



**NEW MANGALORE PORT AUTHORITY**  
**PORT HOSPITAL PANAMBUR,**  
**MANGALORE- 575 010**  
Tele: 0824- 2407413, Extn: 291/504  
GSTIN: 29AAALN0057A2ZG

Tender No: CMO-24-11/22-23/Generic

Dated: 07.11.2022

**Last Date & Time for Submission : 18.11.2022**

**On or Before: 3.30 PM**

**Date of opening : 18.11.2022**

**Time of opening : 4:00 PM**

**Subject: NMPA Medical Division: Tender for “Procurement of Generic Medicines” by inviting competitive quotations to NMPA Hospital in single cover system - Quotation Requested-Reg.**

Sealed Competitive quotations are invited from Medicine Manufacturers / Dealers / Distributors / Wholesaler / Retailer, (here in after referred as “firm”) addressed to the Chief Medical Officer, Port Authority Hospital for the items given as per Annexure-I, subject to the following terms and conditions. The Bidder shall quote same Combination with strength of medicine / Brand Name / Name of the Manufacturer as specified in the Annexure. Any deviation in this regard will not be acceptable. The quotation should be clearly super scribed with the Tender No. CMO-24-11/22-23/Generic dated 07.11.2022 through Post /Courier or shall be dropped in the Tender Box, kept at Port Hospital, New Mangalore Port Authority, Panambur, Mangalore- 575 010 on or before the due date on 18.11.2022 at 3.30PM **Online quotations are not acceptable.**

**Minimum Qualification Criteria of Firm:**

The firm shall compulsorily submit the following documents:

- a. **Annexure –I** the rates shall be quoted as per medicines wise specified in BOQ (list of items)
- b. Authorization certificate if applicable as per **Annexure-II**.
- c. Valid Drug License / Trade License of the firm
- d. Copy of the PAN & GST certificate of the firm.
- e. Bank details should be furnished as per the **Annexure –III**.

**General Terms & Condition:**


1. The Price quoted shall be valid up to the finalization of the tender process, FOR to NMPA Hospital and no upward revision will be accepted during supply.
2. The quotation shall be in single cover in sealed envelope. The list of the required Medicines are mentioned as per Annexure-I.

3. The L-1 bidder shall be decided on the basis of each Item-wise lowest rate quoted by any of the bidder including GST to arrive /decide lowest one. If more than one bidder becomes L1 for the same medicines, then the order quantity will be equally distributed among them.
4. The supplier has to supply all the ordered quantity of Medicines at a time within 15 days from the receipt of the order.
5. The Medicines supplied are essential to have the latest manufacturing date and the items supplied should have more than 75% of the shelf life period on the date of delivery to NMPA.
6. **Payments:** The invoices shall be in triplicate with advance stamped receipt may also be handed over CMO Port Hospital Panambur for arranging payments. Full payment towards the bill value (as per L1 rate) will be paid within 15 days after receipt of bills along with medicines in full shape; GST shall be shown separately in the tax invoice, which shall be paid on actual. .
7. **Mode of delivery:** All the ordered quantity of Medicines shall be delivered without Part Supply to Port Authority Hospital, NMPA Panambur within 15 days from the date of issuing purchase order. All the aspects of safe delivery Medicines shall be the responsibility of the supplier.
8. In case the quality of Medicines supplied are not in accordance with description / specifications or the supplies are found defective, at any stage these Medicines shall immediately be taken back by the supplier and will have to be replaced within 7 days. The competent authority reserves all rights to reject the Medicines if the same are not found in accordance with the required description / specifications and liquidated damages shall be charged as per clause No.8.
9. **Liquidated Damage:** The Medicines shall be supplied within the stipulated period mentioned in the purchase order to avoid any penalty for the delivery. Compensation of loss on account of late delivery (actually incurred as well as notional) where loss is genuine/pre-estimated and mutually agreed to is termed as the Liquidated damage (LD).  
If the materials are not supplied within the delivery period, then Liquidated Damage will be levied on the undelivered portion at the rate of 0.5% of the value of the material per week or part thereof subject to a maximum of 10% of the delayed goods value.
10. **Expiry & Unutilized Medicines:**  
In case of any of the supplied Medicines for which the consumption has been reduced and if it is not possible to utilize the drug within the period, letter will be

sent to the suppliers and request them to replace the quantity with the fresh batch having longer shelf life at free of cost. After 15 days of the letter for replacement of the stock, if the stocks are not replaced by the supplier and lying in the Main medical store and allowed them till the date of expiry of medicines. In case of the supplier fails to replace with fresh batch, he has to pay the value of returned medicines to NMPA Bank account. If the supplier fails to the above, the value of the quantity of stock expired will be recovered from their future bills and the firm will not be considered for future procurement of Medicines to NMPA.

11. Quotation will be opened on 18.11.2022 at 4.00 p.m. in the office of the Chief Medical Officer, in the Port Authority Hospital Panambur, Mangalore in presence of representative from finance department of NMPA along with the representatives of the participated bidders, who may wish to be present.
12. Firm should submit an undertaking enclosed in the form of Annexure-II, including confirmation of validity of Rate for 30 days after Opening of the Bid till supply of 100 % of the approved quantity.
13. Dispute Clause: The contract shall be governed by the laws and procedures established by Govt. of India. Any dispute relating to the enquiry shall be subject to the jurisdiction of the court at Mangalore only.
14. Quotation should be free from corrections/Eraser. In case there is any unavoidable corrections it should be properly attested, if not quotation will not be considered for evaluation.
15. Quotations should be strictly as per the format mentioned in tender without any deviation. Conditional offers will not be accepted / entertained.
16. Quotation written in pencil will not be considered.
17. **Copy of the Label Specimen shall be enclosed to ensure the strength of Medicines listed in BOQ**

Yours faithfully,

  
Dy. Chief Medical Officer,  
New Mangalore Port Authority Hospital, NMPA  
पत्तन प्राधिकरण अस्पताल / Port Authority Hospital  
नव मंगलूर पत्तन प्राधिकरण  
New Mangalore Port Authority  
पणंबूर, मंगलूर / Panambur, Mangalore - 575  
7/11/22

**Annexure-1**

Sl. No	Name of the Medicines	Brand Name	Name of the Manufacturer	Pack Size	Required Qty	UOM	MRP per Unit / Tab in Rs	Rate per Unit / Tab (Excl. GST) in Rs	GST in %	Rate per Unit / Tab (Incl. GST) in Rs (11=9+10)	Total Amount (incl. of GST) (12=6*11)
1	2	3	4	5	6	7	8	9	10	11	12
1	CHROMIUM+CYNACOBALMIN+SELENIUM+FOLIC ACID+ NIACINAMIDE+ PYRIDOXINE+ZINC TABLETS				1500	Nos					
2	FERROUS FUMERATE(IRON)+FOLIC ACID+VITAMIN B12+ FOLIC ACID CAPSULES				1500	Nos					
3	BIOTIN+AMINOACIDS+MINERALS+GREPE SEED EXTRACT TAB				500	Nos					
4	CHOLICALCEFEROLO 60 K TAB				600	Nos					
5	CALCITROL 0.25 MG CAP				500	Nos					
6	A to Z NS tablet is a combination of Elemental copper 900 MCG, Elemental manganese 2 MG, Elemental selenium 30 MCG, Folic acid 60 MCG, Lycopene 15 MG, Vitamin A 350 MCG, Vitamin B1 0.8 MG, Vitamin B2 0.9 MG, Vitamin B3 12 MG, Vitamin B5 3 MG, Vitamin B6 1.5 MG, Vitamin C 25 MG, Vitamin E 8 MG and Zinc oxide 9 MG				1500	Nos					
7	CYNACOBALAMIN+FERROUS AMMONIUM CITRATE+FOLIC ACID SYRUP 200ML				50	Bottle					

8	Elemental copper 25 MCG+Elemental zinc 5 MG+Iodine 38 MCG+L-Lysine 5 MG+Selenium 10 MCG+Vitamin A 375 MCG+Vitamin B1 0.7 MG+Vitamin B12 0.5 MCG+Vitamin B2 0.75 MG+Vitamin B3 7.5 MG+Vitamin B5 1.25 MG+Vitamin B6 0.5 MG+Vitamin E 2.5 MG /5ML 200ML				50	Bottle								
9	VITMIN E 400MG CAPSULES				2000	Nos								
10	MEYHYLCOBALAMIN+ALPHALIPOIC ACID+BENFOTAMINE+FOLIC ACID+INOSITOL+SELENIUM DIOXIDE+ CHROMIUM CAP				2000	Nos								
11	METHYLCOBALAMINE + ALPHALIPOIC ACID+FOLIC ACID& PYRIDOXINE Hcl CAPSULES				1000	Nos								
12	FERROUS ASCORBATE+ FOLIC ACID+METHYLCOBALAMIN+ZINC SULPHATE TABLETS				1000	Nos								
<b>Cream &amp; Lotion</b>														
Sl. No	Name of the Medicines	Brand Name	Name of the Manufacturer	Pack Size	Required Qty	UOM	MRP per Unit / Tab in Rs	Rate per Unit / Tab (Excl. GST) in Rs	GST in %	Rate per Unit / Tab (Incl. GST) in Rs (11=9+10)	Total Amount (incl. of GST) (12=6*11)			
1		2	3	4	5	6	7	8	9	10	11	12		
13	SUNSCREEN LOTION				50	Bottle								
14	ALOVERA LOTION				100	Bottle								
15	MINOXIDIL 5% SOLUTION				25	Bottle								
16	MINOXIDIL 10% SOLUTION				25	Bottle								

17	KETOCONAZOLE SHAMPOO					50	Bottle							
18	POVIDINE IODINE CREAM					300	tube							
19	POVIDINE IODINE SOLUTION 100ML					50	Bottle							
20	POVIDONE IODINE SOLUTION 500ML					25	Bottle							
21	ORS POWDER					1000	Bottle							
22	POVIDINE IODINE WITH METROGYL CREAM					50	tube							
23	LACTIC ACID+LIQUID PARRAFFIN +PROPYLENE GLYCOL+UREA CREAM					100	tube							
24	VAGINAL WASH SOLUTIONS					50	Bottle							
25	SALICYLIC ACID 6% CREAM 20GM					50	tube							
26	CHOLINE SALICYLATE 8.7%+LIGNOCAINE MOUTH GEL					50	tube							
27	CLOTRIMAZOL+B+BECLAMETHASONE CREAM					100	tube							
28	CLOTRIMAZOLE+BECLAMETHASONE LOTION					50	Bottle							
29	ORS LIQUID					100	Bottle							

Note: Unit =Per Tablet/ Bottle/Tube

Seal & signature of the Bidder

**AUTHORIZATION CERTIFICATE (If Applicable)**

To,

The Chief Medical Officer  
Port Hospital,  
New Mangalore Port Authority  
Panambur -575010

Sir / Madam,

Sub : Authorization for Quoting / Supply of Medicines for quotation :- Reg  
Ref:- Tender No..... dtd.....

I/We \_\_\_\_\_ (Manufacturer) do hereby authorize  
\_\_\_\_\_ (distributor) to quote, supply & receive payments on  
behalf of us in the afore mentioned tender at reference. Further, we confirm that we will  
provide all possible back end support to our authorized representative for timely supply of  
medicines to Port Hospital.

**Contact details of the Authorized firm:-**

- 1) Contact person from the authorized firm.
- 2) Designation.
- 3) Address with Pin code
- 4) E-mail details.
- 5) Contact Number
- 6) GST, PAN & Bank Details.

**Seal & Signature of the Bidder**

**Annexure -III**

**Bank Information for E-Payment**

1	Name and full address of the Bidder	
2	Credit Account No. (Should be full 14 digit)	
3	Account type (SB or CA or OD)	
4	Name of the Bank	
5	Branch (Full address with Telephone No.)	
6	MICR code (should be 9 digit)	
7	Telephone/Mobile /Fax No. of the Bidder	<b>Telephone:</b>
		<b>Mobile:</b>
		<b>Fax:</b>
8	Xerox copy of a cheque should be enclosed	

**Seal & Signature of the Bidder**