



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

Tender No: CMO-29-02/22-23/Allopathic-XIX  
Dated: 27.02.2023  
**Last Date & Time for Submission : 13.03.2023**  
**On or Before: 3.30 PM**  
**Date of opening : 13.03.2023**  
**Time of opening : 4:00 PM**

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

Sealed Competitive quotations are invited from Medicine Manufacturers / Dealers / Distributors, (here in after referred as “firm”) addressed to the Chief Medical Officer, Port Hospital for the items given as per Annexure-I, subject to the following terms and conditions. The Bidder shall quote same medicine as specified in the Annexure. Any deviation in this regard will not be acceptable and same shall not be considered for evaluation. The quotation should be clearly super scribed with the Tender No. CMO-29-02/22-23/Allopathic-XIX dated 27.02.2023 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 13.03.2023 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. Undertaking by the bidders. **Annexure-II**
- c. Authorization certificate if applicable as per **Annexure-III.**
- d. Valid Drug License of the firm
- e. Copy of the PAN & GST certificate of the firm.
- f. Bank details should be furnished as per the **Annexure –IV.**

**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 else Liquidated Damage as per clause no. 9 is applicable.
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.9.
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 requesting them to replace the quantity with the fresh batch having longer shelf life at free of cost. If the stocks are not replaced with fresh batch by the supplier even after sending replacement request and lying in the Main medical store till the date of expiry of medicines, the supplier has to pay the value of expired medicines to NMPA Bank account. If the supplier fails to credit the amount, 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 13.03.2023 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/Erasers. 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.

  
27.02.2023  
Dy. Chief Medical Officer ✓

Port Authority Hospital, NMPA

उप मुख्य चिकित्सा अधिकारी / Dy. Chief Medical Officer  
पत्तन प्राधिकरण अस्पताल / Port Authority Hospital  
नव मंगलूर पत्तन प्राधिकरण  
New Mangalore Port Authority  
पणंबूर, मंगलूर / Panambur, Mangalore - 575 010

**Annexure-1**

Sl. No.	Name of the Medicines	Manufacturer	UOM	Required Qty	MRP per Unit/ tab in Rs.	Rate per Unit/ tab/ Excl. of GST)	GST in %	Rate per Unit/ tab (Incl. of GST) (10=8+9)	Total Amount (Incl. of GST) (11=6*10)	
1	2	3	4	5	6	7	8	9	10	11
1	OMEPRAZOLE 20MG TAB	OMEE 20 MG CAP	ALKEM	Nos	2000					
		OCID 20 MG CAP	ZYDUS							
		OMEZ 20 MG CAP	DR REDDYS							
2	ETORICOXIB 60 MG +THIOPICOLCHICOSIDE 4 MG TAB	ETOSHINE MR TAB	SUN	Nos	600					
		ETRIK MR	ALEMERIC							
		ETOWIN MR	COONA							
3	NITROFURANTOIN 100MG TAB	NIPTAS 100	INTA	Nos	600					
		NIPTAN 100 MG TAB	SUN							
		NIPTY SR 100MG TAB	WANBURY							
4	AMOXYCILLIN 500MG TAB	MOX 500 MG TAB	SUN	Nos	1000					
		ALMOX 500 MG CAP	ALKEM							
		NOVAMOX 500 MG CAP	CIPLA							
		WYMOX 500 MG CAP	ABBOTT							
		SOMPRAZ D 40 MG TAB	SUN							
5	ESOMEPRAZOLE 40MG +DOMPERIDONE 30 MG TAB	ESOFAG D 40 MG TAB	MICRO	Nos	1000					
		NEXPRO D 40 MG CAP	TORRENT							
		ESOMAC D 40 MG CAP	CIPLA							
		CIPCAL 500 MG TAB	CIPLA							
6	ELEMENTAL CALCIUM 500 MG +VIT D3 250MG TAB	TRICUM 500 MG TAB	CORONA	Nos	15000					
		SHELCAL 500 MG TAB	TORRENT							
		OSSOPAN 500 MG TAB	TTK							

