Memo No- 2765 /PRL/DMGMCH / Estb/2022

Date : 29/12/ 2022

<u>SUB: e- Tender for Supply of Cooked Diet for Indoor Patients at both the</u> <u>campuses (of Deben Mahata Government Medical College andHospital</u>

REF. NO: File No. HFW-40040/5/2020-HA/191(4) dated 22.12.2022 of the Director of Medical Education&Director of Health Services & No. 213(2)-HS(MS)/HFW-40040/5/2020 dated 21.12.2022 of the Additional Secretary, H.S.(M.S.) Branch, Swasthya Bhawan, Kolkata-91

SECTION I:

NOTICE INVITING e-TENDER (NIT) – NIT/DMGMCH/2765 2022-23 dated 29-12-2022

TheMedicalSuperintendentcumVicePrincipal(MSVP) of Deben Mahata Government Medical College andHospital (DMGMC&H),Main Road, P.O.& P.S.-: Purulia , PIN: 723 101and Hatuara SSH, Vill- Hatuara, P.O- Vivekanada Nagar, P.S- Purulia Muffasil, PIN- 723147 invites bids from competent and experienced contractors for providing supply of cooked diet for indoor patients admitted to the abovementioned health facilities for period of 3(three) years, renewable at end of each completed year of satisfactory service. The 3 (three) year contract period shall commence from the date of notification of award of contract to the selected bidder in this e-tender and will be valid until further order.

1. EMD for e-Tender:

EMD amount- 23600 (Twenty Three Thousand Six Hundred Only)(The amount of EMD shall be approximately equal to 2% (two percent) of the estimated bill value or paid bill value (for meals plus emoluments of contractor's staff) by the health facility in the current month or the previous month, rounded off to the nearest multiple of Rs.100/-.)

GOVERNMENT OF WEST BENGAL OFFICE OF THE MEDICAL SUPERINTENDENT CUM VICE PRINCIPAL DEBEN MAHATA GOVERNMENT MEDICAL COLLEGE & HOSPITAL Main Road, P.O & P.S.-: Purulia , PIN: 723 101

Phone: 7407676839,9382498061 Email: pgmchmsvp@gmail.com

2. DateandTimeScheduleof e-Tender:

Sl no	Particulars	Date&Time
1	Date of publishing N.I.T.& other Documents online	30/12/2022, 9 am
2	Online documents download start date	30/12/2022, 11am
3	Online documents download end date	20/01/2023,5 pm
4	Online Bid submission start date	30/12/2022,11am
5	Pre-bid meeting to be held at Office of Tender Inviting	06/01/2023, 12noon
	Authority	
6	Dates for submission of Earnest Money Deposit	30/12/2022to
		20/01/2023,
7	Online Bid Submission closing date and time	20/01/2023,5pm
8	Online Bid opening date for Technical Proposals	23/01/2023,12noon
9	Date of online uploading list for Technically Qualified	27/01/2023
	Bidders	
10	Date of online opening of Financial Proposal	28/01/2023

3. Intheeventofanyof theabove-mentioneddatesbeingdeclaredasaholidayforthe e-tender inviting authority, the bids shallbeopenedonthenextworkingdayatthe scheduled time.

4. The bid submittedshouldbeaddressedtothe tender inviting authority, i.e. to the MSVPof Deben Mahata Government Medical College and Hospital, Purulia.

5. Biddersmaydownload the e-tenderenquiry document from the websites <u>https://wbtenders.gov.in</u> and www.wbhealth.gov.in. Anysubsequentnoticeregardingthise-tendershallbeuploadedonthese twowebsitesonly. Bidders are requested to check these two websites regularly for this purpose.

6. This e-tender document comprises the following sections:

Section I: NoticeinvitingTender (NIT), i.e. this document

Section II: Preamble

SectionIII: Requirements

Section IV: Specifications of Diet

GOVERNMENT OF WEST BENGAL OFFICE OF THE MEDICAL SUPERINTENDENT CUM VICE PRINCIPAL **DEBEN MAHATA GOVERNMENT MEDICAL COLLEGE & HOSPITAL** Main Road, P.O & P.S.-: Purulia , PIN: 723 101 Phone: 7407676839,9382498061 Email: pgmchmsvp@gmail.com

Section V: Consignee List

Section VI: General Conditions of Contract (GCC)

Section VII: General Instructions to Bidders (GIB)

Section VIII: Tender Application Form

Section IX: Price Schedule/ Bill of Quantity

Section X: Contract Form

Section XI: Proforma for Contractor's Monthly Bill

Section XII: Checklist for Bidders

7. The e-tender shall be evaluated under the two-bid system, i.e. through evaluation of technical and

financial bids uploaded by the bidder online on the e-tender website of https://wbtenders.gov.in.

Self-Medical Superintendent Cum Vice Principal Deben Mahata Government Medical Collegeand Hospital

Purulia Date: 29 / 12 / , 2022

Memo No- 2765/ (PRL/DMGMCH / Estb/2022

Copy forwarded for information & necessary action to -

1. Sri Shantiram Mahato, Honorable Eminent Person cum Chairperson, R.K.S., DMGMC&H,

Purulia.

- 2. The Sabhadhipati, Purulia Zilla Parishad, Purulia.
- 3. The Director of Medical Education & ex-officio Secretary, Department of H & FW. Swasthya, Salt Lake City,Kol-91
- 4. Director of Health Service & ex-officio Secretary, Department of H & FW.Swasthya,,Salt Lake City,Kol-91
- 5. The Principal, DMGMC&H, Purulia.
- 6. The District Magistrate, Purulia.
- 7. The CMOH, Purulia
- The District Information & Cultural Officer, Purulia with request for publishing in one each (two languages) daily news papers.
- 9. Officer in charge NIC , Purulia with request to upload in NIC web portal.
- 10. The Additional Medical Superintendent, DMGMC&H, Purulia.
- 11. The Accounts Officer, DMGMC&H, Purulia.
- 12. The all concerned members of the Purchase & Tender Committee, DMGMC&H, Purulia.
- 13. IT Cell ,Dept .of Health & Family Welfare,Swasthya Bhaban,Kol- 91 with request to upload in
- the official website of the department (www.wbhealth.gov.in)
- 14. The DSM & IT Manager, Purulia District for uploading in district health website. 15. DMGMC&H, Website.
- 16. Notice Board of this hospital / Guard File.

(3229/12/22

Medical Superintendent Cum Vice Principal Deben Mahata Government Medical Collegeand Hospital

> M.S.V.P. Deben Mahata Government Medical College & Hospital PURULIA

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SECTION II: PREAMBLE

1.1. The following definitions and abbreviations, which have been used in this document shall have the meanings as indicated below:

1.2. Definitions:

 "Purchaser" means the e-tender inviting authority, purchasing goods and/ or services as incorporated in this e-tender enquiry document, either directly or on behalf of consignees.
 For this e-tender the purchaser is :

The MSVP of Deben Mahata Government Medical College and Hospital, Purulia.

i) "Bid" means Proposal/ Quotation received from a Firm / Bidder against the e-tender.

ii) "Bidder" means the Individual or Firm submitting Bids/ Quotations.

iii) "Contractor" means the individual or the firm supplying the goods and/ or services as incorporated in the contract.

iv) "Diet" means edible food articles, whether raw or cooked, to be supplied by contractor to indoor patients admitted to health facility as per specifications, terms and conditions stipulated under the contract.

v) "Goods" means the articles, material, commodities, consumables; raw materials and cooked dietary food items, utensils, kitchen appliances and equipment, cooking fuel, stationeries, printing, items of clothing, spares, machinery, computer, electronics items etc. which the Contractor is required to supply to the purchaser under the contract.

vi) "Services" means the scope of work, together with services allied and incidental to the supply of goods, such as their transportation, packing, installation, commissioning; also, cooking, serving and distributing food, cleaning, sweeping, washing, wastes disposal, assisting indoor patients, monitoring and supervision, managerial and administrative services, provision of technical assistance, training, maintenance service, insurance and other such obligations of the Contractor covered under the contract.

vii) "Earnest Money Deposit" (EMD) means Bid Security/ monetary amount or financial guarantee to be furnished by a bidder along with its bid.

viii) "Contract" means the written agreement entered into between the purchaser/ consignee and the contractor, together with all the documents mentioned therein and including all attachments, annexure etc. therein. ix) "Performance Security" means monetary amount or financial guarantee to be furnished by the successful bidder for due performance of the contract placed on it. Performance Security is also known as Security Deposit.

x) "Specification" means the document/ standard that prescribes the requirement with which goods and/ or service has to conform.

xi) "Inspection" means activities such as measuring, examining, testing, gauging one or more characteristics of the goods and / or service and comparing the same with the specified requirement to determine conformity.

xii) "Day" means calendar day.

xiii) "Bill of Quantity" is the name for price schedule in e-tender software.

xiv) "Health Facility" means the medical college and hospital or the teaching hospital or the district/ sub-division etc. hospital to which the goods and/ or services under the contract shall be supplied.

1.3 Abbreviations:

- i. "TE Document" means e-Tender Enquiry Document
- ii. "NIT" means Notice Inviting e-Tender
- iii. "GIB" means General Instructions to Bidders
- iv. "GCC" means General Conditions of Contract
- v. "ESIC" means Employees' State Insurance Corporation
- vi. "EPFO" means Employees' Provident Fund Organization
- vii. "GST" means Goods and Service Tax.
- viii. "CST" means Central Sales Tax
- ix. "BMW" means Bio-Medical Waste
- x. "DSC" means Digital Signature Certificate
- xi. "BOQ" means Bill of Quantity or the Price Schedule in which rates for the e-tender should be quoted and uploaded online on the e-tender website.
- xii. "CMOH" means the Chief Medical Officer of Health of the Department of Health and Family Welfare, Government of West Bengal
- xiii. DMGMC&H means Deben Mahata Government Medical College & Hospital.

SECTION III: REQUIREMENTS(Separate Kitchen at both campus)

1. Scope of Work: The service shall be meant for supply and serving of cooked diet for indoor patients admitted in both the campus of DMGMC&H, Purulia. Meals shall be served as per menu chart and written instructions/ requisition slips issued by the Dietician/ Sister-in-Charge of Ward/ appropriate authority of health facility at **approved time schedules x 7 day basis**. The service includes providing all raw materials like grocery, spices, cereals, pulses, fresh vegetables, fruits, egg, milk, Curd/ Lassi in pouches, utensils, cooking burners range, LPG cooking fuel, microwave oven etc. kitchen appliances and equipment, working tables, fixtures and fittings, trolleys, garbage/kitchen waste disposal bags and bins etc. required for preparation and distribution of the food items to indoor patients admitted in beds in each ward of both the campus of DMGMC&H, Purulia. Efficient manpower and supervisory management staff for the smooth running of the service too, shall be provided by the contractor.

2. Bidder should visit the site before quoting rates in e-tender: Intending bidder should visit both the campus of DMGMC&H, Puruliaand make himself thoroughly acquainted with the site condition, nature and requirements of the work, the kitchen-site, facilities for transportation, labour supply, storage of materials and removal of rubbish/kitchen waste. The rate quoted by the contractor shall take care of all contingencies required for operating efficient indoor patient diet supply at the health facility. The successful bidder shall not be entitled to any claim of compensation for difficulties faced or losses incurred on account of any site condition which existed before the commencement of the work or which, in the opinion of the health facility might be deemed to have reasonably been inferred to be so existing before commencement of the indoor patient diet supply services contract.

3. Assistance to Contractor: The contractor shall only be provided with atwo separatesuitablekitchen space for operating the indoor patient diet kitchen within both the premises of DMGMC&H, Purulia. It shall not be entitled to any other assistance from the health facility, either in the procurement of raw materials or in the securing of labour and transportation facilities etc.

4. **Specification of Materials:** The contractor shall ensure and confirm that only new, original and genuine kitchen utensils/ appliances/ equipment shall be used by him for providing this service.

i) All equipment should be fabricated out of first quality food-grade non-magnetic stainless steel material. All the joinery should be done by argon arc welding, duly ground and polished.
ii) The contractor shall provide all utensils for cooking, serving, carrying, storage and distribution of the cooked food as per quality approved by competent authority of health facility. He shall provide patients with good quality utensils for taking the meals. He shall promptly replace utensils damaged/ defaced due to wear and tear, to the satisfaction of the competent authority of health facility.

