

NORTHEAST FRONTIER RAILWAY

EOI DOCUMENT FOR

EMPANELEMENT OF PRIVATE DRUGS TESTING LABORATORY FOR
HOSPITALS UNDER NORTHEAST FRONTIER RAILWAY

No- NIA/PCMD/01/2021-22

EXPRESSION OF INTEREST (EOI)

Scope of enquiry:

Principal Chief Medical Director, N.F. Railway, Maligaon, Guwahati -11 for and on behalf of President of India, invite Expression of Interest (EOI) from resourceful Private Drugs Testing Laboratories for empanelment regarding test/analysis of Drug (Medicine) samples in the form of Tablets, Capsules, Suspensions/liquids, Injections, Drops etc. for the Hospitals {Central Hospital/Maligaon (Assam), 5 No. of Divisional Hospitals- Katihar (Bihar), Alipurduar (West Bengal), New Bongaigaon, Lumding & Dibrugarh (all within Assam), 5 No. of Sub-Divisional Hospitals- New Jalpaiguri (West Bengal), Rangiya, Rangapara, Badarpur & New Tinsukia (all within Assam) } under N.F. Railway, Maligaon, Guwahati, Assam-781011.

Eligibility: Only NABL Accredited Private Drug Testing Laboratory to participate.

Format for submission of EOI:

The proposal may please be submitted in the format & scheduled annexed to this document as Annexure-"A", and Annexure-"B", (for testing of drug sample), along with supporting documents for the information provided. The EOI document & scheduled is available for free download at N.F. Railway's website <http://www.nfr.indianrailways.gov.in>. office working hours of the week up to 30/06/2021.

Last date of submission:

The EOI from Interested service providers will be received in sealed envelopes up to 13.00 hrs of 30.06.2021 in the office of the Principal Chief Medical Director, HQ, N.F. Railway, Maligaon, Guwahati-781011. The offers will be opened on the same day at 15.30hrs.

Contact Details:

The interested service provider may send the offer to "The Principal Chief Medical Director, N.F. Railway, HQ, Maligaon, PO: Maligaon, Dist: Kamrup (Metro), Assam, PIN:781011".

The clarifications received if any, may contact with the Phone No.9957550505 in the Office of Principal Chief Medical Director, N.F. Railway, HQ, Maligaon and also communicated through e-mail id- dycmdmsnfr@gmail.com.

Evaluation:

The offers will be evaluated in the office of Principal Chief Medical Director, N.F. Railway, HQ, Maligaon-781011 and conditions will be empanelled.

Validity of Empanelment: The empanelment will be valid for the period of 3 (three) years.

Conditions of Railways for being empanelled:

1. Drug samples is to be sent by Courier/Post/Messenger by respective Railway Hospital incharges.
2. Drug testing report should be submitted in hard copy of post/courier & soft copy of the report is also to be sent to the officer sending the sample.
3. Bill should be submitted along with the copy of drug testing report in triplicate to the Medical Authority who had sent the drug sample for testing.
4. Payment to be made on line through NEFT/RTGS. The payment may ordinarily be made within 45 days.
5. Laboratories should furnished GSTIN registration No, NEFT mandate details along with their willingness for receipt of payment through NEFT/RTGS.
6. No. advance payment is made by Railways.
7. Valid NABL accredited certification should be submitted along with the offer.
8. The willingness should be annexed with the rate of Drug Testing for various medicines. It is expected that the Firm will offer some discount to their listed price of drug testing for various molecules.
9. Discount to their published rate/special rate to the Railway.

ANNEXURE-"A"

FORMAT FOR EOI

Sl.No	Description	Information to be provided	Supporting documents attached
1	Name, Details corresponding Address, PIN, Phone No. email-id of the Centre.		
2	Full name of the in charge, Phone No (O), Mobile No, email id.		
3	Eligibility Criteria: Only NABL accredited Drug Testing Laboratory to participate.		
4	Mode of Payment (on Bill system through NEFT)		
5	Mode of Payment (on Bill samples through courier services/Postal/messenger.		
6	Bank particulars for payment/deposit of testing fee, PAN No. GSTIN No, ST No. TIN No. etc.		
7	Whether empanelled with any other Zonal Railway. If yes, copy of empanelment is to be submitted.		
8	Other relevant information, if any.		

Signature :

Full Name :

Designation :

Seal :

ANNEXURE-"B"

**FORMAT FOR EOI
(FOR TESTING OF DRUG SAMPLE)**

Sl.No	Name of Item as per Annexed list (C).	Required Quantity for sample	Testing fees, Rs.	Tax/GST@% (Extra or included)

NB: Rate list and quantity required for each molecule are to be submitted as per above format.

Signature :

Full Name :

Designation :

Seal :