

NATIONAL LAW INSTITUTE UNIVERSITY

Kerwa Dam Road, Bhopal-462044

Phone: (0755)- 2696777(O) Fax: (0755)- 2696965 (O) E-mail: nliu@nliu.com

Dated: 15/12/2023

Website: www.nliu.ac.in

Ref. No. 5244 / NLIUB

Notice Inviting Quotations

Sealed quotations are invited by Registrar on Behalf of University from reputed Licensed Firms/Contractors/Agencies experienced in similar nature of work of "Purchase of Medicine through Rate Contract for NLIU, Bhopal". The rates quoted by the agency should be inclusive of transportation to the NLIU. The Agency has to enclose its self-attested copies of firm registration in the Govt. Of Madhya Pradesh, PAN Card and GST Number along with the sealed envelope. The firm should enclose an undertaking on letterhead that they are not blacklisted in any Government Agency/department. The quotations with specific rates for the under mentioned item will be received up to 12.00 pm on 27.12.

2023 and will be opened on the same day at 3.30 PM. The taxes, if any are to be clearly mentioned in the sealed quotation. The agency shall download the prescribed format our website: www.nliu.ac.in/tender.

The quotation should be addressed to the REGISTRAR, NATIONAL LAW INSTITUTE UNIVERSITY, NEAR KERWA DAM ROAD, BHOPAL-462044, superscribing the envelope with "Purchase of Medicine through Rate Contract for NLIU, Bhopal".

Eligibility Criteria: -

- 1. Preference will be given to pharmacy shops/distributors who are already empaneled in reputed hospitals of government or private.
- 2. Valid Drug license issued by authorized agency as per applicable rules/laws of government to sell medicines. (copy to be enclosed)
- 3. The agency must be in similar nature of business for last 05 years. (proof to be attached)
- 4. The agency has to enclose its self-attested copies of GST and PAN Card.
- 5. Agency/Firm/Company should not have been blacklisted by any institute/department/ organization (format given as Annexure-B).
- 6. The medicines supplied by the agency must have at least 06-month expiry date.



Terms and Conditions:

- 1. Sealed bids are invited for "Purchase of Medicine through rate Contract for NLIU, Bhopal".
- 2. Bid should be sealed in a cover duly super scribed as "Purchase of Medicine through rate Contract for NLIU, Bhopal."
- 3. The bidders should quote their best rates based upon the Terms and Conditions forming part of Notice Inviting Quotation document.
- 4. Quantity of medicines as and when required, separate work order shall be issued to the agency.
- 5. Only genuine medicine must be supplied. In case of supply of spurious medicine, NLIU shall blacklist the firm and take appropriate action as per the law.
- 6. Delivery: Door delivery to Health Centre, NLIU Bhopal.
- 7. In case, the date of submission/opening of tenders happens to be holiday, the tenders shall be received / opened on the next working day.
- 8. The supplier may be asked to submit a sample of the product(s), which will be evaluated by a technical evaluation committee. The expenditure incurred for demonstrating the items will be borne by the supplier.
- 9. Liquidated Damage: If the supplier fails to deliver the material on or before the stipulated date, then a penalty at the rate of 0.5 % per week of the total order value shall be levied subject to maximum of 10% of the total order value
- 10. Payment Terms: Payment will be made only after satisfactorily delivery, commissioning and inspection of material by the NLIU, Bhopal. Also, the payment shall be made as per actual quantities received and accepted by the NLIU, Bhopal.
- 11. Disputes: -In the event of any dispute or disagreement arising between the Supplier and NLIU, Bhopal with regards to the interpretation of "Terms & Conditions" of this inquiry, the same shall be referred to the Registrar, NLIU Bhopal whose decision will be final and binding upon the Supplier.
- 12. NLIU, Bhopal reserves the right to allot fully or partially work order to different vendors according to its requirement.
- 13. The rate contract for supply of medicines shall be valid for one year from the date of executing the agreement on a Rs.100/- non-judicial stamp paper, which can be extended for a further period of two years on year-to-year basis on satisfactory performance and on the mutual consent basis on the same rates and terms and conditions.
- 14. NLIU, Bhopal reserves the right to reject any quotation or part or the whole of inviting quotation process without assigning any reason. Decision of the NLIU, Bhopal will be final in this regard.
- 15. In case, the vendor fails to comply the terms & conditions, the University may terminate the contract without assigning any reason and is free to dispose of the waste paper items in such a manner as may be deemed appropriate.
- 16. The successful bidder will be liable to complete the job of within a period of 3 days of getting the work order.
- 17. University is not responsible for any kind of postal delay.
- 18. Contractor shall abide by labor rules and regulations.
- 19. All the applicable taxes shall be deducted from bill.
- 20. The University may increase/decrease the scope of the work up to 10% of the total work.



