

**DIRECTORATE OF HEALTH SERVICES**

(Procurement Cell)

(MAHARASHTRA STATE)

ArogyaBhavan, St.George's Hospital Compound, P.D'Mello Road,
Mumbai-400 001.

Director(Personal)	<u>Tel.No.</u> 22621006	Website : http://maha-arogy.gov.in
Jt.Director(Procurement Cell)	22626282	Email : procurementcell@gmail.com
Dy.Director (Procurement Cell)	22625799	022-22651026 (Procurement Cell) 022-22631831
		No. 30/E-133/C-1/ Domperidone Syrup 1 mg/ml 30 ml./1272/2017-18 Date :- 28.6.2017

To,
M/s Hindustan Laboratories
.Plot No. 5, 6, 7 Survey No. 38/2,
Village-Aliyali & Anil House,
Mahim Road, Palaghar - 401404
Tel.: (022) 42460500-99, 28933322
Email: - tender@hindlab.com,
sales@hindlab.com,
rajeshdoshi@hindlab.com.

Sub.:- Supply of Domperidone Syrup 1 mg/ml 30 ml.

Ref: - 1. Tender No. E-133/DHS /PC/Medicine/2016-17

2. Sanction of Central Purchase Committee Meeting Dtd. 19.06.2017

With reference to the tender cited under reference no 1, your online bid has been accepted. Accordingly you are requested to supply the following goods as per details mentioned below to consignee list enclosed with this order.

Sr No.	Name of the item	Specification of item	Quantity	Unit Rate including all taxes (Rs.)	Total Amount (Rs.)
1	Domperidone Syrup 1 mg/ml 30 ml.	Syrup Domperidone Sy. Domperidone 1 mg / ml. Bottle of 30 ml	230000	5.39	1239700/-
(Rupees Twelve lakhs Thirty Nine Thousand Seven Hundred only)					


- Packing & Forwarding:** As Per Annexure C Of Tender Document enclosed herewith & Forwarding Free on Road Destination. i.e. door delivery basis
- Excise duty** :: Inclusive
- VAT & Octroi:** As per condition of E Tender. However octroi exemption certificate should be obtained from consignee if required
- Delivery Period** : As per mentioned in consignee attached.
- Risk purchase clause:** If the bidder fails to supply the stores within the stipulated delivery period inclusive of period with penalty, the order will stand cancelled. Undersigned shall be entitled to purchase such stores from any other source at such price which ordinarily should not be more than 10% of the tender price, unless otherwise properly satisfied by purchasing officer. The extra expenditure in such cases shall be recovered by Joint Director of Health Services (Procurement Cell) from the Supplier inclusive of recovery by Revenue recovery procedure.
- Payment Terms** :: 100 % Payment shall be paid on receipt & acceptance of stores in good conditions

- by the consignee
- 7 **Labelling:** The word "**For use of GOVERNMENT OF MAHARASHTRA NOT FOR SALE**" should be printed on each unit pack in readable Purple or Green Colors. Bar-coding should be on boxes of Supplied item at Consignee level.
- 8 **Acceptance & Receipt:** In prescribed format enclosed .It should be submitted in Original Certificate copy to the purchasing authority along with triplicate copies of the Invoice.
Note : If supplier found any problem to receive acceptance certificate, he should contact this office immediately on email id : procurementcell.receipt@gmail.com
- 9 **Analysis Report** :: Manufactures should submit copy of Drugs analysis report to each consignee for each batch supplied with copy of the same along with invoice to Joint Director of Health Services (Procurement Cell), Mumbai
- 10 **Delivery Challan** - Should be sent in the name of consignee in duplicate. It should specify Name of Drugs/ Mfg. by / Expiry Date / packing & quantity.
- 11 **Invoice Copy** - Should be sent in triplicate on the Name of **Joint Director of Health Services (Procurement Cell) M.S. Mumbai- 1.**
- 12 **Other Terms** :: As per Tender terms & conditions
- 13 **Performance Security & Contract Agreement** : Bidder should submit Security deposit within 7 days from date of receipt of order for an amount of 3% i.e.37191/- of the contract value, valid up to 60 days after the date of completion of warranty obligations and enter into Contract Agreement on Rs 100/- non-judicial stamp paper. The Security Deposit should be in the form of Bank Guarantee in favour of the 'Joint Director of Health Services , Mumbai' payable at Mumbai from any Nationalized or scheduled bank (Annexure-8) **of tender document enclosed herewith.**
If Bidder fails to submit performance security & contract agreement within stipulated period order will stand cancelled & action against bidder will be taken as per rule.
- 14 The Bidder should submit demand draft within 7 days from date of receipt of order for an amount of 1.5 % i.e Rs 18595/- of order value to meet expenditure of sample testing fee and other incidental expenditure.
- 15 **Consignee: As per list enclosed.**

FDA Licence No : M/s Hindustan Laboratories

For License No. 25KD-481and 28 KD-311in Form-26 issued by FDA Maharashtra Dated 16.5.2016 & Valid till 3.5.2021.

Location of Factory : Plot No. 5, 6, 7 Survey No. 38/2,Village-Aliyali/& Anil House, Mahim Road, Palaghar - 401404


Dr.B.D.Pawar
Jt. Director of Health Services
(P.Cell) Mumbai

Copy to:

1) District Health Officer, Zilla Parishad (All)

2/- : They should accept Drug as per order and entry of the stock is to be taken in stock register. Submit receipt of Drugs in **scheme wise prescribed format** within **24 Hours** to Joint Director of Health Services (Procurement Cell), Directorate of Health Services M.S. Mumbai -1.

Copy For Information:

- 1.Jt.Director of Health Services (Malaria, Filariasis and Waterborn Diseases, Pune-1)
2. Deputy Director Of Health Services (All)
3. Pay and account office, Mumbai

Copy Submitted to:-1) Commissioner Health Services, Mumbai
2) Director Health Services, Mumbai

SCHEDULE FOR PACKING OF DRUGS AND MEDICINES:

I. SCHEDULE FOR PACKAGING OF DRUGS AND MEDICINES GENERAL

SPECIFICATIONS : All drugs should be packed & Supplied in Prescribed packing only & As per standard guide lines of FDA/ISI

1. No corrugate package should weigh more than 15 Kgs (i.e. product + inner carton + corrugated box)
2. All corrugated boxes should be of 'A' grade paper. i.e. Virgin.
3. All items should be packed only in first hand boxes only.
4. Flute - The corrugated boxes should be of narrow flute.
5. Joint - Every box should be preferably single joint and not more than two joints.
6. Stitching - Every box should be stitched using pairs of metal pins with an interval of two inches between each pair. The boxes should be stitched and not joined using calico at the corners.
7. Flap - The flaps should uniformly meet but should not overlap each other. The flap when turned by 45 - 60 degree should not crack.
8. Tape - Every box should be sealed with gum tape running along the top and lower opening.
9. Carry strap - Every box should be strapped with two parallel nylon carry straps (they should intersect).
10. Label - Every corrugated box should carry a large outer label clearly indicating that the product is for **GOVERNMENT OF MAHARASHTRA NOT FOR SALE** in readable purple or Green colour.
11. The product label on the cartoon should be large at least 15 cms x 10 cms dimension. It should carry the correct technical name, strength or the product, date of manufacturing, date of expiry, quantity packed and net weight of the box.
12. Other - No box should contain mixed products or mixed batches of the same product.
13. **Primary Package:** 10 Tablets/Capsules or multiples of 10 should be packed in an Aluminium strip / Aluminium - P V C blister pack
Aluminium strips : Thickness of Aluminium foil : 40 micron with LDPE 25 micron coating/heat seal lacquer
PVC Film : Transparent, clear/amber, food grade, blister forming PVC film, Film gauge - 200 microns, P E coating : 25 microns, PVC coating : 60 gsm
Aluminium foil: Hard tempered Blister foil, VMCH coated, Thickness: 0.025 mm
Secondary Package: The strips should be packed in boxes for easy handling, transport and distribution. The box may contain 10 strips. It shall be fabricated from Mainboard/grey board/cardboard with minimum of bursting strength of 400 gsm
Tertiary Package : The boxes shall be packed in weather resistant triple walled insulated corrugated 5 ply cartoons, each ply having strength of minimum 150 gsm It should be fabricated from virgin quality 'A' grade material . The overall dimension of the cartoon should be such that the product does not get damaged during transportation and storage.
Each international shipping carton should weigh less than 50 kg. It is important that individual boxes are not too heavy during transport as they are frequently loaded and off loaded manually at airports and intermediate stores
Bar-coding: - Bar-coding should be on secondary & Tertiary packing only.

IV. Case Identification

All cases should prominently indicate the following

1. Purchaser's line and code numbers
2. The generic name of the product
3. The dosage form (tablet, ampoule, syrup)
4. Date of manufacture and expiry (month and year) (in clear language not code)
5. Expiration dt.(Month & year)
6. Batch number
7. Quantity per case (Carton containing ----- secondary packages)
8. Special instructions for storage and handling
9. Name and address of manufacture
10. Any additional cautionary statements.

V. Marking:

Each packing shall be marked with nomenclature of the Item and shall be labelled in accordance with the requirement of the Drugs and Cosmetics Act, 1940 or relevant standards as applicable

Barcode Guidelines (As per Annexure C in Tender Document)

- 1) In light of registration with GS1 India for barcoding, supplier should submit valid GCP (Global Company Prefix) to DHS which is issued by GS1 India within 7 working days of receipt of order with supporting document. For registering with GS1 India, please contact Mr. Subrato Dey on 02228576516/7 (email- Subrato@gs1india.org)
- 2) Master Data of all the products as per order needs to be submitted/ emailed to GS1 India in the prescribed format (Annexure- A) within 15 days of receiving order. The Master Data needs to be sent to atri@gs1india.org and abhijit@gs1india.org
- 3) Master Data needs to be validated through GS1 India within a week of its submission
- 4) 1 Tertiary label of each SKU and 2 secondary labels of any SKUs need to be sent to GS1 India Delhi office within 15 days of validation of Master Data along with verification charges for barcode verification. Feedback will be provided by GS1 India to supplier's maximum within 15 days to make necessary corrections as required. GS1 India Delhi office address:
Abhijit Puradkar (DHS Verification)
GS1 India 330, 2nd Floor, 'C' Wing, August Kranti Bhawan,
Bhikaji Cama Place New Delhi 110066, India
- 5) The passed verification report for all the labels as mentioned above needs to be submitted to DHS before supply of medicines and consumables.

Note: In case of urgent supplies, contact GS1 India with delivery dates after approval from DHS. The same will be prioritized as per requirement.

Cost of verification:

Description	Verification Charges
1 tertiary Label	INR 1124
1 secondary Label	INR 1124

- 6) If your company failed to provide barcode on packaging then additional 5% amount on total billing amount will be deducted from your payment

CONTRACT FORM

THIS AGREEMENT made theday of....., 200... Between..... (Name of purchaser) of..... (Country of Purchaser) (Hereinafter "the Purchaser") of the one part and..... (Name of Supplier) of..... (City and Country of Supplier) (Hereinafter called "the Supplier") of the other part:

WHEREAS the Purchaser is desirous that certain Goods and ancillary services viz. (Brief Description of Goods and Services) and has accepted a bid by the Supplier for the supply of those goods and services in the sum of..... (Contract Price in Words and Figures) (Hereinafter called "the Contract Price").

NOW THIS AGREEMENT WITNESSETH AS FOLLOWS:

1. In this Agreement words and expressions shall have the same meanings as are respectively assigned to them in the Conditions of Contract referred to.
2. The following documents shall be deemed to form and be read and construed as part of this Agreement, viz.:
 - (a) The Price List submitted by the Supplier;
 - (b) The Schedule of Requirements;
 - (c) The Technical Specifications;
 - (d) The General Conditions of Contract;
 - (e) The Special Conditions of Contract; and
 - (f) The Purchaser's Notification of Award.
3. In consideration of the payments to be made by the Purchaser to the Supplier as hereinafter mentioned, the Supplier hereby covenants with the Purchaser to provide the goods and services and to remedy defects therein in conformity in all respects with the provisions of the Contract.
4. The Purchaser hereby covenants to pay the Supplier in consideration of the provision of the goods and services and the remedying of defects therein, the Contract Price or such other sum as may become payable under the provisions of the Contract at the times and in the manner prescribed by the Contract.

Brief particulars of the goods and services which shall be supplied/provided by the Supplier are as under:

Sr. No.	BRIEF DESCRIPTION OF GOODS & SERVICES	QUANTITY TO BE SUPPLIED	UNIT PRICE	TOTAL PRICE	DELIVERY TERMS

TOTAL VALUE:

DELIVERY SCHEDULE:

IN WITNESS whereof the parties hereto have caused this Agreement to be executed in accordance with their respective laws the day and year first above written.

Signed, Sealed and Delivered by the
Said..... (For the Purchaser)

in the presence of:.....



Signed, Sealed and Delivered by the
Said..... (For the Supplier)

In the presence of...

SECURITY DEPOSIT FORM

To: (Name of Purchaser)

WHEREAS..... (Name of Supplier)

Hereinafter called "the Supplier" has undertaken, in pursuance of Contract No..... dated, 200.... to supply.....(Description of Goods and Services) hereinafter called "the Contract".

AND WHEREAS it has been stipulated by you in the said Contract that the Supplier shall furnish you with a Bank Guarantee by a recognized bank for the sum specified therein as security for compliance with the Supplier's performance obligations in accordance with the Contract.

AND WHEREAS we have agreed to give the Supplier a Guarantee:

THEREFORE WE hereby affirm that we are Guarantors and responsible to you, on behalf of the Supplier, up to a total of..... (Amount of the Guarantee in Words and Figures) and we undertake to pay you, upon your first written demand declaring the Supplier to be in default under the Contract and without cavil or argument, any sum or sums within the limit of (Amount of Guarantee) as aforesaid, without your needing to prove or to show ground or reasons for your demand or the sum specified therein.

This guarantee is valid until theday of.....200.....


Signature and Seal of Guarantors

.....
.....
.....

Date.....200....

Address.....

.....



M/s Hindustan Laboratories				
Consignee List for Domperidone Syrup 1 mg/ml 30 ml				
Delivery period		45 days From receipt of order		
PO Reference No		No. 30/E-133/C-1/ Domperidone Syrup 1 mg/ml 30 ml./1272/2017-18 Date :-28.06.2017		
Sr No	Name of District	Name of Scheme		Grand Total
		Water Born Diseases		
		DHO		
1	Thane	8800	8800	
2	Raigad	5000	5000	
3	Plaghar	15900	15900	
4	Kolhapur	3200	3200	
5	Sangali	6400	6400	
6	Ratnagiri	1100	1100	
7	Sindhudurg	1700	1700	
8	Nashik	6500	6500	
9	Dhule	4700	4700	
10	Ahmadnagar	4300	4300	
11	Nandurbar	6700	6700	
12	Jalgaon	6400	6400	
13	Akola	1300	1300	
14	Amaravati	7200	7200	
15	Buldhana	10200	10200	
16	Washim	2600	2600	
17	Yeotmal	11400	11400	
18	Nagpur	4200	4200	
19	Bhandara	1800	1800	
20	Gondiya	2600	2600	
21	Chandrapur	7500	7500	
22	Gadchiroli	0	0	
23	Wardha	3800	3800	
24	Pune	6500	6500	
25	Solapur	44000	44000	
26	Satara	1900	1900	
27	Aurangabad	9800	9800	
28	Hingoli	2800	2800	
29	Parbhani	10200	10200	
30	Jalana	4400	4400	
31	Latur	5000	5000	
32	Osmanabad	4000	4000	
33	Beed	6000	6000	
34	Nanded	12100	12100	
Total		230000	230000	



(Dr.B.O.Pawar)

Jt. Director of Health Services

(P.Cell) Mumbai