If the contractor avails of any utensils, cooking appliances, food trolley or other equipment from the health facility, he shall submit a list indicating the current usable condition of such items to the in-charge of health facility at the time of taking possession. On termination of his contract he shall return these items, duly matched with the said list to the health facility. He shall use these items with due care. He shall replace any of these items damaged due to mishandling on his part, to the satisfaction of the competent authority of the health facility.

iii) All burners of cooking ranges shall be Indian Oil Corporation's approved burners. All other L.P. Gas parts shall be of branded company with ISI marks.

iv) All compressors for refrigerators (CFC Free) and water-coolers etc. shall be hermetically sealed compressors of branded company.

v) All legs of working tables, storage racks, cross bracings etc., shall be made of firm stainless steel pipes.

vi) All working tops shall be sound dampened by suitable method.

vii) All equipment shall be complete in all respects and ready to use to the entire satisfaction of the in-charge of health facility, including all accessories, fittings etc.

viii) All electrical equipment and electrical part(s) of the equipment should be of reputed brands with ISI mark.

ix) All equipment shall be pre-plumbing tested for electrical insulation and earthing.

5. LPG: The contractor shall only use commercial LPG as cooking fuel. Use of electricity as fuel or polluting fuels like wood, other fossil fuels etc. shall be deemed to be a lapse in the

services being provided by the contractor and shall be liable for deduction of liquidated damages and other remedies available to the health facility under the contract. Theovensandcylindershavetobeprocured by the successful bidder

attheirowncost. However, at the end of the contract period, the

contractorwillbeatlibertytotakepossessionoftheovens,cylindersandothermaterialsprocured byhimathisowncost.

6. The contractor shall provide the indoor patient diet supply service absolutely and exclusively to the indoor patients admitted to the health facility, as per instructions issued by the competent authority. He shall not use the site/ premises, utilities, utensils, equipment etc. allotted to him by the health facility for performance of this contract for any other purpose like storage of materials for other contracts, sub-leasing of his allotted premises, allowing housing for staff/non staff etc.

7. Cleanliness and Fire Safety

i) The contractor shall ensure that the indoor patient diet supply service is provided maintaining the highest standard of cleanliness and hygiene with regard to the kitchen site, the utensils and equipment used and the manpower deployed. It shall allow no shoes or slippers to enter the kitchen-site. It shall install and maintain appropriate exhaust system in the kitchen. It shall use black coloured plastic waste bags of quality approved by the competent authority of health facility to dispose off the waste. It shall at all times maintain sufficient stock of the waste disposal bags. It shall dispose garbage as per norms prescribed by the local municipal authority.

ii) It shall maintain a **Kitchen Inspection Register** at the kitchen site. It shall attach periodic maintenance certificates of equipment and appliances being used in the kitchen in the Kitchen Inspection Register. Competent authority of the health facility shall inspect the kitchen site at least once a month and note down his observations relating to above in the Inspection Register. **A photocopy of the observations** recorded in the Register per billing period, duly countersigned by appropriate authority shall be submitted by the contractor along with the contractor's monthly bills to the in-charge of the health facility.

iii) At the time of termination of the contract at end of the full contract period or anytime before that, the contractor shall clear away and remove from the kitchen site all installations,

constructional works, surplus materials, rubbish, temporary works of every kind and hand over the site in a clean and workman-like condition to the satisfaction of the competent authority of the health facility. The rate quoted by the contractor should include all such contingencies.

iv) The contractor shall make good at his own cost and to the satisfaction of competent authority of health facility, all defects, shrinkages, settlements or other faults which may appear within 6 (six) months after termination of contract with him. In case of default, the competent authority of health facility may hire alternative services for such at risk and cost of contractor. The expenses, damages, losses etc. if any, arising out of such shall be deducted from the bills payable to the contractor or from his performance security. So, performance security shall be returned to the contractor only after lapse of six months from date of termination of contract with him. v) The contractor shall procure and maintain suitable fire-safety equipment at the kitchen site. He shall obtain necessary Fire Licence required for the operation of LPG ovens at his kitchen-site.

8. The Food Supplied

i) All food materials should be fresh and of the specified size and quantity as given in the menu chart and diet schedule.

ii) All raw food materials supplied by contractor should be thoroughly cleaned in 1. Hot clean water prior to cooking. 2. All vegetables are to be washed prior to dicing. 3. Potatoes should be fully peeled before cooking. Although the use of spices should be the bare minimum, care should also be taken to ensure that the cooked food is palatable and easily digestible. Cooking medium is mustard oil.

iii) All condiments and cooking medium used should be procured in sealed and branded packets/ tins/ containers and conform to Agmark Grade 1.

iv) Rice supplied should be IR 36 grade or superior.

v) Pasteurized, homogenized, double toned milk/ Curd/ Lassi is to be procured in sealed pouches and supplied to the wards in pouches for distribution to patients. If specified by the competent authority, the milk is to be taken out from the pouches in the kitchen/ ward pantry and boiled prior to supply.

vi) All food supplied should conform to all the provisions of **The Food Safety and Standards Act**, **2006**, as amended from time to time. **Within one month of commencement of his service** at the health facility, the contractor shall apply for **license under The Food Safety and Standards Act**, **2006** with the appropriate authority and submit a photocopy of the receipt-acknowledgment for such to the in-charge of health facility. The Food Safety Officer may, as and whenever deemed appropriate by him, enter and inspect the site where contractor's food is cooked, stored, or where any article of

food is manufactured, or stored for sale, and where anyadulterant is manufactured or kept, and take samples of such articles of food or adulterant for analysis.

vii) The contractor shall also obtain a Food Licence from the appropriate authority of the Office of the District CMOH.

viii). The contractor shall provide for sufficient numbers of covered trolleys to deliver the cooked food to patients in wards in a hygienic manner, so that no contamination takes place during transit and the food served to patients is hot and palatable.

ix) He shall maintain sufficient provisions to supply admission diet to newly admitted patients round the clock. Staff should be present to accept the indent for and serving the said diet.

x) The contractor shall personally present himself for meeting relating to the procurement of raw materials, review of his performance by the competent authority of health facility at intervals stipulated or whenever desired by the said authority. The competent authority of the health facility shall have the right to examine the bills of shopped-items, stock register and other books of accounts of the contractor for this purpose.

9. **Indoor patient Diet Register:** The contractor shall maintain an Indoor Patient Diet Register in the format prescribed as follows. At the end of each month he shall prepare an abstract sheet of meals provided by him to indoor patients admitted to the health facility as per this Register. He shall submit this abstract sheet with Diet Orders/ Requisition Slips issued to him for supply of these meals, along with the monthly contractor's bill to the in-charge of health facility.

Entries in the Indoor patient Diet Register shall be authenticated by the Dietitian/ Sister-in-Charge of Ward/ competent authority of health facility.

Indoor Patient Diet Register

Name of ward-

Total number of beds-

Date	Indoor	Regd.	Category	Requisition placed by:				
	patient	no.	of diet	Indent received by-				
	Name			Countersigned by-				
				Comments if any-				
				Break	Lunch	Evening	Dinner	On
				fast		Tiffin		Admission



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10. Assignment: The contractor shall not assign, either in whole or in part, its contractual duties, responsibilities and obligations to a second party to perform the contract. In the event of the contractor contravening this condition, the in-charge of health facility shall be entitled to place the contract elsewhere at risk and cost of contractor. The contractor shall be liable for any loss or damage, which health facility may suffer in consequence of or arising out of such replacement and such shall be recovered from the bills payable to him or the performance security deposited by him.

11. Staff to be deployed by contractor at health facility:

11.1

a) The contractor shall deploy a cook in the kitchen, the cook being employed, should have a minimum experience of one year in a reputed institution or having a certificate in such field.

b) The contractor shall deploy the following maximum number of adequately trained staff for cooking, distribution of food, disposal of wastes etc. for providing efficient indoor patient diet supply services to each health facility:

health facility with 31 to 59 beds	4 staff
" 60 to 100 beds	5 "
" 101 to 140 beds	6 "
" 141 to 180 beds	7 "
" 181 to 200 beds	8 "
" each additional 40 beds from 200	1 "
bed onwards.	

* The number of beds in health facility shall be equal to the **number of sanctioned beds or functional beds, whichever is less.** Any increase in the number of staff deployed in the health facility due to opening of new units, up gradation etc. shall be made only with prior approval of the Administrative Department.

c) He shall maintain a pool of standby staff, so that he can substitute an absentee staff with a reliever of equal status. If the indoor patient diet supply service in a health facility suffers due to absenteeism of any required worker on any occasion, Liquidated Damages as per GCC clause 9 shall be imposed.

d) The deployed staff shall collect indents/diet requisitions from the wards at scheduled times from Dietician/ Sister-in-Charge of Ward/ appropriate authority of health facility.

e) They shall prepare and cook the food items as per the indents/ requisitions.

f) They shall provide clean drinking water and cooked food to patients in the wards **at scheduled times**. They shall wash their hands with soap before cooking food, peeling/ cutting vegetables, serving diet to patients etc.

g) They shall clean the tables, furniture and fixtures, floor and work area of the kitchen as well as all pantry areas of the wards before serving meals and after patients finish consuming meals.

h) They shall clean dishes in which the meals are served with clean hot water and ecofriendly branded dish washing powder/ soap/ liquid before and after serving of meals. The dishes should be served to patients in clean condition after hygienic transport from the kitchen/ wash area to the wards. In hospitals where more **than 500 patients are served during a meal, dishwashers** should be installed by the contractor at his own cost. The cost of running and maintenance of the dishwashers shall be borne by the contractor himself.

i) The deployed staff shall collect food-waste from wards after patients finish consuming the meals and dispose the same along with kitchen waste. They shall collect the food-waste while they collect the used dishes from wards.

j) They shall dispose the food-wastes from wards and the kitchen-waste in black plastic garbage bags at the place and in mode as per instruction of competent authority of health facility.

k) The staff supplying food to the patients should be literate and be able to read and act upon diet order/ requisition slips.

11.2.

a) The contractor shall submit Licence under Contract Labour (Regulation and Abolition) Act to the in-charge of health facility at the earliest or maximum within one month of commencement of his service, if it employs minimum 20 persons in its firm.

b) The contractor shall employ adult labour only. Employment of child labour shall render the contractor liable to termination of the contract under GCC Clause 10: Termination for Default. The contractor shall engage only such workers, whose antecedents have been thoroughly verified, including character and police verification and other formalities.

c) The staff deployed by the contractor must wear proper Photo ID Cards during their duty hours, duly issued with approval of competent authority of health facility. They should wear clean uniforms including face masks/ scalp hair masks during their duty hours. The colour and design of such uniform shall be approved by competent authority of health facility. Any staff found without uniform or ID card during duty hours shall be deemed to be absent from duty and the said occasion shall be treated as a lapse in the services being provided by the contractor, liable for deduction of liquidated damages and other remedies available to the health facility under the contract. The contractor should provide at least two pairs of approved uniforms to its staff deployed at the health facility. The cost of uniforms and ID cards to workers shall be borne by the contractor.

11.3. The contractor at all times should indemnify the health facility against all claims, damages or compensation under the provisions of Payment of Wages Act, 1936; Minimum Wages Act, 1948; Employer's Liability Act, 1938; The Workmen Compensation Act, 1923; Industrial Disputes Act, 1947; The Equal Remuneration Act, 1976; Maternity Benefit Act, 1961 or any other law relating thereof and rules made hereunder from time to time. The health facility/ Administrative Department shall not own any responsibility in this regard.

11.4. The contractor shall pay to the staff deployed by it for indoor patient diet supply service in the health facility, at least the minimum wages as fixed by the state government for unskilled workers, EPF, ESI, EDLI contributions, any other dues, entitlements etc. as per the relevant statutes in vogue and revised from time to time. The contractor shall submit documentary evidence of such payment to the in-charge of health facility with the contractor's monthly bill. **The expenses shall be reimbursed to him by the health facility after proper verification.**

11.5. The staff deployed through contractor at the health facility shall not claim any benefit, compensation, absorption or regularization of their services in the establishment of the health facility/ Administrative Department either under the provisions of Industrial Disputes Act, 1947 or Contract Labour (Regulation and Abolition) Act, 1970 or any other law in vogue and as revised from time to time. The contractor shall obtain an undertaking from the deployed

persons to the effect that the deployed persons are the employees of the contractor. The contractor shall submit the said undertaking to the health facility. In the event of any litigation on the status of the deployed staff, the health facility/ Administrative Department shall not be a necessary party. However, in any event, either by the deployed persons or on order of a Court of Law, if the health facility/ Administrative Department is/ are made necessary parties in dispute to adjudicate the matter, the contractor shall reimburse the expenditure borne by the health facility/ Administrative Department for such.

