage Stabilizer, etc. provide details):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Briefly state facilities and benefits provided during warranty period:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please give the rates of accessories, consumable, disposable items and parts required for proper functioning of equipment life period of each item (in days/months).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sign & Stamp \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bidder Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**[SAMPLE FORM]**

**Bid**

Tender Enquiry No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

To

**Office of the Medical Superintendent**

**Services Hospital & Civil Surgeon**

**Karachi, Sindh**

Having examined the bidding documents, the receipt of which is hereby duly acknowledged, we, the undersigned, offer to supply and deliver the goods specified in the said bidding documents for the sum of **[total bid amount in words and figures]** or such other sums as may be ascertained in accordance with the Schedule of Prices attached herewith and made part of this Bid.

We undertake, if our Bid is accepted, to deliver the goods in accordance with the delivery schedule specified in the Schedule of Requirements.

If our Bid is accepted, we will obtain the guarantee of a bank in a sum equivalent to 5% of the Contract Price for the due performance of the Contract, in the form prescribed by the Procuring agency.

We agree to abide by this Bid for a period of 90 days from the date fixed for Bid opening as Tender Notice, and it shall remain binding upon us and may be accepted at any time before the expiration of that period.

Until a formal Contract is prepared and executed, this Bid, together with your written acceptance thereof and your notification of award, shall constitute a binding Contract between us.

We understand that you are not bound to accept the lowest or any bid you may receive.

Dated this \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[*signature*] [*in the capacity of*]

Duly authorized to sign Bid for and on behalf of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Note:*** *This document should be on the letterhead of the Bidder and should be signed by a person competent and having the power of attorney to bind the Bidder. It should be enclosed inside the Financial Proposal by the Bidder.*

# Price Schedule

**Pak Rupee on DDP basis**

| **S. No.** | **Item Description** | **Model** | **Brand** | **Qty** | **Unit Price**  **DDP** | **Total Price**  **DDP** |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Laparoscopic System** |  |  |  |  |  |
|  | **Weight Machine** |  |  |  |  |  |
|  | **O2 Cylinder480 cu ft** |  |  |  |  |  |
|  | **Drip Stand** |  |  |  |  |  |
|  | **Diathermy Machine** |  |  |  |  |  |
|  | **Multi-Parameter Monitor** |  |  |  |  |  |
|  | **Suction Machine** |  |  |  |  |  |
|  | **Autoclave Pulse Steam Double Door 360L** |  |  |  |  |  |
|  | **Blood Warmer** |  |  |  |  |  |
|  | **Instrument Trolley (SS)** |  |  |  |  |  |
|  | **Mayo Stand Mobile** |  |  |  |  |  |
|  | **General Set** |  |  |  |  |  |
|  | **D&C Set** |  |  |  |  |  |
|  | **Surgical Drum** |  |  |  |  |  |
|  | **Paragoscope Set** |  |  |  |  |  |
|  | **Electric Operating Table** |  |  |  |  |  |
|  | **Patient Shifting Trolley** |  |  |  |  |  |
|  | **Nitrous Cylinder Bull Nose (Large)** |  |  |  |  |  |
|  | **Hot Air Autoclave** |  |  |  |  |  |
|  | **Rubber Band Ligator** |  |  |  |  |  |
|  | **Laparoscopic Instrument Set** |  |  |  |  |  |
|  | **Mobile OT Light with battery** |  |  |  |  |  |
|  | **Lithotomy Pole** |  |  |  |  |  |
|  | **Oxygen Cylinder Key** |  |  |  |  |  |
|  | **IV Stand** |  |  |  |  |  |
|  | **EPI Spot Light** |  |  |  |  |  |
|  | **Auto Processor** |  |  |  |  |  |
|  | **Ophthalmoscope & Retinoscope Set** |  |  |  |  |  |
|  | **ECG Machine 6 Channel** |  |  |  |  |  |
|  | **Desktop Computer** |  |  |  |  |  |
|  | **Split Air Conditioner (1.5 ton)** |  |  |  |  |  |

Note:

Unit price to be mentioned in both figures and words.

In case of discrepancy between unit price and total, the unit price shall prevail.

Sign & Stamp \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bidder Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Price Schedule

**Foreign Currency on C&F basis**

| **S. No.** | **Item Description** | **Model** | **Brand** | **Qty** | **Unit Price**  **C&F** | **Total Price**  **C&F** |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Laparoscopic System** |  |  |  |  |  |
|  | **Weight Machine** |  |  |  |  |  |
|  | **O2 Cylinder480 cu ft** |  |  |  |  |  |
|  | **Drip Stand** |  |  |  |  |  |
|  | **Diathermy Machine** |  |  |  |  |  |
|  | **Multi-Parameter Monitor** |  |  |  |  |  |
|  | **Suction Machine** |  |  |  |  |  |
|  | **Autoclave Pulse Steam Double Door 360L** |  |  |  |  |  |
|  | **Blood Warmer** |  |  |  |  |  |
|  | **Instrument Trolley (SS)** |  |  |  |  |  |
|  | **Mayo Stand Mobile** |  |  |  |  |  |
|  | **General Set** |  |  |  |  |  |
|  | **D&C Set** |  |  |  |  |  |
|  | **Surgical Drum** |  |  |  |  |  |
|  | **Paragoscope Set** |  |  |  |  |  |
|  | **Electric Operating Table** |  |  |  |  |  |
|  | **Patient Shifting Trolley** |  |  |  |  |  |
|  | **Nitrous Cylinder Bull Nose (Large)** |  |  |  |  |  |
|  | **Hot Air Autoclave** |  |  |  |  |  |
|  | **Rubber Band Ligator** |  |  |  |  |  |
|  | **Laparoscopic Instrument Set** |  |  |  |  |  |
|  | **Mobile OT Light with battery** |  |  |  |  |  |
|  | **Lithotomy Pole** |  |  |  |  |  |
|  | **Oxygen Cylinder Key** |  |  |  |  |  |
|  | **IV Stand** |  |  |  |  |  |
|  | **EPI Spot Light** |  |  |  |  |  |
|  | **Auto Processor** |  |  |  |  |  |
|  | **Ophthalmoscope & Retinoscope Set** |  |  |  |  |  |
|  | **ECG Machine 6 Channel** |  |  |  |  |  |
|  | **Desktop Computer** |  |  |  |  |  |
|  | **Split Air Conditioner (1.5 ton)** |  |  |  |  |  |

Note:

Unit price to be mentioned in both figures and words.

In case of discrepancy between unit price and total, the unit price shall prevail.

Sign & Stamp \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bidder Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_