



NEW MANGALORE PORT AUTHORITY
MEDICAL DEPARTMENT
PANAMBUR, MANGALORE – 575 010
Tele : 0824 – 2407948/2407413
Extension: 0824-2887294

RFQ No: CMO-30-03/22-23/Ayur

Dated: 30.03.2023

Last Date & Time for Submission: 13.04.2023

On or Before: 3:30 PM

Date of opening : 13.04.2023

Time of opening : 4:00 PM

Subject: NMPA Medical Division: “Procurement of Ayurvedic Medicines” to Port Authority Hospital through single cover system - Quotation Requested-Reg.

Sealed Competitive quotations are invited from Ayurvedic Medicine Manufacturers / Dealers /Distributors/ Retailers (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 medicine as specified in the Annexure. Any deviation in this regard will not be acceptable and the quote for that particular medicine shall not be considered for evaluation. The quotation should be clearly super scribed with the RFQ No. CMO-30-03/22-23/Ayur dated 30.03.2023 through Post /Courier or shall be dropped in the Tender Box, kept at Port Authority Hospital, New Mangalore Port Authority, Panambur, Mangalore- 575 010 on or before the due date on 13.04.2023 at 3.30PM. **Online quotations are not acceptable**

Minimum Qualification Criteria of Firm:

The firm shall compulsorily submit the following documents along with the quotation:

1. Valid Drug License of the Bidder
2. Copy of PAN & GST certificate of the Bidder

Other Required Document as follows:

1. All columns shall be compulsorily filled in Item wise as per BOQ
2. Undertaking as per Annexure-I
3. Authorization certificate if applicable as per **Annexure-II**.

If Manufacturer is participating in the bidding process & they wish to any Authorize Distributor to supply the medicines & receive payments on behalf of them, then Authorization Certificate as per Annexure-II shall be enclosed along with the Bid.

4. Bank details should be furnished as per the **Annexure –III**.

General Terms & Conditions:

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 the tenure of the contract.


2. The quotation shall be in single cover in sealed envelope. The lists of the required Ayurvedic Medicines are mentioned as per BOQ.
3. The L-1 bidder shall be decided on the basis of Item-wise lowest rate quoted by the bidder including GST. 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 Ayurvedic Medicines within 15 days from the receipt of the order else Liquidated Damage as per clause no. 9 is applicable.
5. The Ayurvedic Medicines supplied shall have the latest manufacturing date and the items supplied should have more than 75% of the shelf life period as on the date of delivery to NMPA.
6. **Payments:** The invoices shall be in triplicate with advance stamped receipt, shall 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 Ayurvedic Medicines shall be delivered to Port Authority Hospital, NMPA Panambur within 15 days from the date of issuing purchase order. All the aspects of safe delivery of Medicines to NMPA Port Hospital shall be the responsibility of the supplier.
8. In case the quality of Ayurvedic 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 till the Medicines are replaced as per the tender specifications.
9. **Liquidated Damage:** The Ayurvedic 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 Ayurvedic 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. Within 30days after receipt of letter/information for replacement of the stock, 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 **13.04.2023** 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-I, including confirmation of validity of Rate 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.


Dy. Chief Medical Officer ✓
Port Authority Hospital, NMPA

BOQ									
Sl. No	Name of the Medicine	Pack size	Required Qty	UOM	MRP per unit/ tab incl. of GST	Rate per unit/ tab (excl. of GST)	GST in %	Rate per unit/ tab Incl. of GST	Total amount (Incl. of GST)
1	2	3	4	5	6	7	8	9	10
1	ABHAYARISTA	450ML	20	Bottle					
2	AJAMODAKA ARKA (OMA WATER)	100ML	20	Bottle					
3	ALOES COMPOUND	100'S	1000	Nos					
4	AMRUTHOTHARA KASAYA	200ML	20	Bottle					
5	ANU THAILA	10ML	10	Bottle					
6	ARIMEDADI THAILA	200ML	20	Bottle					
7	ASANA VILWADI THAILA	200ML	20	Bottle					
8	ASHWAGANDHA CHOORNA	50GRM	30	Bottle					
9	ASHWAGANDHA LEHYA	500GM	10	Bottle					
10	ASHWAGANDHARISTA	450ML	30	Bottle					
11	AVIPATTIKAR CHOORNA	25GM	30	Bottle/ Sachet					
12	BALA THAILA	200ml	60	Bottle					
13	BALAJEERAKADI KASAYA	200ML	20	Bottle					
14	BALARISTA	200ML	30	Bottle					
15	BALASHWAGANDHA LAKSHADI THAILA	200ML	20	Bottle					
16	BILWADI LEHYA	200GRM	30	Bottle					
17	BRAHMI VATI	10'S	300	Nos					
18	BRINGAMALAKA THAILA	200ML	50	Bottle					
19	CHANDANADI THAILA	200ML	50	Bottle					
20	CHANDRAPRABHA VATI	10'S	1000	Nos					
21	CHARMA RAKSHA OINT	12GRM	50	Tube					
22	CHYAWANPRASH	200GRM	30	Bottle					
23	DASHAMOOLA KASAYA	200ML	30	Bottle					
24	DASHAMOOLA KATUTRAYA KASHAYA	200ML	20	Bottle					
25	DASHAMOLARISTA	450ML	30	Bottle					
26	DASHANG LEPA	100GRM	20	Bottle					
27	DHANWANTHARA 101 DROPS	10ML	30	Bottle					
28	DHANWANTHARA GULIKA	10'S	2000	Nos					

29	DIABECON TABLET	60'S	600	Nos					
30	DRAKSHARISHTA	450ML	20	Bottle					
31	EKANGA VEERA RASA	40'S	400	Nos					
32	ELANEER KUZHAMBU	10ML	10	Bottle					
33	GANDARVASTADI THAILA	100ML	30	Bottle					
34	GANDHAKA MALAHARA	10GRM	20	Bottle					
35	HARIDRA KANDA	50GRM	10	Bottle					
36	HIMASAGARA THAILA	200ML	20	Sachet					
37	JATAMAYADI CHOORNA	25GRM	50	Bottle/ Sachet					
38	KARPASATHYADI THAILA	200ML	50	Bottle					
39	KARPOORADI CHOORNA	25GRM	30	Sachet					
40	KARPOORADI THAILA	200ML	30	Bottle					
41	KEETHAKIMOOOLADI THAILA	200ML	20	Bottle					
42	KOFLET SYP	100ML	20	Bottle					
43	KOOSMANDA RASAYAN	200GM	10	Bottle					
44	KUMKUMADI THAILA	5ML	80	Bottle					
45	LAKSHADI THAILA	200ML	20	Bottle					
46	LIV 52 TAB	100'S	1000	Nos					
47	LOHASAVA	450ML	10	Bottle					
48	M2 TONE SYR	200ML	10	Bottle					
49	MAHA MASHA THAILA	200ML	10	Bottle					
50	MAHA RASNADI KASAYA	200ML	50	Bottle					
51	MAHA YOGARAJA GUGGUL	40'S	1200	Nos					
52	MENTAT TABLET	60'S	600	Nos					
53	MUSHTAKARIHSTA	200ML	20	Bottle					
54	NEELIBRIGANDI THAILA	200ML	90	Bottle					
55	NEERI TAB	30'S	300	Nos					
56	PATYAKSHADATHRA YADI KASAYA	200ML	20	Bottle					
57	PIGMENTO OINT	50GRM	10	Tube					
58	PINDA THAILA	200ML	50	Bottle					
59	PIPPALYASAVA	450ML	30	Bottle					
60	PROVAS TABLET	10'S	480	Nos					
61	RAJAPRAVARTHINI VATI	30'S	300	Nos					
62	RASNA ERNADI KASAYA	200ML	20	Bottle					
63	RASNADI CHOORNA	25GRM	30	Bottle/ Sachet					
64	RUMALAYA OINTMENT	25GRM	30	Tube					

65	RUMALAYA FORTE	30'S	1800	Nos					
66	RUMALAYA LINIMENT	60ML	50	Bottle					
67	SAHACHARADI KASAYA	200ML	30	Bottle					
68	SAHACHARADI THAILA	200ML	50	Bottle					
69	SAPTASARA KASAYA	200ML	20	Bottle					
70	SARIVADYASAVA	200ML	10	Bottle					
71	SHANKHA VATI	40'S	400	Nos					
72	SHALAKI MR TAB	10'S	300	Nos					
73	SITOPALADI CHOORNA	60GRM	20	Bottle/ Sachet					
74	SWASAKASA CHINTAMANI	10'S	100	Nos					
75	TALISADI CHOORNA	100GRM	30	Bottle/ Sachet					
76	THUNGADRUMADI THAILA	200ML	20	Bottle					
77	TRIPHALA CHOORNA	60GRM	50	Nos					
78	TRISHUN TAB	6'S	240	Nos					
79	VYOSHADI VATAKA	50GRM	10	Bottle					
80	VAISHWANARA CHOORNA	100GM	20	Bottle					

Signature of the Authorized Person with seal

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 column. No.8 in the BOQ is excluding GST. However, if at all I/we have quoted rates Inclusive of GST @column no.10, NMPA shall have the right to reject my bid without seeking any clarifications.
2. I / we here by confirm that the Rates Quoted in BOQ 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/ RFQ 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	Telephone:
		Mobile:
		Fax:
8	Xerox copy of a cheque should be enclosed	

(Signature of the Authorized Person with seal)