11.6. The contractor shall be fully responsible for the conduct of his staff.

a) The staff shall not divulge or disclose any details of operational process, technical knowhow, confidential information, security arrangement, administrative matters, to third person(s).

b) The staff deployed should be disciplined, entailed on enforcing prohibition of alcoholic drinks, paan/ beetle leaf, smoking, loitering without work, gambling etc. any illegal, disruptive, immoral act in the health facility.

c) The staff should be sensitive in dealing with patients and persons accompanying patients and also the public at large visiting the health facility.

d) The contractor and his staff shall take proper and reasonable care and precautions to prevent loss, destruction, waste or misuse in any area within its scope of responsibilities in the health facility, and shall not knowingly lend to any person or identity any of the effects, assets or resources of the health facility, under its control.

e) Any loss/ damage etc. to the property, persons (including to patient-parties) of the health facility due to negligence/ any omission or commission on part of contractor or his staff, established after an enquiry by authorized representative(s) of the health facility/ any higher authority of the Government; shall be recovered from the contractor through appropriate method without prejudice to any other rights and remedies available to the health facility.

f) Any misconduct/ misbehavior by any staff deployed by the contractor should be promptly dealt with by the contractor. If competent authority of the health facility, so desires, such staff shall be immediately replaced by the contractor at his own risk, cost and responsibilities, with written intimation to the competent authority about such move.

11.7. Appropriate measures for the health and safety of the contractor's staff deployed at the health facility should be undertaken by the contractor regularly. A **report** regarding the same shall be submitted by the contractor to the in-charge of health facility **every six months**. All food handlers should be declared free from

- i. carrier status of Salmonella
- ii. Tuberculosis

iii. Carrier status of ova, parasites and cysts in stools etc.

11.8. Appropriate kitchen, catering and behavioural training to the deployed staff shall be provided by the contractor.

11.9. The attendance sheet in respect of the staff deployed at health facility shall be authenticated daily by a designated staff of contractor and countersigned by an appropriate authority of health facility. The attendance sheet shall be submitted by contractor along with the monthly bill payable to him by health facility. The Contractor shall compulsorily report in writing to competent authority of health facility about absence from duty of any of its deployed staff due to sickness.

SECTION IV: SPECIFICATIONS OF DIET

1. In addition to the specifications of diets listed as follows, the contractor shall provide any special diet(s) as and when directed and also help the Dieticians/ appropriate authority of the health facility in preparation of the Diet Menu.

2. Diet Scales (Prescribed)All weights are of raw uncooked materials.

The daily diet menu will be prepared by the competent authority of health facility and handed over to the diet Contractor for compliance. The amounts as prescribed in the diet scale are to be used as raw materials for preparation of the cooked meals as per menu. The health facility will be at liberty to make alterations in the diet menu while adhering to the raw materials in the prescribed diet scale.

Commodity	Standard (Equivalent brands are indicative of quality
	of raw materials to be used)
Rice	IR 36 or superior grade,



GOVERNMENT OF WEST BENGAL OFFICE OF THE MEDICAL SUPERINTENDENT CUM VICE PRINCIPAL DEBEN MAHATA GOVERNMENT MEDICAL COLLEGE & HOSPITAL Main Road, P.O & P.S.-: Purulia , PIN: 723 101

Phone: 7407676839,9382498061 Email: pgmchmsvp@gmail.com

Lentil Dal	Medium grade			
Moong dal Medium grade	Medium grade			
Fish (Ruhi/ Katla)	1 Kg -2 Kg dressed size, without head, fins, gills and			
	entrails			
Chicken (Net)	1-2 kg dressed size with breast and leg			
Egg (Poultry)	Poultry egg, weight not less than 60 gms			
60 Wheat Flour	Conforming to Agmark grade			
Mustard Oil	Branded, free from Argemone oil,			
Potato	Jyoti			
Sugar to be supplied in pouch	Faq Equivalent to Balarampur Chini			
Vegetables	Fresh, seasonal			
Sliced Loaf Bread	Equivalent to White Sliced sandwich Bread, Machine			
	made bread sliced by automatic machine and machine			
	packed in waxed paper or plastic wrapper to completely			
	enclose the bread,			
Banana.	Green Singapuri, just ripe, Weight not less than110 grams			
Sandesh	Small sized, weight not less than 40 grams made with			
	milk products.			
Paneer (Cow's milk)	Equivalent to renowned Diary's cow milk			
Milk (Cow's milk) in pouch	Equivalent to Branded Double Toned milk			
Salt (iodized)	Equivalent to Branded good quality iodized salt			
Cooking fuel	LPG in commercial			
Curd/ Lassi	To be supplied in pouches equivalent to branded mistidoi			
Commodity	Standard (Equivalent brands are indicative of quality of			
	raw materials to be used)			

All packed food to be supplied within the best before dates and nutrition at Information

- Minimum Diet Portions to be supplied
- Salt free diet shall be the same without added salt

- Soft rice diet will be same with boiled soft rice and boiled vegetables in place of cooked rice and mixed vegetable curry, respectively.
- For **vegetarians** substitution to be done for egg for breakfast with sandesh, fish for lunch by 200 gms curd in packet and egg for dinner with 20 gm (dry weight) Soya chunks in 100 ml gravy.
- Fish for lunch may be substituted with 100 gms raw chicken (serving quantity 75 gms) in 100 ml gravy twice a week

Breakfast		Lunch		Dinner		
Raw weight	Serving	Raw weight	Serving	Raw weight	Serving	
	quantity		quantity		quantity	
Milk 250 ml	Boiled Milk	Rice-150	Cooked	Atta or	4 Chapatis	
in pouch	250 ml	gms	Rice-450	Rice-	or cooked	
			gms	100gms	rice 300	
					gms	
	Boiled egg-	Dal -20gms	Cooked	Dal 20 gms	Cooked dal-	
Egg-1	60 gms		Dal-100		100 gms	
			gms			
Banana-1	Peeled ripe	Potato-70	Mixed	Potato- 70	Mixed	
	Singapuri	gms	vegetable	gms	vegetable	
	Banana		curry		curry	
	100gm		225gms		225gms	
Bread	Sliced white	Mixed		Mixed		
50gms	sandwich	vegetable		vegetable		
	Bread 50	curry 100		100 gms		
	gms	gms				
Sugar in	Sugar in	Fish 75 gms	Fried fish 50	Egg-1	Fried egg 50	

A] Full Rice Diet (Diet scale)



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ĺ	packet 10	packet 10	gms in	100 gms in 100	٦
	gms	gms	ml gravy	ml gravy	

B] Admission Diet (Diet Scale)

Raw weight	Serving quantity
Milk 250 ml in pouch	Boiled Milk 250 ml
	Boiled egg-60 gms
Egg-1	
Banana-1	Peeled ripe Singapuri Banana 100gm
Bread 50gms	Sliced white sandwich Bread 50 gms
Sugar in packet 10 gms	Sugar in packet 10 gms

* Admission diet includes patients treated in Day Care Centres for Thalassaemia etc.

C) Paediatric Full Rice Diet (For patients up to 8years of age) (Diet scale)

Breakfast		lunch		Dinner	
Raw weight	Serving	Raw weight	Serving	Raw weight	Serving
	quantity		quantity		quantity
Milk 125 ml	Boiled Milk-	Rice-75 gms	Cooked	Rice/ Atta-	Cooked rice
	125ml		Rice- 225	50 gms	150 gms/
			gms		chapatti 2pcs
Egg-1	Boiled egg-	Dal-15 gms	Cooked Dal-	Dal-15 gms	Cooked Dal-
	60gms		50 gms		50 gms
Bread 25	Sliced white	Potato 35	Mixed	Potato 25	Mixed
gms	sandwich	gms	vegetable	gms	vegetable
	Bread		curry		curry
	25gms		110gms		110gms
Sugar 5 gms	Sugar in	Mixed		Mixed	
	packet 5	vegetable -		vegetable 50	
	gms	50 gms		gms	
		Fish- 40 gms	Fried fish 25	Egg 1pc 60	Fried egg 50



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	gms in 50 ml	gm	gms in 50 ml
	gravy		gravy

E] Diabetic Diet (Diet Scale)

Breakfast		Lunch		Dinner		
Raw weight	Serving	Raw weight	Serving	Raw weight	Serving	
	quantity		quantity		quantity	
milk 250 ml	Boiled Milk	Rice-100	Cooked	Atta 100gms	Chapattis 4	
in pouch	250 ml	gms	Rice-300		pcs	
			gms			
	Boiled egg-	Dal -20gms	Cooked Dal-	Dal 20 gms	Cooked dal-	
Egg-1	60 gms		100 gms		100 gms	
Cucumber	Peeled raw	Bitter	Boiled Bitter	Bitter gourd-	Boiled Bitter	
100 gms	cucumber 90	gourd-75	gourd	75 gms	gourd	
	gms	gms	100gms		100gms	
Bread	Sliced white	Mixed	Mixed	Mixed	Mixed	
50gms	sandwich	vegetable	vegetable	vegetable	vegetable	
	Bread 50	100 gms	curry	100 gms	curry	
	gms		175gms		175gms	
		Fish- 75 gms	Fried fish 50	Egg 1pc	Boiled egg	
			gms in 100		60gms in	
			ml gravy		100 ml	
					gravy	

F] Uremic Diet (Diet Scale)

Breakfast		lunch		Dinner		
Raw weight	Serving	Raw weight	Serving	Raw weight	Serving	
	quantity		quantity		quantity	
milk 250 ml	Boiled Milk	Rice-150	Cooked	Atta or rice	4 Chapattis	
in pouch	250 ml	gms	Rice-	100gms	or cooked	



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					450gms		rice 300 gms
Cucumber		Peeled	raw	Dal -10gms	Cooked Dal-	Dal 10 gms	Cooked Dal-
100 gms		cucumb	er 90		50 gms		50 gms
		gms					
Banana-1		Peeled	ripe	Potato-70	Mixed	Potato- 70	Mixed
		Singapuri		gms	vegetable	gms	vegetable
		Banana			curry		curry
		100gm			225gms		225gms
Bread		Sliced y	white	Mixed		Mixed	
50gms		sandwic	dwich vegetable			vegetable	
		Bread	50	100 gms		100 gms	
		gms					
Sugar	in	Sugar	in	Fish- 50 gms	Fried fish 30	Fish 50 gms.	fried
packet	10	packet	10		gms in 100		fish30gms in
gms		gms			ml gravy		100 ml
							gravy

G] Full fluid Diet (diet scale)

Breakfast		lunch		Dinner	
Raw weight	Serving	Raw weight	Serving	Raw weight	Serving
	quantity		quantity		quantity
Milk 500 ml	Boiled milk	Curd	Curd 200	Milk 500 ml	Boiled milk
in pouch	500ml	200gms/	gms/ Lassi in	in pouch	500ml
		Lassi in 200	200 gms.		
		gms. pouch	pouch		
Sugar in	Sugar in	Dal 20 gms	Cooked dal-	Sugar in	Sugar in
packet 20	packet		100 gms	packet 20	packet 20
gms	20gms		Mixed	gms	gms
		Mixed	vegetable		



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Breakfast	lunch	Evening Tiffin	Dinner
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vegetable	soup	500	
200 gms+ 2	gms		
tsf oil			

H. Diet for Mentally Challenged patients



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Raw	Serving	Raw	Serving	Raw	Serving	Raw	Serving
weight	quantity	weight	quantity	weight	quantity	weight	quantity
Milk	275 gm	Rice 165	500 gm	Puffed	100 gm	Rice/ Atta	330 gm
		gm		Rice		110 gm	
Bread	55 gm	Dal 22	100 gm	Gram	50 gm	Dal 22 gm	100 gm
		gms					
Sugar	11 gm	Potato 77	In 225	Cucumber	100 gm	Potato 77	In curry
		gm	ml gravy			gms	& egg
							gravy
Egg 1	60 gm.	Mixed	In 250			Mix	In 225
pc		Vegetable	ml gravy			Vegetables	ml
		110 gm				110 gm	gravy
Banana	110 gm.	Fish 82.5	In 100			Egg 1 pc.	
1 pc		gm	ml gravy			60 gm	

Suggested Vegetables for serving:-

- Vegetables/legumes that can be served round the year- Potato, sweet pumpkin, bitter gourd, brinjal, Soya bean chunks, Bengal gram, dal bori.
- Vegetables that can be served during April to September: Ladies fingers, ridge gourd, wax gourd, pointed gourd, gourd, raw papaya, barbati
- Vegetables that can be served during October to March: Cabbage, cauliflower, tomatoes, radish, beans, spinach, carrot
- Other vegetables can be included depending on the availability and freshness. A judicious mix is recommended to add variety to the diet. Care should be taken to prevent repetition of the same vegetable curry as this will entail penal deduction from the diet bill.

