# कार्यालय जिला स्वास्थ्य समिति एवं सदस्य सचिव मुख्य चिकित्सा एवं स्वास्थ्य अधिकारी श्रीगंगानगर (राज.)

क्रमांक:- NHM/SGNR /25-26/10 735-/0740

दिनांक :- 16/6/25

# निविदा सूचना संख्या NHM/SGNR/07/25-26

जिला स्वास्थ्य समिति, एवं सदस्य सचिव मुख्य चिकित्सा एवं स्वास्थ्य अधिकारी, श्रीगंगानगर द्वारा वितिय वर्ष 25–26 हेतु समवर्ती अंकेक्षक की नियुक्ति की जानी है। अतः इच्छुक सी.ए. फर्म से ऑफलाईन संलग्न आर.एफ.पी. के अनुसार निविदाये आमिंत्रत की जाती है।

| <b>क.</b> सं. | विवरण   | अनुमानित<br>राशि | बोली प्रतिभूति<br>राशि | निविदा<br>प्रपत्र<br>शुल्क | ऑफलाईन फार्म<br>/ डाउनलोड /<br>विकय प्रारम्म<br>होने की तिथि | फार्म जमा कराने<br>की अन्तिम तिथि<br>एवं समय | तकनीकी बोली<br>फार्म खोले<br>जाने की तिथि  |
|---------------|---|------------------|------------------------|----------------------------|--|--|--|
|               | समिति—एनएचएम,<br>श्रीगंगानगर के<br>समवर्ती अंकेक्षक<br>हेतु वितिय वर्ष<br>25—26 | 50000/-          | 2 प्रतिशत<br>(1000रू.) | 200<br>रूपये               | 17.06.2025 प्रातः<br>11.00 बजे से                            | 24.06.2025 को<br>प्रातः 11.00 बजे<br>तक      | एवं समय<br>24.06.2025<br>सांय 4.00<br>बजें |

- 1. बोली प्रतिभूति राशि 1000/—एवं बोली फार्म शुल्क 200/— रू० का डी०डी०/बैंकर्स चैक जिला स्वास्थ्य समिति, श्रीगंगानगर के नाम से देय होगा। उक्त सभी डी०डी० / बैंकर्स चैक निर्धारित दिनांक 24.06.2025 को प्रातः 11.00 बजे फार्म के साथ इस कार्यालय में जमा कराने होगें, इसके अभाव में बोली पर कोई विचार नहीं किया जायेगा। निविदा फार्म खोले जाने की तिथि को राजकीय अवकाश घोषित हो जाये तो अगले कार्य दिवस को खोली जायेगी।
- 2. बोली की विस्तृत शर्ते कार्यालय के नोटिस बोर्ड से देखी जा सकती है अथवा राजकीय वेबसाईड http://sppp.raj.nic.in पर भी देखी जा सकती है।

NIB CODE -UBN CODE-

> सदस्य सचिव जिला स्वास्थ्य समिति एवं मुख्य चिकित्सा एवं स्वास्थ्य अधिकारी श्रीगंगानगर।

दिनांक :-/६/६/४

क्रमांक:- NHM/SGNR/25-26/10735-10740 प्रतिलिपि वास्ते सूचनार्थ एवं आवश्यक कार्यवाही हेतु :--

श्रीमान् मिशन निदेशक, एनएचएम, जयपुर।

2. श्रीमानं निदेशक वित-एनएचएम, जयपुर।

श्रीमान् जिला कलक्टर एंव अध्यक्ष जिला स्वास्थ्य समिति श्रीगंगानगर।

श्री संयुक्त निदेशक, चिकित्सा एंव स्वास्थ्य सेवाएं जोन बीकानेर, बीकानेर।

नोटिस बोर्ड, कार्यालय हाजा

6. राजकीय वेबसाईट पोर्टल http://sppp.raj.nic.in पर अपलोड हेतु।

सदस्य सचिव जिला स्वास्थ्य समिति एवं मुख्य चिकित्सा एवं स्वांस्थ्य अधिकारी एव स्श्रीगंगानगर्भ

जिला स्वास्थ्य समिति, श्रीगंगानगर

# Request for Proposal (RFP)

For Appointment of Concurrent Auditor for District Health Society, Sri Ganganagar for Audit of all programmes under NHM including flexible pools of NRHM-RCH, NUHM, NDCP and NCD.

FY 2025-26



National Health Mission Sri Ganganagar (Raj)

> मुख्य चिकित्सा एवं स्वास्थ्य आंबदारी एवं सदस्य सचिव निन्ना स्वास्थ्य समिति, श्रीगंगानगर

# REQUEST FOR PROPOSAL (RFP)

District Health Society Sri Ganganagar (Raj), seeks to invite Proposal from Chartered Accountant (CA) firms those are eligible for concurrent audit of District Health Society and all the blocks there under implementing various programs under the National Health Mission Rajasthan for the FY 2025-26

Interested eligible bidders can submit the proposal with the CM&HO Sri Ganganagar. The technical & financial evaluation and all the selection process shall be done by CM&HO at District level.