Registrar

TECHNICAL BID

Details For Rate Contract for supply of medicines

| | Details For Rate Contract for supply of medicines | | | | | |
|-----|--|---|--|--|--|--|
| 1. | Type of Organization | Brief profile of the agency to be enclosed. | | | | |
| 2. | Name of Tendering Company with Registration No. & Date issued by appropriate authorities (Please enclose copy of certificate of registration) | | | | | |
| 3. | Do you possess trade / business license issued by Competent authority? Authorities in India? If so, please enclose a copy. | | | | | |
| 4. | Name of Proprietor / Director and other officers with designation who will be directly concerned with this work. | Name: Phone/Mobile: Email: | | | | |
| | Furnish following particulars of the Registered Office: | | | | | |
| 5. | a. Complete Postal Address | | | | | |
| | b. Telephone No./ Mobile No. | | | | | |
| | c. E-Mail Address | | | | | |
| | Furnish following particulars of the Local Branch Office, if any. | | | | | |
| | a. Contact Person | | | | | |
| 6. | b. Complete Postal Address | | | | | |
| | c. Telephone No. / Mobile No. | | | | | |
| | d. E-mail Address | | | | | |
| 7. | PAN No. (Attach Attested Copy) | | | | | |
| 8. | GSTIN No. (Attach Attested Copy) | | | | | |
| 9. | Year of establishment and length of experience | (Copy of registration of the firm to be enclosed) | | | | |
| 10. | Legal status (attach copy of original document defining the legal status): a) Limited company or corporation firm b) Pvt. Ltd. Firm c) Proprietary firm d) Partnership firm e) An individual | (Copy of registration of the firm to be enclosed) | | | | |
| 11. | Information on any litigation in which the applicant was involved during the last 05 (five) years including any current litigation. | | | | | |



12. Give details of the major clients – NLUs/IITs/ IIMs/ NITs / IISERs, all Central University, NITTR, NCERT and similar level educational Institutions/Universities, Government / Semi Govt. Departments, Research Organizations and Pvt. Companies to whom services of the last five years in the following format.

| SI. No. | Name and address of the client with details- Name of the contract person, phone no. email-ID | Particular of work | Work order No. and date | Value of work order or work done amount |
|------------|---|-----------------------|-------------------------|---|
| i) | | | | |
| ii) | | | | |
| iii) | The agency should not have been blacklisted or banned by any Govt. Department, Government Organization, PSU, University, Autonomous Institute etc | | | |
| iv) | Additional information, if an sheet, if required) | ny (Attach separate | | 11 4 12 |

Note: - Bidders are requested to completely fill all the space provided. If it leaves blank, it will be read as N.A.



DECLARATION FOR BLACKLISTING

| We hereby declare that our firm named | is |
|--|------------|
| not under liquidation, arbitration, court receivership or any other similar proceedings. | We further |
| declare that our firm is not blacklisted by any central/state/local government organizatio | n/academic |
| institute/PSU. | |

Stamp & Seal of the Tenderer



SCHEDULE OF QUANTITY

| | Purchase of Medicine through Rate Contract for NLIU. Bhopal. |
|-----------------|---|
| Name of the Age | ncy/Firm: |

| Sr. No. | Nomenclature of Medicine | Discount on MRP (In percentage) |
|------------|--------------------------|---------------------------------|
| 1 | Branded Medicine | |
| 2 | Generic medicine | |
| 3 | Surgical Items | |

Note: -

1. An indicative list of medicines usually procured is enclosed <u>only</u> for reference.

2. The firm giving maximum discounts on branded medicine shall be given preference.



LIST OF MEDICINES

| Sr. No | Name of the Medicine | Total Quantity (In Nos.) (A) |
|--------|-----------------------------|------------------------------------|
| 1. | Tab. Crocin 500 mg | 300 |
| 2. | Tab. Dolo 650 mg | 100 |
| 3. | Tab. Pantop DSR | 100 |
| 4. | Tab Pantop 40 mg | 100 |
| 5. | Tab. Vovlran 100 mg | 50 |
| 6. | Tab. Combiflam | 250 |
| 7. | Tab. Dynapar | 100 |
| 8. | Tab. Norflox TZ | 100 |
| 9. | Tab. Meftal Spas | 100 |
| 10. | Tab. Levocetrizine 5 mg | 250 |
| 11. | Tab. Digene | 50 |
| 12. | Cap. Pudin Hara | 30 |
| 13. | Tab. Allegra-M | 200 |
| 14. | Tab. Stemetil- MD | 10 |
| 15. | Tab. Zerodol – SP | 50 |
| 16. | Alex Iozenges | 150 |
| 17. | Tab. Amoxicillin 625 mg | 50 |
| 18. | Tab. Ciplox 500 mg | 100 |
| 19. | Tab. Azithromycin 500 mg | 200 |
| 20. | Tab. Doxycyciine 100 mg | 10 |
| 21. | Tab. Sinarest | 250 |
| 22. | Tab. Amlodipine 5 mg | 20 |
| 23. | Inj. Tetanus TOX OID 1.5 ml | 50 |
| 24. | Inj. Paracetamol 2 ml | 5 |
| 25. | Inj. Drotin 2 ml | 5 |
| 26. | Inj. Avil 2 ml | 5 |
| 27. | Inj. Ondansetorn 2 ml | 5 |

| 28. | Inj. Voveran 1 ml | 5 |
|-----|---------------------------------------|------------|
| 29. | Inj. Adrenaline 2 ml | 3 |
| 30. | Violini Spray 100 ml | 10 |
| 31. | Cotton Roll 500 Gm | 1 |
| 32. | Baindage (Adhesive) 2 inch | 100 |
| 33. | Gamjee Roll | 05 Pkt. |
| 34. | Betadine Ointment Tube 125 gm + 50 Gm | 01 |
| 35. | Betadine Ointment Tube 50 gm | 04 |
| 36. | Neosporin Powder 50 mg | 04 |
| 37. | Soframycin Ointment 125 GM | 1 |
| 38. | Microtepa 4 inch | 5 |
| 39. | Microtepa 6 inch | 5 |
| 40. | Microtepa 2 inch | 5 |
| 41. | Syp. Brozedex 100 ml | 10 |
| 42. | Neb. Duolin (Respules) | 10 |
| 43. | Neb. – Budicort (Respules) | 10 |
| 44. | Sugar Strip | 100 Strip |
| 45. | Blood Lancet Needle | 100 Needle |
| 46. | Syringe 3 ml | 100 |
| 47. | ORS powder | 200 |
| 48. | Glucon-D 100 ml | 5 |
| 49. | Ciplox Eye Drop 5 ml | 20 |
| 50. | Ciplox Ear drop 5 ml | 20 |
| 51. | Crepe Bandage 4 inch | 5 |
| 52. | I/V Ns/Normal Saline 100 ml | 05 |
| 53. | I/V Ns/Normal Saline 500 ml | 02 |
| 54. | I/V Dextrose 5%, 100ml | 02 |
| 55. | Tab. Aciloc | 100 |
| 56. | Omini Jel 100 gm | 02 |
| 57. | Regular spirit 500 ml | 02 |
| 58. | Tab. Limcee | 30 |
| 59. | Inj. Primacort 100 mg | 02 |
| 60. | Savlon Lotion 100 ml | 05 |
| 61. | Xyiocaine 2% | 01 |