SECTION V: CONSIGNEE LIST

(When the MSVP, Superintendent invites the tender) 1.1 Self,

Name: Prof (Dr.) Sukamal Bisoi

Designation: Medical Superintendent cum Vice Principal (MSVP),

Address: Main Road, P.O & P.S:-Purulia, PIN: 723101, Purulia

Phone number: 7407676839,9382498061

Email ID: pgmchmsvp@gmail.com

Campus-1

Deben Mahata Government Medical College & Hospital, Main Road, P.O & P.S:-Purulia, PIN: 723101, Purulia

Campus-2

Hatuara SSH, Vill-Hatuara, P.O- Vivekanada Nagar, P.S- Purulia Muffasil, PIN- 723147 Total beds in both campus: (1060 "One Thousand Sixty" bedded health facility, maximum number of contractor's staff deployable at health facility 29 "Twenty Nine")

SECTION VI: GENERAL CONDITIONS OF CONTRACT

1 Commencement of Service:

1.1 The contractor shall commence providing his service within 15 (fifteen) days from date of notification of award of contract for this e-tender or the date of handing over of the indoor patient diet kitchen site at the premises of the health facility to him, whichever is earlier. Time is the essence of the contract and should be strictly adhered to by the contractor.

2. Eligible Goods and/ or Services

2.1 Allgoods and/ orservicestobesuppliedunderthecontractshallhavetheiroriginin India oranyothercountry withwhichIndiahas notbannedtrade relations. Theterm" origin" used in this clause means the place where the goods aregrown, produced, minedor manufactured or from wherethe servicesarearranged and supplied.

3. Eligible and Qualified Bidders

3.1 a) The intending tenderer should produce credential of similar nature of a completed single work having minimum value of 40% (Forty per cent) of the estimated amount put to tender during 3 (Three) years prior to the date of the

issue of this e-Tender notice.

OR b) The intending tenderer should produce credentials of 2 (Two) similar nature of completed works, each having a minimum value of 30 % (Thirty percent) of the estimated amount put to tender during 3 (Three) years prior to the date of issue of this e-Tender notice.

[Note: One bidder can apply for more than one hospital subject to his credential being calculated on the sum total of the turn-over of all hospitals where the bidder has submitted his bid.]

- A. The period of three years as mentioned in Clause 3.1 in the above mentioned order means service rendered after April, 2011.
- **B.** Similar nature of work (supply of cooked diet) includes service rendered at Public Sector, Corporate Sector and Private Sector.
- c) for Rural Hospitals/ BPHCS/ 24 X 7 PHCS SHG.

PROFORMAFOR PERFORMANCE STATEMENT

(Forthe period mentioned above)

(Submit with documentary evidence**)

Tender No.



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Date of opening			:		
Name andaddre	ess of the				
Order	Order	Description &	Value	Period of	Remarks on
placed by	No.	quantity (e.g.	of order	Contract	Satisfactory
(full address	and	cooked diet in 'n'-	(Rs.)		Performance (attach
of	date	bedded hospital)			documentary
Purchaser)					evidence)**
1	2	3	4	5	6

Signatureandseal of the Bidder

** The documentary evidence will be a certificate or bill paid or TDS certificate issued by the purchaser/end user with cross-referenceof order no. and date, with anotarized certification authenticatingthecorrectness of the information furnished.

(Note: - No other forms of certificate other than prescribed above will be entertained.)

3.2 The bidder should preferably have the registered office or a branch office in the city/ district of the health facility.

4. Earnest Money Deposit (EMD)

Registered SSI units participating in Govt. tenders are eligible for exemptions from payment of earnest money and security deposit (EMSD) under Rules 47(A) (1) and 47(B)(7) of WBFR, vol.-I, read with Finance Dept. notification No. 10500-F Dt. 19.11.2004 and its clarification Vide memo. No. 4245-F (Y) dated 20.05.2013.

4.1 The amount of Earnest Money to be submitted shall be Rs.23600 (Twenty Three Thousand Six Hundred only)

(The amount of EMD shall be approximately equal to 2% (two percent) of the estimated bill value or paid bill value (for meals plus emoluments of contractor's staff) by the health facility in the current month or the previous month, rounded off to the nearest multiple of Rs.100/-.)

4.2 The process may be followed as per memorandum of the Finance Department Audit Branch bearing Memo No-3975-F(Y) dated: 28 ^{th.}July, 2016 (GRIPS)

1. Loginbybidder:

 a) A bidderdesirous of taking part in a tender invited by a State Government Office/PSU/Autonomous Body/Local Body/ PRls, etc shalllogintothe e-Procurement portal of the Government of West Bengalhttps://wbtenders.gov.in usinghislogin ID and password.

b) He will select the tender to bid and initiate payment of pre-defined $\rm EMD/$ Tender

Feesforthat tenderby selecting from eitherof the~following payments modes:

- i) Netbanking (anyofthe bankslisted inthe ICICIBankPayment gateway) incase ofpayment through ICICIBankPaymentGateway;
- ii) RTGS/NEFTincaseofoffline paymentthroughbankaccount in any Bank
- 2. Paymentprocedure:

a) Payment by Net Banking (any enlisted bank) through ICICIBankPaymentGateway

- i. Onselection of netbanking as the payment mode, the bidder will be directed to ICICIBank Payment Gateway webpage (along with astring containing a Unique ID) where he will select the Bank through which he wants to do the transaction.
- ii. Bidder willmakethe paymentafterenteringhisUnique ID and password of the banktoprocess the transaction.
- iii. Bidder willreceiveaconfirmation messageregarding success/failure of the transaction.
- iv. If the transaction is successful, the account paid by the bidder will getcredited in the respective Pooling account of the State Government
 /PSU/Autonomous Body/Local Body/P, R.Is, etc maintained with

the Focal Point BranchofICICIBankatR.N.Mukherjee Road,Kolkata forcollection of EMD/Tender F e e s.

v. If the transaction is failure, the bidder will again try for payment by going back to the first step.

b) Payment through RTGS/NEFT

i) On selection of RTGS/NEFT as the payment mode, the e-Procurement Portal will show a pre- filled challan having details to process RTGS/NEFT transaction.

ii) The bidder will print the challan and use the prefilled information to make RTGS/NEFT payment using his bank account.

iii)Once payment is made , the bidder will come back to the e- procurement portal after expiry of a reasonable time to enable the NEFT/ RTGS process to complete ,in order to verify the payment made and continue the bidding process.

iv) If verification is successful, the fund will get credited to the respective Pooling Account of the State Government / PSU/Autonomous Body/Local Body/ PRIs etc. Maintained with the focal point branch of ICICI Bank at R.N.Mukherjee Road, Kolkata for collection of EMD /Tender Fees.

v) Hereafter, the bidder will go to e-Procurement Portal for submission of the bid .vi) But if the payment verification is unsuccessful, the amount will be returned to the bidder's account.

3. <u>Refund/ Settlement Process.</u>

i) After opening of the bids and technical evaluation of the same by the tender inviting authority through electronic processing in the e-payment portal of the State Government, the tender inviting committee will declare the status of the bids as successful or unsuccessful which will be made available, along with the details of unsuccessful bidders, to the ICICI Bank by the e procurement portal through web services.

ii) On receipt of the information from the e procurement portal, the bank will refund, through an automated process, the EMD of the bidders disqualified at the technical evaluation to the respective bidders' bank account from which they made payment transaction. Such refund will take place within T+2 bank working days where T will mean the date on which information on rejection

of bid is uploaded to the e procurement portal by the tender inviting authority. iii) Once the financial bid evaluation is electronically processed in the eprocurement portal, EMD of the technically qualified bidders other than that of L1 and L2 bidders will be refunded, through an automated process, to the respective bidder's bank account from which they made the payment transaction. Such refund will take place within T+2 bank working days where T will mean the date on which information on rejection of bid is uploaded to the e procurement portal by the tender inviting authority. However, L2 bidder should not be rejected till the LOI process is successful.

iv) If the L1 bidder accept the LOI and the same is processed electronically in the e- procurement portal, EMD of the L2 bidder will be refunded through an automated process, to his bank account from which he made the payment transaction. Such refund will take place within T+2 bank working days where T will mean the date on which information on Award of contract (AOC) to the L1 bidder is uploaded to the e-procurement portal the tender inviting authority.

v) As soon as the L1 bidder is awarded the contract (AOC), and the same is processed electronically in the e- procurement portal –

a) EMD of the L1 Bidder of the tenders of the State Government Offices will automatically get transferred from the Pooling account to the State Government Deposit Head'8443-00-103-001-07' through GRIPS along with the bank particulars of the L1 bidder.

b) EMD of the L1 bidder for the tenders of the State,/PSU/Autonomous Bodies/ Local Bodies/ PRIs etc. will automatically get transferred from the pooling account to their respective linked bank accounts along with the bank particulars of the L1 bidder.

In both the above cases, such Transfer will take place within T+1 bank working days where T will mean the date on which the award of contract (AOC) is issued.

vi) The bank will share the details of GRN No. generated on successful entry

in GRIPS with the e- procurement portal for updation.

vii) Once the EMD of L bidder is transferred in the manner mentioned above ,Tenderfees, if any, deposited by the bidders will be transferred electronically from the pooling account of the Government Revenue Receipt Head "0070-60-800-013-27" through GRIPS for Government Tenders and to the respective linked bank accounts for State/ PSU/Autonomous Body/Local Body/ PRIs etc. Tenders.

viii) All refunds will be made mandatorily to the bank account from which the payment of EMD and tender fees (if any) were initiated.

5. **PerformanceSecurity**

amended.

- 5.1 Within 15 (fifteen) days from the date of issue of notification of award by the purchaser, the contractor shall furnish performance security to the health facilityforanamountequalto5% of total value of diet supplied during previous financial year. The performance security shall be retained upto 6 (six) months afterthedateofcompletionof allcontractualobligations by the contractor.
- 5.2 The performancesecurityshallbedeposited inIndianRupees to the state government through TR Challan under budgetary head of account 8443-00-103-Earnest Money-01-07-Deposits.No other forms of deposit can /will be entertained by the hospital authority.
- 5.3 Intheeventofanyfailure/defaultofthe contractorwithorwithoutanyquantifiablelosstothe health facility/ purchaser/ government,theamountoftheperformancesecurityisliabletobeforfeited by the health facility/ purchaser/ AdministrativeDepartment.
- 5.4 Intheeventofanyamendmentissuedtothecontract, the contractorshall, within 21 (twenty one) daysofissueof theamendment, furnish the corresponding amendment to the performance security (as necessary), rendering the same valid in all respects in terms of the contract, as
- 5.5 SubjecttoGCCsub-clauses 5.1 and 5.3above, the health facility will release the

performance security without any interest to the contractor on completion of the contractor's all contractual obligations.

6 TenderPrices

6.1 The bidder shall quote an 'Administrative Charge' for providing goods and /or services, as applicable in the e-tender. The Administrative Charge shall be quoted as a single percentage rate on the "Total Cost of Raw Materials" as noted in Column f of Table of sub-clause 6.2 below for supply of the different categories of diets per health facility. GST as applicable from time to time on this Administrative Charge shall be paid extra. No additional charges, taxes etc. will be paid. The bidder may quote up to a maximum of 7.5% (seven and a half percent) as Administrative Charge.