The details about the background of the auditee, the units to be covered in the audit, scope of work, terms of reference, and eligibility criteria for selection of the CA firm are given in the following paragraphs.

## Section I

## Terms of Reference (ToR)

National Rural Health Mission (NRHM) of the Ministry of Health & Family Welfare (MoHFW) was launched on 12<sup>th</sup> April, 2005 by the Government of India (GOI) to improve medical facilities in the country. Since 2013-14 onwards the NRHM programme has been subsumed under the umbrella programme of the National Health Mission (NHM). NHM is overarching NUHM and also includes Communicable and Non-Communicable Diseases (NCD) as well. The NHM seeks to provide accessible, affordable and quality health care to the population, especially the vulnerable sections. It also seeks to reduce the Maternal Mortality Ratio (MMR) in the country from 167 to 100 per 1,00,000 live births, Infant Mortality Rate (IMR) from 37 to 26 per 1000 live births and the Total Fertility Rate (TFR) from 2.3 to 2.1.

2. One of the visions of the Mission is to increase public spending on health from 1.3% to 2-3% of GDP, with the improved arrangement for community financing and risk pooling. The NHM has provided an umbrella under which the existing Reproductive and Child Health Programme (RCH) (including RCH,Routine Immunization (RI),Pulse Polio Immunization(PPI) and National Iodine Deficiency Disorder Control Programme (NIDDCP)), Health System Strengthening under NRHM (including Other Health System Strengthening,Ayushman Bharat – Health & Wellness Centre (AB-HWC) and Asha Benefit Package (ABP) including facilitator payment,various National Disease Control Programmes (NDCPs) and Non-Communicable Diseases (NCDs)have been repositioned. National Urban Health Mission (NUHM) comprising of

मुख्य चिकिन्या एव स्वास्थ्य अधिकारी एवं सदस्य सचिव

जिला स्वास्थ्य समिति.

Other Health System Strengthening and Ayushman Bharat -Health & Wellness Centre (AB-HWC) has also been added as Submission of National Health Mission.

3. At present the following Programmers/Schemes fall under the National Health Mission:

#### A. NHM-RCH Flexible Pool:

- a) RCH Flexible Pool including Routine Immunization (RI), Pulse PolioImmunization (PPI) and National Iodine Deficiency Disorder Control Programme (NIDDCP).
- b) Health System Strengthening(HSS)under NRHM(viz. Other Health System Strengthening, Ayushman Bharat Health & Wellness Centres (AB-HWCs) and ASHA Benefit Package including facilitator payment) including National Programme for Prevention and Control of Deafness (NPPCD), National Oral Health Programme (NOHP), National Programme for Palliative Care (NPPC), Assistance to State for Capacity building (Burn Injury) and National Programme for Fluorosis(NPF).

# B. Flexible Pool for Communicable Diseases:

- a) National Vector Borne Disease Control Programme (NVBDCP),
- b) National TuberculosisEradication Programme (NTEP),
- c) National Leprosy Eradication Programme (NLEP),
- d) Integrated Disease Surveillance Programme (IDSP).
- e) National Viral Hepatics Control Programme(NVHCP)

# C. Flexible Pool for Non-Communicable Diseases:

- a) National Programme for Control of Blindness (NPCB),
- b) National Mental Health Programme (NMHP),
- c) National Programme for Health Care of the Elderly (NPHCE),
- d) National Tobacco Control Programme (NTCP),
- e) National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS).
- D. National Urban Health Mission (NUHM) Flexible Pool including Other HSS under NUHM and AB-HWC under NUHM.

मुख्य विकित्मा **एव स्वास्थ्य अधिकारी** एक सदस्य सचिव जिला स्वास्थ्य समिति, श्रीगंगः

# 4. Institutional and Funding Arrangements:

For the implementation of the above programmes, MoHFW has required the creation of an Integrated Health Society at the State and District levels (registered as a legal entity at the State and District under Societies Registration Act, 1860). Such integrated State Health Society (SHS) works in close coordination with the Directorate of Health & Family Welfare and District Health Societies (DHSs) work in coordination with the District Collector and District Chief Medical & Health Officer (CM&HO). Program implementation is done through its District Chief Medical& Health Officer's office, Blocks, Community Health Centres (CHCs), Primary Health Centres (PHCs), Sub- Centres (SCs), RogiKalyanSamities (RKS) and Village Health Sanitation&Nutrition Committees (VHSNC). Certain activities may be managed at the State level such as drug procurement, IEC, civil works, training using specialized entities such as SIHFW, IEC Bureau, PWD, the Directorate of Health and Municipal Corporations for the urban health components. In addition, funds are also released from SHS/ DHS to NGOs and private entities under public private participation (PPP) arrangements.

