

#### **Notice Inviting e-Tender**

## West Bengal Medical Services Corporation Limited Swasthya Sathi GN-29, Salt Lake, Sector-V Kolkata-700091

Phone No (033) 40340308/319 E mail: procurement@wbmsc.gov.in

SUPPLY OF CRITICAL CARE UNIT (CCU) AND HIGH DEPENDENCY UNIT (HDU) EQUIPMENTS IN THE HOSPITALS AND MEDICAL COLLEGES OF THE GOVERNMENT OF WEST BENGAL.

(Submission of Bid through online)

Bid Reference No.: WBMSCL/NIT- 101/2019 Dated-13.11.2019

The following amendment have been made in the tender document,

## <u>Amendment –III</u>

# Section I: Instructions to Tenderers E. Submission and Opening of Bids

#### 35. The following are to be submitted:

#### (ii) Statutory Documents

#### (b) BID – B (Should be in multiple page single PDF file)

| 1 | Model of the equipment offered for (Self Declaration) with Technical Data Sheet   |  |  |  |  |
|---|---|--|--|--|--|
| 2 | Comparative Data Table of the Technical Specifications (Form No. 4 of Section V)  |  |  |  |  |
| 3 | 2 sets of Brochure of the offered product / model.  |  |  |  |  |
| 4 | <ul><li>a) CE ("Conformite Europeene") from European Union notified body having 4 digit identification number (as applicable)</li><li>b) US FDA (as applicable)</li></ul> |  |  |  |  |
| 5 | Pre-requisites of installation [Power (KVA, Phase, Hz) and any other requirement, if any]   |  |  |  |  |

Average Annual Turnover of the Company in medical equipment division during the last 3

Financial Years (2016-17, 2017-18, 2018-19) (in INR) - to be certified by practicing Chartered Accountant as per format given in FORM 10

Form 11: Declaration of Quality Certification of Equipment (as applicable)

Non-statutory document (document uploaded in My Space), Bid – A & Bid – B constitute the technical bid

## <u>Amendment –IV</u>

## Section V. Bidding Forms

#### Form 2: CHECK-LIST

[Please fill in and include with your Bid]

- **Note 1:** It is essential that all documents in hard copy are to be placed before the Committee and arranged in the same sequence as given in the Check List. All the documents should be appropriately flagged.
- **Note 2:** If any document is written in any language other than English, an English translation of the document duly authenticated is to be submitted.
- **Note 3:** All the documents mentioned below are essential for qualifying in the technical evaluation.
- **Note 4:** After opening of the technical bids, if it is found that any of the documents required to be submitted with the bids is wanting, WBMSCL shall reserve the right to allow late submission of such document at its discretion within a specified time limit.

| Non statutory documents to be submitted under My Document |   |               |                       |        |  |  |  |
|---|---|---------------|-----------------------|--------|--|--|--|
| SI.<br>No.  | Activity  | Yes/No/<br>NA | Page No<br>in the Bid | Remark |  |  |  |
| 1   | PAN Card  |               |                       |        |  |  |  |
| 2   | GST registration Certificate  |               |                       |        |  |  |  |
| 3   | License from Government/ Statutory Authority as applicable OR Registration with the Registrar Of Companies, if applicable.  |               |                       |        |  |  |  |
| 4   | Performance Statement Form (For the period of last three calendar years ending December 2018) - Form 7 of Section V Should be supported with documentary evidence (copy of work orders along with proof of payment received / installation certificate) that the bidder have supplied Critical Care Unit (CCU) and High Dependency Unit (HDU) Equipments in Hospitals in India during the last 3 (three) Financial Years (FY) |               |                       |        |  |  |  |
| 5   | Income Tax returns for assessment year (2016-17, 2017-18,   |               |                       |        |  |  |  |

|            | 2018-19)   |               |                    |        |
|------------|--|---------------|--------------------|--------|
| 6          | Tender Form as per Form 1  |               |                    |        |
| 7          | Manufacturer's Authorization (If applicable) as per Form no. 6 of Section V  |               |                    |        |
| 8          | P/L & Balance sheet 2017-2018  |               |                    |        |
| 9          | P/L & Balance sheet 2018-2019  |               |                    |        |
|            | BID - A  |               |                    |        |
| SI.<br>No. | Activity   | Yes/No<br>/NA | Page No in the Bid | Remark |
| 10         | Earnest Money Deposit (EMD) / Bid Security in the form of Online   |               |                    |        |
|            | BID - B  |               |                    |        |
| SI.<br>No. | Activity   | Yes/No/<br>NA | Page No in the Bid | Remark |
| 11         | Model of the equipment offered for (Self Declaration) with Technical Data Sheet  |               |                    |        |
| 12         | Comparative Data Table of the Technical Specifications (Form No. 4 of Section V)   |               |                    |        |
| 13         | 1 sets of Brochure of the offered product / model.   |               |                    |        |
| 14         | a) CE ("Conformite Europeene") from European Union notified body having 4 digit identification number     b) US FDA  |               |                    |        |
| 15         | Pre-requisites of installation [Power (KVA, Phase, Hz) and any other requirement, if any]  |               |                    |        |
| 16         | Average Annual Turnover of the Company in medical equipment division during the last 3 Financial Years (2016-17, 2017-18, 2018-19) (in INR) - to be certified by practicing Chartered Accountant as per format given in <b>FORM 10</b> |               |                    |        |
| 17         | <b>Form 11</b> : Declaration of Quality Certification of Equipment (as applicable)   |               |                    |        |

# <u>Amendment –V</u>

# Section V. Bidding Forms

#### Form 10: TURNOVER CERTIFICATE

I certify that Average Annual Turnover of *(insert the name of the company)* in India in medical equipment division during the last 3 Financial Years 2016-17, 2017-18, 2018-19 is Rs. ............ as per the Audited Accounts of the Organization.

| Signature and seal of Chartered Accountant with | MRN |
|---|-----|
|   |     |
|   |     |