Diet category	Cost of gas (Rs.		terials in	cluding c	ooking	aterials	administrative on total cost al cost of diet	
	Breakfast	Lunch	Evening Tiffin	Dinner	On admission	Total cost of raw materials	Maximum administr cost @7.5% on total	Maximum total cost of diet
	a	b	с	d	e	f	g	h
Diabetic diet	15.94	23.28	0.00	14.39	0.00	53.60	4.02	57.62
Full fluid diet	15.92	18.09	0.00	15.92	0.00	49.94	3.75	53.68
Full Rice diet	17.58	24.94	0.00	14.12	0.00	56.64	4.25	60.89
Pediatric Full Rice Diet	9.18	12.27	0.00	12.69	0.00	34.15	2.56	36.71
Soft Rice diet	16.72	22.99	0.00	13.20	0.00	52.91	3.97	56.88
Uremic diet	14.70	18.62	0.00	12.48	0.00	45.80	3.44	49.24

6.2 Table: Rate of Cooked Diet, Category-wise for Financial Year 2022-2025



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Diet for Mentally challenged Indoor patients	18.57	27.43	11.77	15.19	0.00	72.96	5.47	78.44
Admission diet	0.00	0.00	0.00	0.00	16.70	16.70	1.25	17.95

- 6.3 So, the price quoted by the bidder shall include all charges for providing all raw materials like grocery, spices, cereals, pulses, fresh vegetables, fruits, egg, milk, utensils, cooking burners range, LPG cooking fuel, microwave oven, water cooler etc. kitchen appliances and equipment and their maintenance, tools and tackles, working tables, fixtures and fittings, trolleys, garbage/kitchen waste disposal bags and bins etc. required for preparation and distribution of the food items to indoor patients admitted in beds in each ward of health facility.
- 6.4 The price quoted shall be inclusive of all charges for providing 2 (two) sets of uniforms per year, I-Cards to all contractor's staff deployed at health facility; boots, hand gloves, safety goggles, masks etc. to those required. The quality and colour code of such items of attire shall be as per approval of competent authority of health facility.
- 6.5 The Bidder shall bear all charges like packing and forwarding, transportation, insurance, storage, loading/ unloading; expenses of his service personnel, including their health and safety measures; all other expenses necessary in providing the service, ex-factory/ ex-warehouse/ ex-registered or branch office to the health facility.
- 6.6 The bidder shall pay to the staff deployed by it at the health facility at least the minimum wages as fixed by the state government for **unskilled workers**, dues, entitlements etc. as per the relevant statutes in vogue and revised from time to time. He/she will be reimbursed by the health facility the statutory minimum wages for **unskilled workers** and other minimum statutory emoluments paid by it to its staff deployed at the health facility, as revised from time to time, on submission of documentary evidence for such with his monthly contractor's bill.
- 6.7 The rate quoted by the bidder shall remain valid for full period of contract i.e. for 1 year + 1 year + 1 year = full 3 years of contract period, as renewed on yearly basis

of satisfactory performance, plus extension period, if any.

- 6.8 The bidder should quote rates online in the Bill of Quantity (BOQ) in the space marked for quoting rates against each health facility in the BOQ. Downloaded copies of the BOQs are to be uploaded, virus scanned and digitally signed by the bidder.
- 6.9 The rate quoted by the bidder should not be higher than the rates at which it may be running such services at other Government Institutes/ Ministries/ Departments/ PSUs etc.

7. Terms and Mode of Payment

- 7.1 Paymentshallbemade inIndian Rupeessubjecttorecoveries,ifany,bywayofliquidateddamagesorany other charges as per terms andconditions of contract.
- 7.2 The contractor shall submit bills for payment due to him at the end of each month in duplicate to the in-charge of health facility as per proforma in Section XI.
- 7.3 Along with the above bill the contractor shall certify and submit the following documents in duplicate, too:

i. An abstract sheet of meals supplied by him to indoor patients during the month along with the Diet Order/ Requisition Slips issued to him for supply of these meals by the Dietician/ Sister-in-charge of Ward/ appropriate authority. The abstract sheet should be prepared by him in format of the Indoor Patient Diet Register, as mentioned in Section III, Clause 10 of this e-tender document. The abstract sheet shall be checked and verified by the Dietician/ Sister-in-Charge of ward/ appropriate authority of the health facility. After verification, such authorities shall sign/ countersign on the abstract sheet and on the bill submitted by the contractor with certificate that the meals enlisted have duly been served and the indoor patient diet supply service duly rendered satisfactorily by the contractor for the period claimed in the bill.

ii. The attendance sheet of the indoor patient diet supply staff deployed by the contractor, duly authenticated daily by his designated staff and countersigned by appropriate authority of the health facility. No payment shall be made for **absentee** employees.

iii. The bank statement showing the date on which the previous month's emoluments to the contractor's staff deployed at the health facility have been paid through ECS. The contractor shall provide the mandate form for ECS payment to its deployed staff. The ESI Contribution relating to these workers (copies of ESI Cards of workers, copy of ESI deposit challan shall be enclosed). EPF Contribution relating to these workers (copies of EPF numbers of workers, copy of EPF deposit challan shall be enclosed). The same will be followed for EDLI Contribution and Administrative Charges paid by contractor for the staff. These expenses shall be reimbursed to the contractor by the health facility after proper verification.

vi. Self declaration, "We are complying with all statutory Labour laws in vogue and as amended up-to-date, including the Minimum Wages Act".

vii. GST deposit challan for tax claimed in preceding month's contractor's bill.

viii. Details of any other benefits, facilities etc. availed by him during the billing period from the health facility, appropriate consumption charges for which shall be deducted from his monthly contractor's bill.

ix. A **photocopy** of the observations recorded in the Kitchen Inspection Register per billing period as detailed in Section III, Clause 8 of this e-tender document.

x. Medical fitness certificates of contractor's deployed staff every six- months

- 7.4 The contractor shall be absolutely and exclusively responsible for the payment of salary for the staff deployed at health facility on or before the 7th of each succeeding month to protect the interest of these staff and to ensure smooth running of indoor patient diet supply service in the health facility, irrespective of whether or not he may be able to raise the bills or receive payments from health facility by that time.
- 7.5 Payment shall be released to the contractor after deduction of Income Tax deductible at source and other statutory deductions.
- 7.6 Additional compliances to be verified before payment of monthly contractor's bill for the first time by health facility:

i. Performance Security as per GCC Clause 5 has been submitted

ii. Contract form as per Section X has been signed and exchanged by both the parties

- iii. Contractor's deployed staff are wearing uniforms and ID Cards, as approved by in- charge of health facility
- iv. Medical fitness certificates of contractor's deployed staff submitted
- v. Written job-responsibilities of each deployed staff of contractor
- vi. List of equipment handed over to contractor by health facility and their current working condition
- vii. Cooking is through LPG exclusively

viii. Contractor has applied for License under The Food Safety and Standards Act, 2006 before the competent authority

ix. Contract Labour Licence of contractor submitted

8. Variation, Delay intheContractor's Performance

- 8.1 TheContractorshalldeliverthegoodsandperform these rvices under the contract as per quality, quantity, time schedules, deployable staff, other terms and conditions specified by the Purchaser in the relevant clauses of the contract.
- 8.2 Subject to the provision under GCC clause 12,any unexcused variation in quality, quantity, delay etc by the Contractor in maintainingitscontractualobligationstowardsdeliveryofgoodsand/ orperformanceofservices shall render theContractor liable to anyor allof the followingsanctions:

(i)Imposition ofliquidated damages,

- (ii)Forfeiture of its performancesecurity
- (iii)Termination of the contract for default.
- 8.3

Ifatanytimeduringthecurrencyofthecontract,theContractorencountersconditionshinderingtimelydeliveryofthegoodsand/orperformanceofservices,theContractorshallpromptlyinformthePurchaserinwritingaboutthesameanditslikelydurationandmakearequesttothePurchaser for extension of the delivery schedule accordingly. On receiving theContractor's communication, the Purchaser shall examinethe situation as soon aspossibleandatitsdiscretion,mayagreetoextendthedeliveryschedule,withorwithout

liquidated damages for completion of Contractor's contractual obligations by issuing an amendment to the contract.

9. Liquidated damages

9.1 Subjectto GCC Clause 12, if the contractor fails to provide indoor patient diet supply service as per quality, quantity, hygiene conditions, time schedules, deployable staff and other terms and conditions incorporated in the contract and to the satisfaction of the of competent authority health facility. the latter shall. withoutprejudicetootherrightsandremediesavailableto it underthecontract deduct a sumequivalent to 1% (one percent) of the Total value of diet supplied as per Row 1 of Part B: Dietary Bill of Contractor's Monthly Bill as per proforma of Section XI; as liquidated damages per occasion of default from the contractor's monthly bill. If the deductions exceed 6 % (six percent)of the total value of diet supplied in any calendar month, the health facility may consider termination of the contract and hiring of alternative service at risk and cost of the contractor as laid down in GCC Clause 10: Termination for Default.

10. Termination fordefault

- 10.1 The Purchaser, without prejudice to any other contractual rights and remedies availabletoit(thePurchaser),may,bywrittennoticeofdefaultsenttotheContractor, terminatethecontractinwholeorinpart, if the Contractor fails to deliverany orallofthegoods and/ or perform the services and/ or failstoperformanyothercontractualobligation(s) as specifiedinthe contract, or within any extension thereof granted by the Purchaser pursuant to GCC subclause 8.3.
- 10.2 IntheeventthePurchaserterminatesthecontractinwholeorinpart,pursuantto GCCsubclause 10.1above,thePurchasermayprocuregoodsand/orservicessimilar tothosecancelled,withsuchtermsandconditionsandinsuchmannerasitdeemsfitandthe ContractorshallbeliabletothePurchaserfortheextraexpenditure,ifany,incurredby the Purchaserfor arrangingsuchprocurement.
- 10.3 UnlessotherwiseinstructedbythePurchaser,theContractorshallcontinuetoperform the

contract to theextent not terminated.

11. Termination for insolvency

11.1

If the Contractor becomes bank rup torotherwise insolvent, the purchaser reserves the eright to terminate the contract at any time, by serving written notice to the Contractor without any compensation, what so ever, to the Contractor, subject to further condition that such termina tion will not prejudice or affect the rights and remedies which have accrued and/or will accrue there after to the Purchaser.

12. ForceMajeure

12.1 NotwithstandingtheprovisionscontainedinGCCclauses 8, 9 and 10,theContractorshallnot

beliableforimpositionofanysuchsanctionsolongthedelayand/orfailureoftheContractor in fulfillingits obligations under the contract is the resultof an event ofForceMajeure.

12.2 Forpurposes

ofthisclause,ForceMajeuremeansaneventbeyondthecontroloftheContractor andnotinvolving

theContractor'sfaultornegligenceandwhichisnotforeseeableandnotbrought aboutattheinstanceofthepartyclaimingtobeaffectedbysuchevent.Sucheventsmayinclu de,butarenotrestricted to,actsofthePurchaser eitherinitssovereignor contractualcapacity,warsor

revolutions,hostility,actsofpublicenemy,civilcommotion,sabotage,fires,floods,explos ions, epidemics,quarantine restrictions,strikesexcluding byitsemployees,lockoutsexcluding byits management, andfreightembargoes.

12.3 IfaForceMajeuresituationarises,theContractorshallpromptlynotifythePurchaserin writingofsuchconditionsandthecausethereofwithin 7 (seven)daysofoccurrenceofsuch event. Unless otherwisedirected by the Purchaser in writing, the Contractor shall continuetoperformitsobligationsunderthecontractasfarasreasonablypractical,andshall seek allreasonablealternativemeans forperformancenot prevented bytheForceMajeure event.

- 12.4 If the performance in whole or in part or any obligation under this contract is prevented or delayed by any reason of Force Majeure for a period exceeding thirty days, either party may at its option terminate the contract without any financial repercussion on either side.
- 12.5 IncaseduetoaForceMajeureeventthePurchaserisunabletofulfilitscontractual commitmentand responsibility,thePurchaserwillnotifytheContractoraccordingly and subsequent actionstaken on similarlines described in abovesub-clauses.

13. Termination for convenience

13.1 ThePurchaserreservestherighttoterminatethecontract,inwholeorinpartforits (Purchaser's)convenience,byservingwrittennoticeontheContractoratanytime duringthe currencyofthecontract.Thenoticeshallspecifythattheterminationisforthe convenienceofthe Purchaser.Thenoticeshallalsoindicateinter alia,theextentto whichtheContractor'sperformanceunderthecontractisterminated,andthedatewitheffec tfrom which such terminationwillbecome effective.

13.2 Thegoodsand/

orserviceswhicharecompleteandreadyintermsofthecontractanddeliveredand performedwithin 45 (forty five)daysaftertheContractor'sreceiptofthenoticeofterminationshallbe accepted bythePurchaserfollowingthe contract terms, conditions and prices.

14. Modification of Contract

14.1 Ifnecessary, the purchaser may, with due approval of the Administrative Department, issue awrittenorder to the Contractor at any time during the currency of the contract, to amend the contract by making alterations and modifications within the general scope of contract in any one or more of the following:

a) Requirements and Specifications of the goods and /or services.

b)Anyotherarea(s)of the contract, as feltnecessarybythepurchaser dependingon the

GOVERNMENT OF WEST BENGAL OFFICE OF THE MEDICAL SUPERINTENDENT CUM VICE PRINCIPAL DEBEN MAHATA GOVERNMENT MEDICAL COLLEGE & HOSPITAL Main Road, P.O & P.S.-: Purulia , PIN: 723 101 Phone: 7407676839,9382498061 Email: pgmchmsvp@gmail.com

merits of the case.