# Funding & Accounting Arrangements:

Funds for the various programs under NHM are transferred from the Pay& Accounts Office of MoHFW to the State Treasuries and then from Treasuries to the SHS functioning in the State. Government of India transfer funds in the form of Grants-in-Aid to State treasuries through RBI on the basis of respective State Programme Implementation Plans (SPIPs) and approved Annual Work Plans which are prepared on the basis of District Health Action Plans (DHAPs) of each of the districts in the State. Under the umbrella of the integrated SHS/DHS each program has separate bank account, separate books of accounts and other financial records as per the requirements of each program and also submit separate financial activity reports at varying frequencies to the respective monitoring units in MoHFW (GOI).

# 5. Financing by Development Partners/ Donors:

Some of the programs of NHM are also supported by development partners such as the Asian Development Bank (ADB), The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) /World Bank, etc. for which credit agreements have been entered into by GOI with the respective Development Partners. Compliance with specific fiduciary requirements of the Development Partners will additionally need to be reported by the auditors. Copies of the legal agreements and other project documents will be provided to the auditors, if needed, by SHS/concerned Programme Division in the State.

गुड्य चिकित्सा एव स्वास्थ्य **अधिकारी** एवं २ अन सच्चिव जिला स्वास्थ्य सीमति, श्रॅंगानगर

## Section II

## Objective of audit services:

The objective of Concurrent Audit would be:-

- a. Ensuring accuracy and timeliness in maintenance of books of accounts;
- b. Tracking of advance ,follow up and settlement on priority basis;
- c. Guarding against advances being shown as expenditure in the FMRs;
- d. Ensuring accuracy in the preparation of monthly/quarterly Financial Monitoring reports, based on the books of accounts;
- e. Ensuring voucher/evidence based payments;
- f. Ensuring timely and accurate submission of financial MIS to the management;
- g. Improving accuracy and timeliness of the financial reporting from State, District & Sub
- h. Improving internal control mechanism of the society.

A number of sub-district entities like Blocks, CHC/PHC, Sub Health Centre in the same order of priority, may be selected by the District Health Society for field visit on a monthly/quarterly basis, and its observation would be incorporated in the respective audit

The objective of the audit of the financial statements of State and District Health Society as well as the Consolidated Financial Statements of the State and District as a whole i.e. Balance Sheet, Income & Expenditure, Receipt & Payment, together with relevant accounting policies, notes to accounts and schedules, Bank Reconciliation Statements, Statement of Funds Position, Reconciliation of Expenditures as per Audited financial statements with the expenditure reported as per the Financial Monitoring Report (FMR) is to enable the auditor to express a professional opinion as to whether:-

जिला स्वास्थ्य सामित, श्रानणनगर

# Section III

# Criteria for Selection of Auditors

- A) The firm must be empanelled with ICAI, without which the proposal of the firn
- B) Intending firms must have Head/Branch office in the District. Firm having office in the district shall be preferred. In case no application is received from a firm having office in the district, firm which office in the state shall be considered.
- C) CA firms eligible for audit: CA firms those are empaneled with ICAI .On clearance of Technical proposal, the auditor will be finalized on the basis of Financial Bids. In this regard, firms have to submit the details about the firm as per Form T-2.
- D) Audit Fees and TA/DA: The firms those are interested to be appointed will have to quote consolidated audit fees including expenses on TA/DA and Taxes.
- E) In case same audit fee is quoted by two or more CA firms, the selection of auditor shall be done considering the following factors (priority-wise): -
- Past Experience in handling Government Contracts & Conduct of the firm; and (i) (ii)
- Supporting Documents for Eligibility Criteria: F)
  - For A & B above, the firms must submit self-attested copy of certificate issued (i)
  - The firms or any partners of the firms should not be the black listed by the (ii) Central Govt./any state Govt. /any PSU /any other organization in respect of any assignment or behavior/attitude. Self attested declaration on letter head is required to be submitted in this regard by authorized person of the firm.

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## **Section IV**

## Terms of appointment and selection of the Auditor

- The Concurrent audit appointed once can be repainted /re-appointed for a maximum term
  of two financial year i.e. current year and next year. However, the Contract would be
  awarded for only one financial year at a time and may be renewed for the next financial
  year only on the basis of review of the auditor's performance by the District office.
- It will be the responsibility of the auditor to assist in preparation of the financial statement of the allotted district districts on a monthly basis.
- A record of the visiting audit team shall be maintained at the concerned facility and a
  certificate has to be obtained in support of its visit indicating the name & designation of
  the term members and the date/period of visit, from the head of that facility
- The audit reports should also cover qualitative issues emerging from the audit other than the financial statements.
- Check lists should be thoroughly filled and each aspect should be adequately elaborated observations reported on accounting ad internal control issue should be probpely detailed and substantiated.
- An executive summary should be incorporated in each report providing information on aspects like quality of FMRs, maintenance of books of accounts, advances, compliance with audit observations etc.