7	Chondroitin sulfate 200 MG+Collagen peptide 40 MG+Sodium Hyaluronate 30 MG+Vitamin C 35 MG	TENDOCARE	PHARMED	Nos	1500					
		TENDOMAC TAB	MACLOEDS							
8	REMOGLIFOZIN ETOBONATE 100 MG TAB	REMO-100 MG TAB	GLENMARK	Nos	600					
		SGLTR 100MG TAB	MANKIND							
		METSTAMLO 5/50 MG TAB	DR REDDYS							
		AMLOVAS M 50 MG TAB	MACLOEDS							
9	AMLODEPINE 5 MG+METOPROLOL 50 MG TAB	PROLOMET AM 50 MG	SUN	Nos	1000					
		BENIDIN 4 MG TAB	LLOYD	Nos	1000					
		BENLONG 4MG TAB	MICRO							
10	BENIDIPINE 4 MG TAB	NITROLONG 2.6MG TAB	MANKIND	Nos	100					
		NITROCONTIN 2.6 MG TAB	MODMUNDI							
11	NITROGLYCERINE 2.6 MG TAB	CITRALKA SYP 100ML	PEZIER	Bottle	50					
		ALKALICH SYP	ALKEM							
12	DISODIUM HYDROGEN CITRATE SYP	CIPLADINE 100 ML GARGLE	WIN MEDICARE							
		WOKADINE 50ML GARGLE	DR REDDYS	Bottle	30					
		ASCORIL LS SYP 100ML	GLENMARK							
13	POVIDONE IODINE GARGLE	GRLINCTUS LS 100 ML SYP	FRANCO INDIAN	Bottle	60					
		BROZEET LS 100ML SYP	ALEMBIC							
14	AMBROXYL 30MG+GUAIPHENISIN 50 MG+LEVOSALBUTAMOL 1MG SYP 100ML									

15	PANTAPERAZOLE 40 MG +DOMPERIDON 30 MG TAB	PANKIND D 40MG	MANKIND	Nos	1000						
		PAN D40 +30MG TAB	ALKEM								
		PANTOCID D40 +30MG TAB	SUN								
16	Alpha liporic acid 100 MG+Benfotamine 15 MG+Chromium picolinate 65 MG+Folic acid 1.5 MG+Lutein 5 MG+Mecobalamin 1500 MG+Pyridoxine 3 MG+Zinc oxide 22.5 MG Products	MECOLAB	MEDLAB	Nos	5000						
		CYNERV TAB	MEDREK								
		ISTAVEL 50	SUN								
17	SITAGLIPTINE 50 MG TAB	SLAGLIDE 50	ABBOTT	Nos	1500						
		SITAMAX 50 MG	AJANTA								
		STALIX 50	TORRENT								
		SITAZIT 50	GLENMARK								
		LUPIST 50	LUPIN								
		REPOETTIN 4000 PFS	SERUM INDIA								
18	ERYTHROPOETIN 4000 IU 0.4ML PFS	EPOCEPT 4000 PFS	LUPIN	Inj	25						
		EPORISE 4000 PFS	ZUVENTUS								
		SINAREST PLUS 75 ML SYP	CENTAUR								
19	CPM 2 +PARCETAMOL 250+PHENYLEPHRINE 5+SODIUM CITRATE 60 MG SYP	WIKORYL DS 60 ML SYP	ALEMbic	Bottle	50						