14.2 Intheeventofanysuchmodification/ alterationcausing increaseordecreaseinthecostofgoods and/ orservicestobesuppliedandprovided,orinthetimerequiredbytheContractortoperformany obligationunderthecontract,anequitableadjustmentshallbemadeinthecontractpriceand/ or contractdeliveryschedule,asthecasemay beandthecontractamendedaccordingly.Ifthe Contractordoes notagreetotheadjustmentmadebythePurchaser,theContractorshall conveyits views to thePurchaserwithin 15 (fifteen)days from thedateofthe Contractor's receiptof the Purchaser'samendment/ modification of the contract.

15. Notices

15.1

Notice, if any, relating to the contract given by one party to the other, shall be sent in writing. The procedure will provide the sender of the notice, the proof of receipt of the notice by the receiver. The addresses of the parties for exchanging such notices will be the addresses as incorporated in the contract.

- 15.2 Theeffectivedateofanoticeshallbeeitherthedatewhendeliveredtotherecipientorthe effectivedate specificallymentioned in the notice, whichever is later.
- 16. **Resolution of disputes**
- 16.1 Ifdisputeordifferenceofany kindshallarisebetweenthePurchaserandtheContractor inconnectionwithorrelatingtothecontract,thepartiesshallmakeeveryefforttoresolvethe same amicablybymutual consultations.
- 16.2 If the parties failtones olve their dispute or difference by such mutual consultation within twenty-one days of its occurrence, then, either the Purchaser or the Contractor may give notice to the other party of its intention to commence arbitration, as here in a fter provided the applicable arbitration procedure will be as per

theArbitrationandConciliationAct,1996ofIndia.Inthecaseofadisputeordifferencearisin g betweenthePurchaserandContractorrelatingtoanymatterarisingoutof orconnectedwiththecontract,suchdisputeordifferenceshallbereferredtothesolearbitrati on ofanofficerinthe Department of Health and Family Welfare, Government of West Bengal,appointedtobethearbitratorbythe Principal Secretary to that Department.Theawardofthearbitratorshallbefinalandbinding onthepartiesto thecontract.

16.3 Thevenueofarbitrationshallbethe districtfromwherethecontracthas been issued or Kolkata, as deemed appropriate by the arbitrator.

17. Applicable Law and Legal Suits

- 17.1 ThecontractshallbegovernedbyandinterpretedinaccordancewiththelawsofIndiaforthe time beingin force.
- 17.2 All disputes would be decided at the Kolkata jurisdiction.

18. General/Miscellaneous Clauses

18.1

NothingcontainedinthisContractshallbeconstructedasestablishingorcreatingbet weenthe parties, i.e. theContractor on the oneside and the Purchaseron the otherside, are lationship of master and servant or principal and agent.

- 18.2 AnyfailureonthepartofanyPartytoexerciserightorpowerunderthisContractshallnot operateas waiver thereof.
- 18.3 TheContractorshallnotifythePurchaserofanymaterial change thatwould impact on performance of its obligations under this Contract.
- 18.4 Eachmember/constituentoftheContractor,incaseofconsortium shall be jointly and severally liable to and responsible for all obligations towards the Purchaser for performance of contract/services including that of its Associates/Sub Contractors under theContract.

18.5 TheContractorshall,atalltimes,indemnifyandkeepindemnifiedthe

Purchaseragainstanyclaimsinrespectofanydamagesorcompensationpayableinconsequencesofanyaccidentorinjurysustainedorsufferedbyitsemployees oragentsorbyanyotherthirdpartyresultingfromorbyanyaction,omissionoroperationconducted byor on behalf oftheContractor/its associate/affiliateetc.

- 18.6 All claims regarding indemnity shalls urvive the termination or expiry of the contract.
- **19.** Governing language

19.1 ThecontractshallbewritteninEnglishlanguage.

Allcorrespondenceandotherdocumentspertainingtothecontract, which the parties exchange, shall also bewritten accordingly in that language.

20. Useofcontract documents and information

20.1

TheContractorshallnot, without the purchaser's prior written consent, disclose the contractor any

provisionthereofincludinganyspecification,drawing,sampleoranyinformationfurnishe dby

oronbehalfofthepurchaserinconnectiontherewith,toanypersonotherthantheperson(s) employedbytheContractorintheperformanceofthecontractemanatingfromthis etenderdocument.

Further, any such disclosure to any such employed persons hall be made in confidence and on ly so far as necessary for the purpose of performance of this contract.

20.2

Further, the Contractorshall not, without the purchaser's prior written consent, make use of any documentor information mentioned in GCC sub-clause 20.1 above except for the sole purpose of performing this contract.

20.3

ExceptthecontractissuedtotheContractor,eachandeveryotherdocumentmention edinGCC sub-clause 20.1aboveshallremaintheproperty ofthepurchaserand,ifadvisedby thepurchaser, all copies of all such documents shall be returned to the purchaser on completion of the Contractor's performance and obligations under thiscontract.

SECTION VII: GENERAL INSTRUCTIONS TO BIDDERS (GIB)

[For bidding in this e-tender]

1. Introduction

1.1 Beforeformulatingthebidandsubmittingthesametothepurchaser,thebiddershould readandexaminealltheterms,conditions,instructions,checklistetc.containedinthe e-

tender

document.Failuretoprovideand/orcomplywiththerequiredinformation,instructionset c. incorporated in this document mayresultin rejection of its bid.

1.2 Expendituretobeincurredfortheproposedpurchasewillbemetfromthefundsavailable with thepurchaser/ consignee. The procurement will be in terms of procurement rules of the Government of West Bengal.

2 Corrupt or Fraudulent Practices

2.1 It is required byallconcerned, namelythe Consignee/Bidders/Contractors/others to observe he highest standard of ethicsduring the procurementand execution of such contracts. In pursuance of this policy, the Purchaser:

(a)Defines, forthepurposesofthis provision, the terms set forth below as follows:

(i)

"corruptpractice"meanstheoffering,giving,receivingorsolicitingofany thingof valueto influencetheactionofapublicofficialintheprocurementprocessorin contract execution; and

- (ii) "fraudulentpractice" meansamisrepresentationoffacts in order to influencea procurement processor the execution of a contract to the detriment of the Purchas er, and includes collusive practice among Bidders (prior to or after Bid submission) designed to establish Bid prices a trificial non-competitive levels and to deprive the Purchaser of the benefits of free and open competition;
- (b)willreject a proposal foraward ifitdetermines that theBidder recommended foraward has engaged incorrupt orfraudulent practices incompetingforthe contractin question;

(c)willdeclarea firm ineligible, either indefinitelyorforastated period oftime, to be awarded a contract bythepurchaser ifitat anytime determines that the firm has engaged in corrupt orfraudulent practices incompeting for,or in executingthe contract. Before declaring a firm ineligible a show cause notice to be issued followed by reasoned hearing.

3. Bidding, Contracting and Billing Expenses

- 3.1 Thebiddershallbearallcostsandexpenditureincurredand/ortobeincurredbyitin connectionwithitsbidincluding preparation,mailing, online uploading andsubmissionofitsbidandfor subsequentprocessingthesame.Thepurchaserwill,innocaseberesponsibleorliable for anysuch cost, expenditure etc. regardless of the conduct or outcome of thetenderingprocess.
- 3.2. The bidder shall bear all costs, including the cost of stationery and printing, for signing of the contract and submission of bills for payment.

4. Clarificationon e-Tender Document

4.1 Abidderrequiringanyclarificationorelucidationonanyissueofthe e-tender

document may takeupthesame with the purchaser in the pre-bid meeting.

4.2. The bidder may also take up the same in writing. The purchaser will respondin writing to such request provided the same is received by **the purchaser not later than**

eight days prior to the prescribed date of submission of bid.

5. Alternative Bids

- 5.1 AlternativeBids arenot permitted.
- 6. BidValidity
- 6.1 Thebidsshallremainvalidforacceptancefora period of120 days (One hundred and twenty days) after the date of technicalbid opening prescribedinthe e-tender document. Anybidvalidforashorterperiodshallbetreatedas unresponsive and rejected.
- 6.2 Inexceptionalcases,thebiddersmayberequestedbythepurchasertoextendthevalidity oftheirbids uptoaspecifiedperiod.Suchrequest(s)andresponsestheretoshallbe conveyed in writing.Thebidders, who agree toextend the bid validity, are to extend the same without any change or modificationoftheiroriginalbidandtheyarealsotoextend thevalidityperiodofthe EMDaccordingly.Abidder,however,maynotagreetoextenditsbidvaliditywithout forfeitingits EMD.
- 6.3 Incasethedayuptowhichthebidsaretoremainvalidfallson/ is subsequentlydeclareda

holiday or closed day forthepurchaser, the bidvalidity shall automatically be extended up to the next working day.

7 Preparation of Bid Documents

7.1Th	1Thebid documentsshalleither betyped orwritten in indelibleink andthesameshallbesigned/								
	digitally	signedbythebidderorby	a person who has been duly authorized						
	to bind the bidder to the contract. The letter of authorization shall be by a written power of the bidder to the								
	attorney, which shallalsobe furnishedalong with thebid.								

- 7.2 Thebid documentsshallnotcontainanyerasure oroverwriting,exceptasnecessarytocorrectanyerrormadebythebidderand,ifthereis anysuch correction; thesame shallbeinitialled bythe person(s) signingthebid.
- 7.3 It is the responsibility of bidder to go through the e-tender document to ensure furnishing all required documents. Wherevernecessary and applicable, the biddershallenclose certified copy as documentary evidence to substantiate the corresponding statement.
- 7.4 A bid, which does not fulfil any of the above requirements and/or gives evasive information/ replyagainstanysuch requirement, shallbeliableto be ignored and rejected.
- 7.5 Bid sent by paper/fax/telex/cable/email etc shall beignored.

PREPARATIONOF BIDS FOR e-TENDER

8. Registration of Bidder: A bidder willing to take part in the process of e-tendering will have to be enrolled and registered with the Government e-Procurement System, by logging on to website <u>https://wbtenders.gov.in</u>. The bidder is to click on the link for e-tendering site as given on the web portal.

9. Digital Signature Certificate (DSC)

9.1. Each bidder is required to obtain a Class-II or Class-III Digital Signature Certificate (DSC) for submission of bids from the approved service provider of the National Informatics Centre (NIC) on payment of requisite amount. Details are available at the Website https://wbtenders.gov.in. DSC is issued as a USB e-Token.

9.2. The bidder can search and download Notice Inviting Tender (NIT) and tender document electronically from computer once he logs on to the website <u>https://wbtenders.gov.in</u> using the Digital Signature Certificate.

10. Submission of Bids

Bids are to be submitted online to the website <u>https://wbtenders.gov.in</u> in two folders before the prescribed date and time using Digital Signature Certificate (DSC). The documents to be uploaded should be virus scanned copies, duly digitally signed. The documents will get encrypted (transformed into non readable formats) on uploading. The two folders are:

- 1) Technical Proposal: containing Statutory Cover and Non-statutory cover
- 2) Financial Proposal: containing Bill of Quantity

11. Technical Proposal: Statutory Cover

11.1. Statutory Cover shall contain the following documents:

- A) Tender Documents:
 - i) Application to participate in e-tender as per Section VIII: Tender Application Form

ii) Notice Inviting Tender: Sections 1 to XII

B) Scanned copy of EMD or documents in support of exemption/relaxation claimed for EMD (refer General Conditions of Contract, Clause 4)

12. Technical Proposal: Non-Statutory Cover

12.1 Click the check boxes beside the necessary documents in the My Document list and then click the tab "Submit Non Statutory Documents" to send the selected documents to Non-Statutory folder.

12.2 Next Click the tab "Click to Encrypt and upload" and then click the "Technical" Folder to upload the Technical Documents using: (a) multiple scan (b) black and white scan (c) scan resolution should be within 250.