#### Key Timelines

The key timelines which need to be adhered to are summarized below:

| Activity  | Timeline  |  |
|---|---|--|
| Carrying out concurrent audit   | Monthly   |  |
| Submission of Audit Report by Auditor to DHS  | 10th of the next month                                    |  |
| Submission of soft copy of the consolidated Executive summary & Action Taken Report to the Director, Finance, NHM, Jaipur | Quarterly- by 20th of the first month of the next quarter |  |

#### Remuneration

- Audit fee will be paid on quarterly basis by DHS for District & Blocks Audit only after receipt of quarterly audit report on the basis of specific work completed by the audit firm.
- In case the appointment does not happen within the first quarter the fees would be appropriately reduced as per the decided scope and coverage.

मुङा विकित्सा एव स्वास्थ्य अधिकारी एवं सदस्य सचिव जिला स्वास्थ्य समिति, श्री नेपा

Audit reports should be submitted on a quarterly basis. In case of delay in submission of the audit report without adequate justification, 10% of the stipulated monthly fees will be deducted as penalty for each quarterly of delay. Part of a month shall be taken as full month for the purpose of deduction of penalty. Coverage:

Concurrent Auditor should ensure that the DHS and all blocks there under are covered during the year.

Auditor needs to ensure that all block office (CHC) in the district are physically visited every month and associated records are verified as per the scope.

#### Reports

The reports at District level should include consolidated report of RCH, Additionalities under NHM, Immunization and NDCPs. In addition, it should also include instances of misappropriation/unauthorized diversion of funds as noticed

Action Taken Report submitted by the District Accounts Manager should be vetted by the concerned Concurrent Auditor and sent along with his observations to the Director (Finance) on a quarterly basis.

# Contents of Audit Report:

# Concurrent Audit Report should contain the following financial statements and

- Duly filled in Checklist & Executive Summary provided in the guidelines.
- Audited Trial Balance
- Audited Receipts & Payments A/c
- Audited Income & Expenditure A/c
- Balance Sheet
- Audited Statement of Expenditure
- Observations and Recommendations of the auditor (including observations on blocks visited)
- Action Taken by District Health Society on the previous audit observations, along Bank Reconciliation Statement
- List of advances
- Executive summary report.

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## Section V

# Guidelines for Submitting the Proposals & Evaluation of Bid:

#### A. General Guidelines:

Eligible firms are required to submit the proposal (RFP) in two separate & sealed cover/envelops duly super scribed on Top as proposal for Concurrent Audit & Last date 23.06.2025 at 11.00A.M. as per the guidelines and formats detailed out in the following paras:

- i. The Technical Proposal shall be placed in a sealed envelope clearly marked "TECHNICAL PROPOSAL". Similarly, the Financial Proposal shall be placed separate sealed envelope clearly marked "FINANCIALPROPOSAL" followed by the name of the assignment and With "DONOTOPENWITHTHETECHNICAL PROPOSAL." The envelopes containing the Technical and Financial Proposals both shall be placed in another envelope and sealed. This envelope shall bear the address, reference number and title of the Assignment, and be clearly marked "DONOTOPEN, EXCEPTIN PRESENCE OFTHEOFFICIALAPPOINTED". The Society shall not be responsible for misplacement, loss or premature opening if the outer envelope is not sealed and/or marked, as instructed. This circumstance may provide a case for Proposal's/ bid's rejection. If the Financial Proposal is not submitted in a separate sealed envelope duly marked as indicated above, this shall constitute grounds for declaring the proposal non- responsive/
- ii. Association with Other firms & Quality Assurance: Only single firm is eligible to apply. Association/Joint ventures of two or more firms are not eligible to apply.
- iii. Interested firms should submit their proposals to DHS. The District Audit Committee shall evaluate the Technical proposal and finalize the same for opening of financial bids of eligible firms.
- iv. All agencies must comply with the Technical Specification, General Conditions and Format/Requirements for Technical and Financial proposal.
- v. Financial proposals submitted by the firm should be valid for 6 months from

गुष्य विकित्सा एव स्वास्थ्य अधिकारी एवं सदस्य सचिव विकास समित, श्रीगंगानगर the date of submission of the proposal by the firm.

- vi. All blank spaces in the financial proposal must be filled in completely where indicated, either typed or written in ink.
- vii. DHS reserves the right to accept or reject any proposal without giving any explanation and can change the evaluation criteria as per its requirements in the interest of the organization.
- viii. All bid documents should be spiral bind with page no. & signature on each page.