20	CITRIZINE 5 MG SYP	ALERJUD 60 ML SYP	CIPLA	Bottle	44					
		CETZINE SYP 60 ML	DR REDDYS							
		CZ-3 60 ML SYP	LUPIN							
		CETRIZ 60ML SYP	ALKEM							
		ALLERCET 60 ML SYP	MICRO							
21	PARACETAMOL 125 MG SYP	PYRIGESIC 120 MG 60 ML SYP	EAST INDIA	Bottle	50					
		CALPOL 120 MG 60 ML SYP	GSK							
		DOLO 120 MG 60ML SYP	MICRO							
22	SYP AMOXYCILLIN 250 MG/60 ML	MOX READY MIX 250 MG/60 ML SYP	SUN	Bottle	35					
		NOVOMOX 250/60ML	CIPLA							
		JALRA 50 MG TAB	USV							
		GALVUS 50 MG TAB	NOVARTIS							
23	VILDAGLYTINE 50 MG TAB	JALRA MET 50/500	USV	Nos	1500					
		GALVUS MET 50/500	NOVARTIS							
		SILODAL D 8 MG	SUN							
25	SILODOSIN 8 MG+ DUTASTERIDE 0.5 MG TAB	RAPILIF D 8 TAB	IPCA	Nos	1000					
		SILODAL D 4 MG TAB	SUN							
26	SILODOSIN 4 MG DUTASTERIDE 0.5 MG TAB	RAPILIF D 4 TAB	IPCA	Nos	500					
		AB FLO 1000 tab	LUPIN							
		AB PHYLLIN 100 tab	SUN							
27	ACEBROPHYLLIN 100 MG TAB			Nos	1000					

28	ACEBROPHYLLIN 200 TAB	ABFLO 200	LUPIN	Nos	1000							
		ABPHYLLIN 200	SUN									
29	THYROXIN SODIUM 100 MCG	THYRONORM 100 MG TAB	ABBOTT	Nos	50							
		ELTROXIN 100 MCG	GSK									
		THYROX 100 MCG	MACLOEDS									
		THYRONORM 75 MG TAB	ABBOTT									
30	THYROXIN SODIUM 75 MCG	ELTROXIN 75 MCG	GSK	Nos	30							
		THYROX 75MCG	MACLOEDS									
		THYRONORM 50MG TAB	ABBOTT									
31	THYROXIN SODIUM 50 MCG	ELTROXIN 50 MCG	GSK	Nos	30							
		THYROX 50MCG	MACLOEDS									
		THYRONORM 25MG TAB	ABBOTT									
32	THYROXIN SODIUM 50 MCG	ELTROXIN 25MCG	GSK	Nos	30							
		THYROX 25MCG	MACLOEDS									
		DIGENE 200 ML SYP	ABBOTT									
33	ANTACID SYP	GELUSIL SYP 200 ML	PFIZER	Bottle	100							
		DIGECAINE 200 ML SYP	ABBOTT									
34	ALUMINIUM HCL+MAGNESIUM HYDROXIDE+OXETACAIN E GEL 200 ML SYP	MUCCAINE GEL	PFIZER	Bottle	60							



35	BROMEHEXINE 2-GUIPHENISIN 50+MENTHOL+ TERBUTALIN SYP120ML	ASCORIL SYP	GLENMARK	Bottle	100					
		ALKOF 100 ML SYP	ALKEM							
36	CPM2+DEXTROMETHORP HAN+PHENYLEPHRINE SYP	ALEX S/F SYP 120 ML	GLENMARK	Bottle	120					
		CHERICOF SYP	SUN							
		DYNAGLIP T M 20/500	MANKIND							
37	TENIGLIPTTYN 20+METFORMIN 500	TENIPRIDE 20/500	MICRO	Nos	1500					
		GLYPTEN M 20/500	FRANCO INDIAN							
		OTRIVIN NASAL SPRAY ADULT	GSK							
38	OXYMETAZOLIN NASL SPRAY	NASIVON NASAL SPRAY ADULT	MERCK	Bottle	60					
		AMLONG 2.5 MG TAB	MICRO							
39	AMLODEPIN 2.5 MG TAB	AMLOKIND 2.5 MG TAB	MANKID	Nos	3000					
		AMLP 2.5 MG TAB	CIPLA							
		AMLODAC 2.5 MG	ZUVENTUS							
		CHLACAR 10 MG TAB	LB CHEMICALS							
40	CILINDIPINE 10 MG TAB	CINOD 10	AIANTA	Nos	6000					
		ATORVA 10	ZYDUS							
		ATOCOR 10	DR REDDYS							
		AZTOR 10	SUN							
41	ATORUVASTATIN 10 MG TAB	AVAS 10	MICRO	Nos	4500					

42	ATORVASTATIN 20 MG TAB	ATORVA 20	ZYDUS	Nos	3000																	
		ATOCOR 20	DR REDDYS																			
		AZTOR 20	SUN																			
		AVAS 20	MICRO																			
		ATORVA 40 MG	ZYDUS																			
43	ATORVASTATIN 40 MG	ATORVA 40	DR REDDYS	Nos	1000																	
		AZTOR 40	SUN																			
		AVAS 40	MICRO																			

**SINGLE SOURCE MEDICINES**

1	VITAMIN E 200MG +LEVOCARTIN 150MG TAB	EVION LC TAB	MERCK	Nos	2000														
2	GLIPIZIDE 5 MG+METFORMIN 500 MG TAB	GLYNASE MF TAB	USV	Nos	10000														
3	PROPRANALOL 40 MG CAP	BETACAP TR 40CAP	SUN	Nos	500														
4	VITAMIN B1+B6+B12 TAB	NEUROBION FORTE TAB	P&G	Nos	9000														
5	ACETYLSALICYLIC ACID 75 MG TAB	ECOSPRIN 75 MG TAB	USV	Nos	7000														
6	ACETYL SALICYLIC ACID 150 MG TAB	ECOSPRIN 150MG TAB	USV	Nos	3500														
7	ITOPRIDE 50 MG TAB	GANATONE 50 MG TAB	ABBOTT	Nos	500														
8	ITOPRIDE 150 MG TAB	GANATONE OD TAB	ABBOTT	Nos	500														
9	ITOPRIDE 150 MG +PANTAPERAZOL 40 MG TAB	GANATONE TOTAL	ABBOTT	Nos	500														

10	TAMSULOSIN 0.4+DUTASTERIDE 0.5 MG TAB	VELTAM PLUS	INTAS	Nos	1200					
11	BACTRACIN ZINC400+NEOMYCIN 3400+POLYMYXIN B 5000U CREAM 30 GM	NEOSPORIN SKIN 30 GM OINT	GSK	Tube	100					
12	LIQUID PARAFIN6MAGNESIUM HYDROXIDE+SODIUM PICOSULPHATE 200 ML SYP	CREMAFFIN PLUS 200 ML SYP	ABBOTT	Bottle	100					
13	ISOSORBIDE DINITRATE 5 MG TAB	SORBITRATE 5 MG TAB	ABBOTT	Nos	2500					
14	ISOSORBIDE DINITRATE 10 MG TAB	SORBITRATE 10MG TAB	ABBOTT	Nos	2500					
15	CPM 2 MG+BROMEXIN 4MG+GUAIPHENISIN 50 MG SYP	CHESTON 100 ML SYP	CIPLA	Bottle	100					
16	DOMPERIDONE 1 MG SYP	DOMSTAL 30ML SYP	TORENT	Bottle	30					

**Seal & Signature of the Bidder**

## Annexure- II

### UNDERTAKING

To,

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

1. I/We \_\_\_\_\_ do hereby confirm that, the rates quoted at sl. No.8 in the Annexure I is excluding GST. However, if at all I/we have quoted rates Inclusive of GST @column no.8, NMPA shall have the right to reject my bid without seeking any clarifications.
2. I / we here by confirm that the Rates Quoted in Annexure-I will be valid till supply of 100% of the approved quantity.
3. I / we have not supplied the Medicines lesser than this rate to any Government/Semi government/Reputed Private organizations.
4. I/ we hereby confirm that, there is no pending case with the police against the Proprietor/firm/partner or the Company (Agency). I / we have not convicted / blacklisted in the past 5 Years.
5. I / we undertaking that In case of any of the supplied Medicines for which the consumption has been reduced and if it is not possible to utilize the Medicines within the period, we agreed to replace the quantity with the fresh batch having longer shelf life at free of cost, within 30days after receipt of letter/information for replacement of the stock, I/we also agree if the stocks are not replaced by us ,we agree that we will pay the value of the returned medicines to NMPA Bank Account.
6. I / we hereby confirm the acceptance of all the conditions of the Tender Document/ RFQ.

**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**

**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**