Sl. No.	Category Name	Sub- Category Description	Detail(s)
А.	Certificate(s)	Certificate(s)	 i. PAN CARD ii. Professional Tax Registration iii. GST Registration along with copy of last return filed iv. ESIC Code Number Allotment v. EPFO Registration
В.	Company Detail(s)	Company Detail	i. Certificate of Incorporation/ Partnership Deedii. Updated Trade Licenseiii. Power of Attorney in favour of signatory of bid
C.	Credential	Credential – 1 Credential – 2	Performance Statement as per format described in General Conditions of Contract, Clause 3; with supporting documents
D.	Documents	Documents	 i. Audited Balance Sheet & Profit & Loss A/c of last 3 years ii. Name, address of banker, account number iii. Bank Solvency Certificate on any date after publishing of this e-tender for an amount equal to 3 (three) months' total bill for supplying full rice diet at rate quoted by bidder at full bed-occupancy of health facility, plus the minimum statutory emoluments payable to the maximum staff deployable at that facility during this period. It should be one time procedure.

12.3. Non Statutory Cover will contain following documents

GOVERNMENT OF WEST BENGAL OFFICE OF THE MEDICAL SUPERINTENDENT CUM VICE PRINCIPAL DEBEN MAHATA GOVERNMENT MEDICAL COLLEGE & HOSPITAL Main Road, P.O & P.S.-: Purulia, PIN: 723 101

Phone: 7407676839,9382498061 Email: pgmchmsvp@gmail.com

iv. Address proof for registered and/or branch office of
bidder, preferably in district of health facility
v. Bidder's Undertaking as per General Instructions to
Bidders, Clause 13 below

13. Bidder's undertaking:

- 13.1 The bidder providean undertakingthat theproprietor/ shall promoter/ directorofthefirm, its employee, partner or representative a renot convicted by a court of law foroffenceinvolvingmoralturpitude inrelationtobusinessdealings such as bribery, of corruption, fraud, substitution bids, interpolation, misrepresentation, evasion, or habitual default in payment of taxes etc. Thefirmdoesnotemployagovernmentservant, who has been dismissed or removed on account of corruption. The firm has not been de-barred, blacklisted by any government ministry/ department/ local government/ PSU etc. in the last two years from scheduled date of opening of this e-tender.
- 13.2 Bid sent by paper/ Fax/ Telex/ Cable/ E mail etc. shall be ignored.

14. Financial Proposal: Bill of Quantity

14.1 The financial proposal (cover) or prices quoted should be uploaded online through the Bill of Quantity (BOQ). The bidder shall quote the price online in the space marked for quoting prices in the BOQ. Only downloaded copies of the BOQ are to be uploaded, virus scanned and digitally signed by the bidder. Please refer Section IX: 'Price Schedule/ Bill of Quantity' for a print copy of the BOQ.

OPENING OF TENDER

- 15. Thepurchaserwillopenthebidsafterthespecifieddateandtimeas indicated in the NIT.
- 16. Authorized representatives of the bidders may attend the tender opening.
- 17. This e-tender shall be evaluated as follows. <u>The EMD of goods/ services to</u> <u>be supplied shall be evaluated first.</u> Then the online technical bids of EMD-qualified bidders shallbe openedandevaluated with reference to parameters prescribed in the e-tender document. After this, the online price bids of of price bids of bidders shall be obtained bidders shall be opened for further evaluation.
- 18. **Opening of Technical Proposals:**

18.1 Technical proposals will be opened by members of the Tender Evaluation Committee electronically from the e-tender website using their Digital Signature Certificates (DSCs).

18.2 In the Technical Proposal, the Cover (folder) for Statutory Documents will be opened firstand if found in order, the cover (folder) for Non-Statutory Documents will be opened.

18.3 IF ANY DOCUMENT REQUIRED TO BE SUBMITTED FOR e-TENDER BY THE BIDDER IN HIS TECHNICAL PROPOSAL IS NOT SUBMITTED OR IS FOUND TO BE DEFICIENT IN ANY MANNER AT ANY STAGE AFTER OPENING OF BID, THE BID MAY BE SUMMARILY REJECTED.

SCRUTINYAND EVALUATIONOFBIDS

- 19. Basic Principle
- 19.1 Bidswillbeevaluatedonthebasisoftheterms and conditionsalreadyincorporatedinthe e-tenderdocument, basedonwhichbidshavebeenreceivedandtheterms,conditionsetc. mentionedbythebiddersintheirbids.Nonewconditionwillbebroughtinwhile scrutinizingand evaluatingthe bids.
- 19.2 ThePurchaserwillexaminethe bidstodeterminewhethertheyarecomplete,whether any computationalerrorshavebeenmade,whetherrequiredsuretieshavebeenfurnished, whetherthe documents havebeenproperlysigned,stampedandwhetherthe bidsare generallyin order. The bids,whichdonotthemeetthebasicrequirements,areliabletobetreatedasnon– responsive and willbesummarilyignored.
- 19.3 Priortothedetailedevaluationof price bids,thePurchaser willdeterminethe b idtothe substantialresponsivenessof each e-tender d ocument.For purpose of these clauses, a substantially responsive bid is one, which conforms to all the termsandconditionsofthe e-tender documentwithoutmaterialdeviations.Deviationsfrom,or objections or reservations to critical provisions such as those concerning Performance Security, Terms and Mode of Payment; Variation, Delay intheContractor'sPerformance, Liquidated Damages, Termination of Contract, ForceMajeure, Resolution of Disputes, Applicablelaw

etc.willbedeemedtobematerialdeviations.ThePurchaser'sdeterminationofa bid's responsivenessistobebasedonthecontentsofthebiditselfwithoutrecoursetoextrinsic evidence.

- 20. IfaBidisnotsubstantiallyresponsive, it will be rejected by the Purchaser.
- 21.1 Decrypted (transformed into readable format) documents of the non-statutory cover will be downloaded and handed over to the Tender Evaluation Committee. The Committee will evaluate technical proposals as per terms laid down in this e-tender document.
- 21.2 During evaluation the Committee may summon bidders and seek clarification /information or additional documents or original hard copies of documents submitted online. If these are not produced within specified time, the bid proposals will be liable for rejection.
- 21.3 The result of evaluation of technical bids, along with information regarding further steps in evaluation of the tender shall be uploaded online on e-tender website.

22. ComparisonofBids

22.1 Thecomparisonoftheresponsivebidsshallbecarriedouton DeliveryDutyPaid (DDP)consigneesitebasis.

23. Bidder's Capability to Perform the Contract

- 23.1 Thepurchaser, through the above process of bids crutiny and bidevaluation will determine to its satisfaction whether the bidder, whose bid has been determined as the lowest evaluated responsive bid is eligible, qualified and capable in all respects to perform the contract satisfactorily.
- 23.2 Theabove-

mentioneddeterminationwillinteralia,takeintoaccountthebidder'sfinancial, technicalandproduction/

servicecapabilitiesforsatisfyingalltherequirementsofthepurchaseras incorporatedin the e-tender document. Such determination will bebased upon scrutinyand examinationofallrelevantdataanddetailssubmittedbythebidderinitsbidaswellas suchother allied information as deemed appropriate bythe purchaser, including inspection of warehouse/ registered or branch office/ site visit of any current project(s) etc. of the bidder at cost and arrangement of bidder by authorized representative(s) of purchaser.

AWARDOF CONTRACT

24. Purchaser's Right to accept any bidandtoreject any orallbids

24.1 Thepurchaserreservestherighttoacceptinpartorinfullanybidorrejectanyormore bid(s)without assigninganyreasonortocancelthetenderingprocessandrejectall bidsatanytimepriortoawardofcontract,withoutincurringanyliability,whatsoeverto the affected bidder(s).

25. AwardCriteria

25.1 Subject to GIBclause 24above, the contract will be awarded to the lowest evaluated responsive bidder per health facility. The list of successful bidder(s) shall be uploaded online.

26. VariationofQuantities at theTimeofAward, During Currency ofContract

- 26.1 Atthetimeofawardingthecontract,thepurchaserreservestherighttoincreaseordecrease byuptotwentyfive(25)percent,thequantityofgoodsand/ orservicesmentionedinthe relevant section(s)in tender(roundedofftonextwholenumber)withoutany changein theunitpriceand otherterms and conditions quoted by the bidder.
- 26.2 The quantity ofgoodsand/ orservicesmentionedinthe relevant section(s)in tender to be procured may be staggered during currency of the contract.
- 26.3 The purchaser reserves the right to extend the 3 (three) year contract by another 3 (three) months on same terms and conditions at the end of 3 (three) year contract period. Thereafter, the contract may be extended on same terms and conditions for further periods on mutual agreement between purchaser and contractor.

27. NotificationofAward

27.1 Before expiryof the tender validity period, the purchaser will notify the list of successful bidder(s) health online per facility on websites, https://wbtenders.gov.in and www.wbhealth.gov.in. In addition, each successful bidder shall be notifiedinwritingthatitsbidforgoods and/ or services, which have been selected by the purchaser, has been accepted, also briefly indicating therein the essential details like

description, specification and quantity of the goods and/or services and corresponding prices accepted. The successful bidder must furnish to the health facility the required performance security within 15 (fifteen) days from the date of issue of this notification, failing which the EMD will be for feited and the award will be cancelled. Relevant details about the performance security have been provided under GCC Clause 5.

- 27.2 TheNotification ofAward shallconstitute the conclusion of the Contract and the 3 (three) year contract period shall commence from this date of notification.
- 27.3 The successful Bidder shall also physically submit original documents/ duly attested photocopies of all documents uploaded by him online at the time of bidding

28. IssueofContract

- 28.1 Within 7 (seven) days of notificationofaward,the successful bidder will sign the contractform perSectionX with the health facility.
- 28.2 ThePurchaserreservestherighttoissuetheNotificationofAwardconsignee wise.

29. Non-receipt of Performance Security and Contract by the Purchaser/ Consignee.

29.1 Failure of the successful bidder in providing performance securityand/ or signing contractintermsofGIBclauses 27 and 28 aboveshallmakethebidder liableforforfeitureofits EMDandalso,forfurtheractionsbythePurchaser/ Consignee againstitas perthe clause 10 ofGCC: Termination fordefault.

SECTION VIII: TENDER APPLICATION FORM To, The Medical Superintendent cum Vice Principal, Deben Mahata Government Medical College & Hospital Main Road, P.O &P.S:-Purulia, PIN: 723101

Ref: Your e-tender document No. _____dated _____

We, the undersigned have examined the above e-tender document, including amendment/corrigendum number______, dated_____(*if any*), the receipt of which is hereby confirmed. We now offer to supply and deliver the goods and/ or services in conformity with your above referred document for the sum, as shown in the price schedule/Bill of Quantity attached herewith and made part of this bid.

We hereby declare that all data and documents submitted by us in our bid in this e-tender are genuine and true, to the best of our knowledge and belief.

Ifourbidisaccepted, we under take to supply the goods and/ or perform these rvices as mentioned above, in accordance with the delivery schedule and terms and conditions as specified in the e-tender document, including amendment/ corrigendum if any.

Wefurtherconfirmthat, ifour bid is accepted, we shall provide you with a performance security of required amount interms of GCC clause 5, for due performance of the contract.

We agree to keep our bid valid for acceptance as required in the GIBclause 6, orforsubsequentlyextended

period, if any, agreed to by us. We also accordingly confirm to a bid up to the aforesaid period and this bid may be accepted any time before the expiry of the aforesaid period. We further confirm that, until a formal contract is executed, this bid read with your written acceptance there of within the aforesaid period shall constitute a binding contract between us. We further understand that you are not bound to accept the lowest or any bid you may receive against your above-referred tender enquiry.

We confirm that wedo not stand deregistered/banned/blacklisted byanyGovernment Authorities/ Organization/ Institution/ local bodies etc in last two years.

Brief of court/legal cases pending, if any, are following:

We would authorize and request any Bank, person, Firm or Corporation to furnish pertinent information as deemed necessary and/or as requested by you to verify this statement.

