NOTICE INVITING EOI

No. EOI/CMS/TSK/02 OF 2025-26,

Date- 29/08/2025

Addl. Chief Medical Superintendent / Divisional Railway Hospital/N. F. Railway, Dibrugarh for and on behalf of the President of India, invites Expression of Interest (EOI) from resourceful chemists and medical stores in Dibrugarh for empanelment for cash purchase through imprest.

The proposal may please be submitted in EOI documents with format & schedule available for free download at N. F. Railway's official website http://www.nfr.indianrailways.gov.in The same can also be collected from the office of the Chief Medical Superintendent/ Divisional Railway Hospital/N. F. Railway, Dibrugarh up 13-00 hrs of 15/09/2025.

The EOI from interested chemists/medical stores will be received in sealed envelop upto 13-00 hrs of 15/09/2025 in the office of the Chief Medical Superintendent / Divisional Railway Hospital/N. F. Railway, Dibrugarh-786001. The offers will opened on the same day at 15.30 hrs.

Addl. Chief Medical Superintendent N.F. Railway, Dibrugarh

> Additional Chief Medical Superintend अतिरिक्त मुख्य चिकित्सा अधीक्षक N. F. Rly., Dibrugarh प॰ सी॰ रेल, डिन्नुगर

NORTHEAST FRONTIER RAILWAY

EOI DOCUMENTS FOR

Empanelment of Chemicals & Medical stores for cash purchase for Divisional Railway Hospital, Dibrugarh for two years.

No: EOI/CMS/TSK/02 OF 2025-26 Dtd. 29/08/2025

EXPRESSION OF INTEREST

Scope of enquiry – Addl. Chief Medical Superintendent /Divisional Hospital/N.F. Railway, Dibrugarh for and on behalf of President of India, invites Expression of Interest (EOI) from resourceful Chemist & medical stores in Dibrugarh for empanelment for cash purchase through imprest.

Eligibility:

- 1. The chemist/medical stores shop should be in existence continuously for at least last five years. (Copy of licenses held for last five years have to be submitted).
- 2. The chemist must hold valid licenses as on the date of submission of Bid in specified forms lssued by the Drug Control Authority of the State under the provisions of Drugs and Cosmetic Act. 1940. The successful Bidder will further ensure that their licenses remain valid on the date of Bid opening and till the end of the contract period.

3. Copy of the valid license.

- 4. The chemist must not have been convicted by the State drugs authorities and no case should be Pending under the Drugs and Cosmetics Act and Rules.
- 5. The Annual Turnover of the bidder in the previous two financial years should not be less than Rs. Thirty lacs. The bidder has to submit an Audited Balance Sheet with Profit and Loss Statement of the previous two financial years in support thereof.
- 6. The chemist shop/commercial establishment should be situated within the Dibrugarh Town.
- 7. Copy of valid GSTIN Registration certificate.
- 8. A copy of PAN allotted to the firm.

Terms and conditions:

- 1. The Chemist/medical store may quote for one or more one of the following group of drugs Laboratory reagents/disposables/consumables/implants and clearly mention discount offered On MRP against each group.
 - a. Branded drugs.
 - b. Branded generic/Generic drugs.
 - c. Anticancer drugs.
 - d. Lab reagents
 - e. Disposables.
 - f. Consumables.
 - g. Implants.
- 2. Orders will be placed through email/sms/FAX to the supplier
- 3. Material will have to be supplied within three hours through special messengers of the supplier.
- 4. The payment will be on submission of cash vouchers limited to Rs 20000.00 per voucher (current SOP)
- 5. Empanelment will be valid for a period of two years which will be extendable by another one Year.
- 6. Maximum three numbers of firm will be empanelled for each group of items above

Format for submission of EO1: -

The proposal may please be submitted in the format and schedule annexed to this document as Annexure - A, along with supporting documents for the information provided. EOI document with format & schedule is available for free download at NF Railway's official website http://www.nfr.indianrailways.gov.in. The same can also be collected from the office of the Chief Medical Superintendent up to 13-00 hrs of 15/09/2025.

Last date of submission: - The EOI from interested service providers will be received in sealed envelopes up to 13-00 hrs of 15/09/2025 in the office of the Chief medical Superintendent /Divisional Hospital/N.F. Railway, Dibrugarh – 786001. The offer will be opened the same day at 15-30 hrs.

<u>Contact details</u>: - For clarifications required if any, may contact Chief Medical Superintendent/Divisional Hospital/N.F. Railway, Dibrugarh- 786001 at 9957555537.

<u>Evaluation</u>: - A team of Three Medical Officers and Pharmacist constituted by Chief Medical Superintendent will inspect and physically verify the above eligibility conditions.

Annexure A

FORMAT FOR EOI

SNo	Description	Information to be provided by the chemist/medical store	Supporting Documents attached
1	Name of the centre		
2	Address		
3	The chemist/medical stores shop should be in existence for at least last five years. (Copy of licenses held for last five years have to be submitted)	¥.	
4	The chemist must hold valid licenses as on the date of submission of Bid in specified forms issued by the Drug Control Authority of the State under the provisions of Drug and Cosmetics Act, 1940.		
5	Copy of valid trade license	0.1	
6	The chemist must not have been convicted by any State drug authorities and no case should be pending under the Drugs and Cosmetics Act and Rules.		
7	The Annual Turnover of the bidder in the previous two financial years should not be less than Rs. Thirty lacs. The bidder has to submit an Audited Balance Sheet with Profit and Loss statement of the previous two financial years in support thereof.		
8	The chemist shop / commercial establishment should be situated within the Dibrugarh Town.		
9	Copy of valid GSTIN Registration certificate		1
10	A copy of PAN allotted to the firm.		

Signature

Seal

SCHEDULE FOR EOI

SN	NAME OF THE GROUP	Minimum Discount expected on MRP	Discount offered on MRP	Remark
1.	Branded Drugs	15 %		1
2.	Branded generic/Generic drugs	20%	\$	
3.	Anticancer drugs	25%		1
4.	Lab reagents	20%		
5.	Disposables	50%	And the state of the	21.0
6	Consumables	20%		
7	Implants	20%		

Declaration

I/we solemnly declare that to the best of my knowledge and belief the information and the sta	tement
accompanying it are correct, complete and true.	

N	ame	of	the	auth	orized	signatory:
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Designation:

Date:

Telephone no:

(signature of authorized signatory)

Seal