### B. Technical Proposal:

- I Letter of Transmittal (Form T-l)
- II Details of the Firm along with Details of Partners (Form T-2),
- III Brief of relevant experience (Form T-3)

#### C. Financial Proposal:

The financial bid shall be submitted as per Form F-l.

### Minimum Fees:

In compliance of the guideline issued by ICAI under Guideline No-1-CA(7)/03/2016 dated 7/4/2016 the minimum fees for this assignment is fixed as per T-2 The amount is inclusive of all charges except GST which shall be paid extra as applicable. Any bid with a quotation less than the minimum fees shall be rejected.

## Award of Contract:

Financial Proposals of technically, eligible firms shall be opened in front of the District Audit Committee. The contract would be awarded to the firm declared successful on the basis of financial proposals i.e. on L1 basis by DHS. The concerned DHS shall intimate Director (Finance), National Health Mission, Jaipur (Raj) regarding compliance of the prescribed procedure in the selection. The firm should execute a Contract with therespective District Health Society (DHS) within 1 week of the award.

मुख्य चिकित्सी एवं प्वास्थ्य अधि**कारी** एवं सदस्य सचिव जिला स्वास्थ्य समिति, श्रीगंगानग**र**  In case of tie, the successful bidder shall be selected on the basis of following:-

- Experience of audit of Externally/Internally Aided Projects/Social Sector Projects/Govt organizations (other than Audit of Charitable Institutions & NGOs) The firm having more experience shall be selected. If could not be decided on the basis of above, then:-
- Firm's existence (in number of years)-The firm in existence for more number of years shall be selected.

Even if the decision could not be made then:-

• Average annual turnover of the firms during last three years shall be taken into account for selecting the successful firm.

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## **Letter of Transmittal**

To,

The CM&HO, District Health Society, Sri Ganganagar

Sir,

We hereby declare that all the information and statements made in this Proposal are true and accept that any mis-interpretation contained in it may lead to our disqualification.

The Fees quoted by us is valid till six months from the date of submission of the proposal. We confirm that this proposal will remain binding upon us and may be accepted by you at any time before the expiry date.

Prices have been arrived independently without consultation, communication, agreement or understanding (for the purpose of restricting competition) with any competitor.

We agree to bear all costs incurred by us in connection with the preparation and submission of the proposal and to bear any further pre-contract costs.

We understand that District Health Society Sri Ganganagar is not bound to accept the lowest or any proposal or to give any reason for award, or for the rejection of any proposal.

| I confirm that I have authority submit the proposal and to negotiate on its | ofbehalf. | to |
|---|-----------|----|
|   |           |    |

Yours faithfully,

मुख्य चिकिन्या एव ग्वास्थ्य अधिकारी एवं सदस्य सचिव जिला स्वास्थ्य समिति, श्रीगंगानगर

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# Format for Technical Proposal

| SI    | Particular/Details  | f the Fi    |
|-------|---|-------------|
| No    | PARTICULARS   | of the Firm |
| 1     | Name of the Firm  |             |
| 2     | Addresses of the Firm:  |             |
| Table | Head Office   |             |
|       |   |             |
|       | Mobile No. of Head Office In-charge:  |             |
|       | Details of Branch in Sri Gangangar (Address, Date of Establishment etc)   |             |
| -     | Wiobile of each Branch Office In above  |             |
| 3     | Tim meome Tax PAN No  |             |
| 4     | Firm GST  |             |
| 5     | Firm's Registration No. with ICAI   |             |
| 6     | Date of establishment of Firm   |             |
| 7     | Turnover of the Firm in last three years  |             |
| 8     | Details of Partners   |             |
|       | Provide following details:  |             |
|       | • Name of each partner  |             |
|       | • Date of joining the firm  |             |
|       | Qualification   |             |
|       | Experience  |             |
|       | Whether the partners are engaged full ime or part time with the firm.   |             |
|       | Their Contact Mobile No   |             |
|       | Tender Fees Rs. 200/- DD/ BC in favour of District Health Society sri Gangangar (Atteched with Technical BID)                       |             |
|       | EMD 1% of tender value Rs. 50000/-<br>DD/ BC in favour of District Health<br>Society sri Gangangar (Atteched with<br>Technical BID) |             |

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## Form F-1

# FORMAT FOR FINANCIAL BID

# (Please provide the break-up of Firm's quoted fees for each work and unit)

| AUDIT FEE  Both in Numeric and in Words  a. Audit fess(Including cost of TA/DA)  Rs/- |
|---|
| a. Audit fess   |
| b. Service Tax(Rupees   |

Note: In case of change in the rate of Service Tax the revised Service Tax shall be paid.

मुख्य विकित्सा एव स्वास्थ्य अधिकारा एवं सदस्य सचिव जिल्ला स्वास्थ्य समिति, श्रीगंगानगर

# शपथ पत्र 100 / - रूपये के नॉन ज्यूडिशियल स्टाम्प पेपर पर

# -:नोटरी द्वारा सत्यापित:-

मैं / हम शपथपूर्वक घोषणा करते है कि-

- 1. हम किसी भी (केन्द्र / राज्य) से ब्लेक लिस्टेड नही है।
- 2. हम पर किसी भी विभाग में (राज्य / केन्द्र) सामग्री आपूर्ति / प्रशिक्षण व्यवस्था करने पर बेन (रोक) नहीं है तथा आपूर्ति से निलंबित नहीं है।
- 3. मैने / हमने कार्यालय सचिव जिला स्वास्थ्य समिति एंव मुख्य चिकित्सा एंव स्वा. अधिकारी श्रीगंगानगर हेतु सामग्री आपूर्ति / प्रशिक्षण व्यवस्था के लिए तकनीकी बोली के बिन्दु में जो घोषणा पत्र / प्रमाण पत्र / अन्य सूचना संलग्न किए गये है, वे सत्य एवं पूर्णतया सही है। इनमें किसी भी तथ्य को छिपाया नहीं है। और न ही कोई कूटरचित दस्तावेज प्रस्तुत किया है। यदि ऐसा पाया जाता है, तो बिना किसी न्यायिक कार्यवाही एवं अन्य कोई कार्यवाही किये बिना मेरी / हमारी बोली जो स्वीकृत की गई रदद कर दी जावे एवं हमारे विरुद्ध नियमानुसार कार्यवाही करने के लिए कार्यालय सचिव जिला स्वास्थ्य समिति एंव मुख्य चिकित्सा एंव स्वा.अधिकारी श्रीगंगानगर स्वतंत्र है।

स्थान

बोलीदाता के हस्ताक्षर

दिनांक

मुख्य चिकित्सा एव स्वास्थ्य अधिका एवं सदस्य सचिव जिला स्वास्थ्य समिति, श्रीगंगानगर

#### बोलीदाता द्वारा घोषणा

मैं / हम घोषणा करते है कि मैने / हमने जिन <u>मालो / स्टोर्स / उपकरणो / प्रशिक्षण</u> व्यवस्थाओं के लिए निविदा दी है उनका / उनके / मैं / हम बोनोफाईड विनिर्माता / थोकविकेता / सोल वितरक / प्राधिकृत डीलर / डीलर / सोल सेलिग / विपणन एजेण्ट हूं / है।

यदि यह घोषणा असत्य पाई जाए तो किसी भी अन्य कार्यवाही जो की जा सकती है पर प्रतिकुल प्रभाव डाले बिना मेरी प्रतिभुति को पूर्ण रूप से समपहत का लिया जाएगा तथा निविदा को जिस सीमा तक उसे स्वीकार किया गया है, रदद् कर दिया जाएगा।

बोलीदाता के हस्ताक्षर

मुख्य विकित्सा एव स्वास्थ्य अधिकारी एवं सदस्य सचिव जिला स्वास्थ्य समिति, श्रीगंगानगर

#### Annexure - 3 FORM NO.1 (See rule 83)

### Memorandum of Appeal under the Rajasthan Transparency in Public Procurement Act 2012 Appeal No...... of ..... Before the ......(First /Second Appellate Authority) Particulars of appellant : (i) Name of the appellant : (ii) Official address, if any: (iii)Residential address: 2. Name and address of the respondent(s): (i) (ii) (iii) Number and date of the order appealed against and name 3. and designation of the officer/ authority who passed the order (enclose copy), or a statement of a decision, action or omission of the Procuring Entity in contravention to the provisions of the Act by which the appellant is aggrieved: If the Appellant proposes to be represented 4. by a representative, the name and postal address of the Representative: Number of affidavits and documents 5. enclosed with the appeal: Ground of appeal: 6. (Supported by an affidavit) Place:

Date:

Appellant's signature:

411-मुख्य विकित्सा एव स्वास्थ्य अधिकारी एवं सदस्य सचिव जिला स्वास्थ्य समिति, श्रीगंगानगर

Annexure - A

# Compliance with the Code of Integrity and No Conflict of Interest

Any person participating in a procurement process shall –

- Not misrepresent or omit that misleads or attempts to mislead so as to obtain a financial other benefit or avoid an obligation; or
- Not offer any bribe, reward or gift or any material benefit either directly or b) indirectly in exchange for an unfair advantage in procurement process or to otherwise influence the procurement process; a)
  - Not indulge in any collusion, Bid rigging or anti-competitive behaviour to impair the transparency, fairness and progress of the procurement process;
- Not misuse any information shared between the procuring Entity and the Bidders with an intent d) to gain unfair advantage in the procurement process;
  - Not indulge in any coercion including impairing or harming or threatening to do the same, directly or indirectly, to any party or to its property to influence the procurement process;
  - Not obstruct any investigation or audit of a procurement process; g)
  - Disclose conflict of interest, if any, and
- Disclose any previous transgressions with any Entity in India or any other country during the last h) three years or any debarment by any other procuring entity.

### Conflict of Interest :-

The Bidder participating in a bidding process must not have a Conflict of Interest.

A Conflict of Interest is considered to be a situation in which a party has interests that party'sperformance responsibilities, contractual obligations, or compliance with applicable laws and regulations.

- A Bidder may be considered to be in Conflict of Interest with one or more parties in a bidding 1) process if, including but not limited to: a)
  - Have controlling partners/shareholders in common; or
  - b) Receive or have received any direct or indirect subsidy from any of them; or c)
  - Have the same legal representative for purposes of the bid; or
  - Have a relationship with each other, directly or through common third parties, that puts them d) in a position to have access to information about or influence on the bid of another Bidder, or influence the decisions of the Procuring Entity regarding the bidding process; e)
- The Bidder participates in more than one bid in a bidding process. Participation by a Bidder in more than one bid will result in the disqualification of all bids in which the Bidder is involved. However, this does not limit the inclusion of the same subcontractor, not otherwise participating as a Bidder, in more than one bid; or f)
- The Bidder or any of its affiliates participated as a consultant in the preparation of the design or technical specifications of the Goods, Works or Services that are the subject of the bid; or
  - Bidder or any of its affiliates has been hired (or is proposed to be hired) by the Procuring Entity as engineer-in-charge/consultant for the contract.

मुख्य चिकित्सा एव स्वास्थ्य अधिकारी

# Declaration by the Bidder regarding qualifications Declaration by the Bidder

|        | in response to their Notice Inviting Bids No dated  |
|--------|---|
|        |   |
| 2012,  |   |
| 1      | I/we possess the necessary professional, technical, financial and managerial resources and competence required by the Bidding Document issued by the Procuring Entity.  |
| 2.     | I/we have fulfilled my/our obligation to pay such of the taxes payable to the Union and the State Government or any local authority as specified in the Bidding Document;   |
| 3.     | I/we are not insolvent, in receivership, bankrupt or being wound up, not have my/our affairs administered by a court or a judicial officer, not have my/our business activities suspended and not the subject of legal proceedings for any of the foregoing reasons;  |
| 4. 1,  | /we do not have, and our directors and officers not have been convicted of any criminal offence related to my/our processional conduct or the making of false statements or misrepresentations as to my/our qualifications to enter into a procurement contract within a period of three years preceding the commencement of this procurement process, or not have been otherwise disqualified pursuant to debarment proceedings; |
| 5.     | I/we do not have a conflict of interest as specified in the Act, Rules and the Bidding Document, which materially affects fair competition;   |
| Date:  | Signature of bidder   |
| Place: | Name:   |
|        | Designation:  |
|        | Address:  |

मुख्य चिकित्सा एव स्वास्थ्य अधिकारी एवं सदस्य सचिव जिला स्वास्थ्य समिति, श्रीगंगानगर

#### Annexure - C

# **Grievance Redressal during Procurement Process**

The designation and address of the First Appellate Authority is: CM&HO SriGanganagar

The designation and address of the Second Appellate Authority is: Additional Director

#### 1. Filing an appeal

If any Bidder or prospective bidder is aggrieved that any decision, action or omission of the Procuring Entity is in contravention to the provisions of the Act or the Rules or the Guidelines issued thereunder, he may file an appeal to First Appellate Authority, as specified in the Bidding Document within a period of ten days from the date of such decision or action, omission, as the case may be clearly giving the specific ground or grounds on which he feels aggrieved:

Provided that after the declaration of a Bidder as successful the appeal may be filed only by a Bidder who has participated in the procurement proceedings:

Provided further that in case a Procuring Entity evaluates the technical bids before the opening of the financial Bids, an appeal related to the matter of Financial Bids may be filed only by a Bidder whose Technical Bid is found to be acceptable.

2. The officer to whom an appeal is filed under para (1) shall deal with the appeal as expeditiously as possible and shall endeavour to dispose it of within thirty days from the date of the appeal.

3.If the officer designated under para (1) fails to dispose of the appeal filed within the period specified in para (2) or if the Bidder or prospective bidder or the Procuring Entity is aggrieved by the order passed by the First Appellate Authority, the bidder or prospective bidder or the Procuring Entity, as the case may be, may file a second appeal to Second Appellate Authority specified in the Bidding Document in this behalf within fifteen days from the expiry of the period specified in para (2) or of the date of receipt of the order passed by the First Appellate Authority, as the case may be.

#### Appeal not to lie in certain cases

No appeal shall lie against any decision of the Procuring Entity relating to the following matters, namely:-

- Determination of need of procurement;
- b. Provisions limiting participation of Bidders in the Bid process;
- The decision of whether or not to enter into negotiations;
- d. Cancellation of a procurement process;
- e. Applicability of the provisions of confidentiality.

मुख्य विकित्सा एव स्वास्थ्य अधिकारी एवं सदस्य सचिव जिला स्वास्थ्य समिति, श्रीगंगानग

### Form of Appeal

- a. An appeal under para (1) or (3) above shall be in the annexed form along with as many copies as there are respondents in the appeal;
- b. Every appeal shall be accompanied by an order appealed against, if any, affidavit verifying the facts stated in the appeal and proof of payment of fee.
- c. Every appeal may be presented to First Appellate Authority or Second Appellate Authority, as the case may be, in person or through registered post or authorized representative.

## Fee for filing appeal

- i) Fee for the first appeal shall be rupees two thousand five hundred and for Second appeal shall be rupees ten thousand, which shall be non-refundable.
- The fee shall be paid in the form of bank demand draft or bankers' cheque of a Scheduled Bank in India payable in the name of Appellate Authority concerned.

# Procedure for disposal of appeal

- a. The First Appellate Authority or Second Appellate Authority, as the case may be, upon filing of appeal, shall issue notice accompanied by copy of appeal, Affidavit and documents, if any, to the respondents and fix date of hearing.
- b. On the date fixed for hearing, the First Appellate Authority or Second Appellate Authority, as the case may be, shall
  - i) Hear all the parties to appeal present before him; and
  - (ii) Peruse or inspect documents, relevant records or copies thereof relating to the matter.
- c. After hearing the parties, perusal or inspection of documents and relevant records or copies thereof relating to the matter, the Appellate Authority concerned shall Pass an order in writing and provide the copy of order to the parties to appeal free of cost.
- d. The order passed under sub-clause (c) above shall also be placed on the State Public Procurement Portal.

मुख्य चिकित्सा एव स्वास्थ्य अधिकारी एवं सदस्य सचिव

्राच्या सदस्य साचव

#### **Additional Conditions of Contract**

#### 1. Correction of arithmetical errors

Provided that a Financial Bid is substantially responsive, the Procuring Entity will correct arithmetical errors during evaluation of Financial Bids on the following basis:

- (i) if there is a discrepancy between the unit price and the total price that is obtained by multiplying the unit price and quantity, the unit price shall prevail and the total price shall be corrected, unless in the opinion of the Procuring Entity there is an obvious misplacement of the decimal point in the unit price, in which case the total price as quoted shall govern and the unit price shall be corrected;
- (ii) If there is an error in a total corresponding to the addition or subtraction of sub totals, the subtotals shall prevail and the total shall be corrected; and
- (iii) If there is a discrepancy between words and figures, the amount in words shall prevail, unless the amount expressed in words is related to an arithmetic error, in which case the amount in figures shall prevail subject to (i) and (ii) above.

If the Bidder that submitted the lowest evaluated bid does not accept the correction of errors, its bid shall be disqualified and its Bid Security shall be forfeited or its Bid Securing Declaration shall be executed.

## 2. Procuring Entity's Right to Vary Quantities

- (i) At the time of award of contract, the quantity of Goods, works or services originally specified in the Bidding Document may be increased or decreased by a specified percentage, but such increase or decrease shall not exceed twenty percent, of the quantity specified in the Bidding Document. It shall be without any change in the unit price or other terms and conditions of the bid and the conditions of contract.
- (ii) If the Procuring Entity does not procure any subject matter of procurement or procures less than the quantity in the Bidding Document due to change in circumstances, the bidder shall not be entitled for any claim or compensation except otherwise provided in the conditions of contract.
- (iii) In case of procurement of goods or services, additional quantity may be procured by placing a repeat order on the rates and conditions of the original order. However, the additional quantity shall not be more than 25% of the value of goods of the original contract and shall be within one month from the date of expiry of last supply. If the supplier fails to do so, Procuring Entity shall be free to arrange for the balance supply

by limited bidding or otherwise and the extra cost incurred shall be recovered from the supplier.

मुख्य चिकित्सा एवं स्थास्थ्य अधिकारी

# 3. Dividing quantities among more than one bidder at the time of award (In case of procurement of goods)

As a general rule all the quantities of the subject matter of procurement shall be procured from the bidder, whose bid is accepted. However, when it is considered that the quantity of the subject matter of procurement to be procured is very large and it may not be in the capacity of the bidder, whose bid is accepted, to deliver the entire quantity or when it is considered that the subject matter of procurement to be procured is of critical and vital nature, in such cases, the quantity may be divided between the bidder, whose bid is accepted and the second lowest bidder or even more bidder, whose bid is accepted.

मुख्य चिकित्सा एव स्वास्थ्य अधिकारी एवं सदस्य सचिव जिला स्वास्थ्य समिति, श्रीगंगानगः