(Signature with date)

(Name, designation, seal of authorised personto sign bid for and on behalf of Bidder)



SECTION IX: Price Schedule/Bill of Quantity

(Print copy of BOQ)

Tender Inviting Authority: Department of Health and Family Welfare								
Name of Work: e-Tender For Supply of Cooked Diet for Indoor Patients of Government Health Facilities								
Contract No.	<u>Tender No</u>							
Bidder Name:								
should be u	emplate must not be modified/replaced by the bidder an ploaded after filling the relevant columns, else the bidde for this tender. Bidders are allowed to enter the Bidde	r is liable to						
SI. No.	Item Description [Bidders are requested to quote the percentage rate for administrative charge for supply of cooked diet to indoor patients of the health facility/ facilities after thoroughly going through GCC Clause 6 (six) of this e- tender.]	Percentage (%).						
1	2	7						
1.00	Administrative charge for supply of cooked diet for indoor patients of Deben Mahata Government Medical College & Hospital, Purulia (name of health facility 1)							
2.00	Administrative charge for supply of cooked diet for indoor patients of (name of health facility 2)							
3.00	Administrative charge for supply of cooked diet for indoor patients of (name of health facility 3)							
4.00	Administrative charge for supply of cooked diet for indoor patients of (name of health facility 4)							
5.00	Administrative charge for supply of cooked diet for indoor patients of (name of health facility 5)							
6.00	Administrative charge for supply of cooked diet for indoor patients of (name of health facility 6)							



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7.00	Administrative charge for supply of cooked diet for indoor patients of (name of health facility 7)	
8.00	Administrative charge for supply of cooked diet for indoor patients of (name of health facility 8)	
9.00	Administrative charge for supply of cooked diet for indoor patients of (name of health facility 9)	
10.00	Administrative charge for supply of cooked diet for indoor patients of (name of health facility 10)	

To be uploaded with digital signature of authorized personnel of Bidder

SECTION X: CONTRACT FORM

[to be signed on a stamp paper of denomination of Rs.10/-(ten only) or above]

Name and address of the health facility issuing the contract.....

.....

Contract No	dated		
1. This is incontinuationto	NotificationofAward of Contract No	dated	
against e-tender no.dated		and	subsequent
amendment No, dated	(if any), issued bythe purchaser.		

2. Name and address of the contractor:

3.Contractor's BidNo dated _____ and subsequent communication(s) No dated _____

(ifany), exchanged between the contractor and the purchaser in connection with this e-tender.

- 4.InadditiontothisContractForm,thefollowingdocumentsetc,whichareincludedinthedocum ents mentionedabove,shallalsobedeemedtoformandbereadandconstrued as integral part of this contract:
 - i. The e-tender document no..... dt.....
 - ii. Tender Application Form furnished by the contractor
 - iii. Technical and Financial Bid submitted by the contractor
 - iv. Purchaser's Notification of Award of Contract

The words and expressions used in this contract shall have the same meanings asare respectivelyassigned to the minthe conditions of contract referred to above. Further, the definition s and abbreviations incorporated under clause 1 of Section II: PREAMBLE of the e-tender document shall also apply to this contract.



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5. The briefparticularsofthegoodsand/ orserviceswhichshallbesupplied/providedbythecontractor areas under:

Schedule	Briefdescription of goods/ services	Contract
No.		price

5.2 Financial limit to this contract is Rs.....(contract price)

5.3 Annexure: Documents listed in Clauses 4(i) to 4(iv) above.

Signature, seal, nameandaddress of the purchaser's/ consignee's authorised official)

Received and accepted this contract

(Signature, seal, nameand address of the contractor's executive dulyauthorised to sign on behalf of the contractor)

Section XI: Proforma for Contractor's Monthly Bill

[The proforma for contractor's monthly bill comprises Parts A, B, C, D and E. The monthly bill shall be submitted by contractor to in-charge of health facility. Payment shall be made as per terms laid down in e-tender document, especially GCC Clause 7. G.O. no. HF/MA/1661/4R-06/12 dt.6.9.12 specifies statutory emoluments payable to contractor's staff.]

Contractor's Monthly Bill: Part A:

The diet orders/ requisition slips issued by dietician/ sister-in-charge of ward/ appropriate authority of health facility against the meals claimed as supplied in this bill by contractor shall be attached herewith.

The dietician/ sister-in-charge of ward/ appropriate authority of health facility shall verify this abstract sheet with the requisition slips attached herewith and with the entries in the Indoor Patient Diet Register. After verification, such authorities shall sign/ countersign on the abstract sheet and on the bill submitted by the contractor with certificate that the meals enlisted have duly been served and the indoor patient diet supply service duly rendered satisfactorily by the contractor for the period claimed in the bill.



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Diet Category (1)		Breakfast (2)	Lunch (3)	Evening Tiffin (4)	Dinner (5)	On Admission (6)	Total =Sum of Rate x Qty (for columns 2,3,4,5,6 per row) Rs.
1.Admission	Rate in Rs.	Nil	Nil	Nil	Nil	16.70	
Diet	Qty supplied	Nil	Nil	Nil	Nil	Nil	
2.Diabetic	Rate in Rs.	15.94	23.28	Nil	14.39	Nil	
Diet	Qty supplied			Nil		Nil	
3.Full Fluid	Rate in Rs.	15.92	18.09	Nil	15.92	Nil	
Diet	Qty supplied			Nil		Nil	
4.Full Rice	Rate in Rs.	17.58	24.94	Nil	14.12	Nil	
Diet	Qty supplied			Nil		Nil	
5.Paediatric	Rate in	9.18	12.27	Nil	12.69	Nil	



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Full Rice Diet	Rs.						
	Qty supplied			Nil		Nil	
6.Soft Rice	Rate in Rs.	16.72	22.99	Nil	13.20	Nil	
Diet	Qty supplied			Nil		Nil	
7.Uremic Diet	Rate in Rs.	14.70	18.62	Nil	12.48	Nil	
	Qty supplied			Nil		Nil	
8.Diet for Mentally	Rate in Rs.	18.57	27.43	11.77	15.19	Nil	
challenged Indoor patients	Qty supplied					Nil	
Total value of diet supplied Rs.							

Contractor's Monthly Bill: Part B: Dietary Bill

Sl	Schedule of Payments (2)	Rs.
no		(3)
(1)		
1	Total value of diet supplied as per Abstract Sheet of Part A of Contractor's Bill	
2	Less: Deductions for liquidated damages as per GCC Clause 9 of e-tender	
	document on total value of diet supplied (on Row 1). Kindly annex a separate	
	list	
3	Less: Any other benefits, facilities etc. availed by contractor during the billing	
	period from the health facility, appropriate consumption charges for which	
	shall be deducted from the total value of diet supplied (on Row 1). Kindly	



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	annex a separate list.					
4	Net value of diet supplied [Row 1- (Rows 2+3)]					
5	Administrative Charge @ percent of net value of diet supplied (on Row 4)					
6	GST on Administrative Charge (on Row 5)					
7	Any other Tax imposed by the Govt.					
8	Any other Tax imposed by the Govt.					
9	Gross Dietary Bill (Rows 4+5+6+7+8)					
10	Less: Income Tax deducted at source on Administrative Charge (on Row 5)					
11	Any other deductions					
12	Net Dietary Bill [Row 9- (Rows 10+11)]					
13	Attached documents: i. GST deposit challan for tax claimed in preceding month's contractor' ii. A photocopy of the observations recorded in the Kitchen Insp Register during billing period as per Section III, Clause 8 of e- document. iii. iv	ection				
	iv					

Contractor's Monthly Bill: Part C: Reimbursement of Minimum Statutory Emoluments to Contractor's Staff Deployed at Health Facility

(1. The maximum number of contractor's staff deployed at health facility shall be as per Section III, Clause 11 of e-tender document.

2. Reimbursements shall be made only on submission of documentary evidence by contractor with this bill that he has duly paid/ deposited the reimbursement claims sought by him in the previous month's bill from the health facility.)

S1.	Schedule of Reimbursement	Rate	No. of	Total
No.		(Rs.)	Staff	(Rs.)
				(Col.

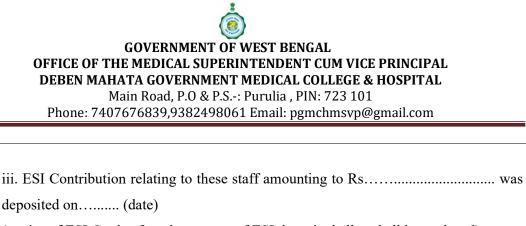


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				3x4)		
(1)	(2)	(3)	(4)	(5)		
1	Minimum monthly wage rate applicable for unskilled					
	workers in the applicable Zone as per Labour					
	Department, Govt. of West Bengal for staffs deployed					
	by contractor at health facility					
2	Monthly EPF Contribution by employer for staffs					
3	Monthly ESI Contribution by employer for staffs					
4	EDLI Contribution and Administrative Charges payable					
	by employer for staffs					
5	Any other statutory emoluments payable by employer for					
	staffs					
6	Total statutory monthly emoluments payable by employer to his staff					
	deployed at health facility (totals of Column 5 of Rows 1+2+3+4+5)					
7	GST on minimum statutory wages, if applicable (on	'Total'	value of			
	Column 5 of Row1)					
8	Gross bill for Reimbursement of Minimum Statutory Emoluments to					
	Contractor's Staff Deployed at Health Facility (Rows 6+7)					
9	Declaration by Contractor:					
	We are complying with all statutory Labour laws in vogue and as amended uptodate,					
	including the Minimum Wages Act.					
10	Other Declarations and attached documents with bill:					
	i. The attendance sheet of contractor's deployed staff at health facility, authenticated					
	daily by a designated staff of contractor and countersigned by an appropriate authority					
	of health facility.					
	ii. The wages of workers were credited to their bank accounts on(date).					
	(The bank statement showing monthly salary paid through ECS to the contractor's					
	deployed staff at health facility in the preceding month.)					



(copies of ESI Cards of workers, copy of ESI deposit challan shall be enclosed)

iv. EPF Contribution relating to these staff amounting to Rs..... was deposited on...... (date)

(copies of EPF numbers of workers, copy of EPF deposit challan shall be enclosed)

v. EDLI Contribution and Administrative Charges payable by employer for staffs
vi. Medical fitness certificates of contractor's deployed staff every six- months
vii.
viii.

Contractor's Monthly Bill: Part D: Total Bill

Total of Dietary Bill as per Part B of Contractor's Monthly Bill	Rs
Total bill for Reimbursement of Minimum Statutory Emoluments to	Rs
Contractor's Staff Deployed at Health Facility as per Part C of Contractor's	
Monthly Bill	
Grand Total	Rs

Part E: Additional compliances to be verified before payment of monthly contractor's bill for the first time by health facility:

i. Performance Security as per GCC Clause 5 has been submitted

ii. Contract form as per Section X has been signed and exchanged by both the parties

iii. Contractor's deployed staff are wearing uniforms and ID Cards, as approved by in-charge of health facility

iv. Medical fitness certificates of contractor's deployed staff submitted

v. Written job-responsibilities of each deployed staff of contractor

vi. List of equipment handed over to contractor by health facility and their current working condition

vii. Cooking is through LPG exclusively

viii. Contractor has applied for License under The Food Safety and Standards Act,2006 to the competent authority

ix. Contract Labour Licence of contractor submitted.

SECTION XII: CHECKLIST FOR BIDDERS

Sl	Checklist
no	

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1	EMD or documents in support of EMD exemption	
2	Tender Application Form	
3	Notice Inviting Tender Sections I to XII	
4	PAN CARD	
5	Professional Tax Registration	
6	GST Registration	
7	ESIC Code Number Allotment	
8	EPFO Registration	
9	Certificate of Incorporation/ Partnership Deed	
10	Trade License	
11	Power of Attorney in favour of signatory of bid	
12	Performance Statement as per format prescribed in GCC Clause 3, with supporting documents	
13	Audited Balance Sheet & Profit/ Loss A/c for last 3 years	
14	Name, address of banker, account number	
15	Bank Solvency Certificate on any date after publishing of this e-tender for an amount equal to 3 (three) months' total bill for supplying full rice diet at rate quoted by bidder at full bed-occupancy of health facility, plus the minimum statutory emoluments payable to the maximum staff deployable at that facility during this period	
16	Address proof for registered and/or branch office of bidder, preferably in district of health facility	
17	Bidder's Undertaking as per General Instructions to Bidders, Clause 13	
18	Price Schedule/ Bill of Quantity (BOQ)	
ND		

N.B. It is the responsibility of bidder to go through the e-tender document to ensure furnishing of all required documents in addition to above, if any.

Please mention the page no. of enclosed documents.

Self-declaration to be submitted by the Competent Bidders at the time of Submission of e-tender

[This is related to the Clause 3.1 of 'Section – VI: General Conditions of Contract' of the bid-document]

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I Shri / Smt,	being an intending bidder,				
hereby declare that I am submitting duly filled in bid document relevant to the e-tender notice					
vide no	dated				
for supply of cooked diet for indoor patients of					
a) The health facility named	only				

Or,

b) The health facilities named i],
 ii],
 and others. (Please specify)

I hereby declare that my credential will be calculated on the sum total of the turn-over of all hospitals where I am submitting my bid.

Yours faithfully,

Name: Enterprise:

Address for communication: Contact details: