



Government of West Bengal
Office of the Medical Superintendent cum Vice Principal
College of Medicine & Sagore Dutta Hospital
578, B.T.Road, Kamarhati, Kolkata-700058

Memo No.

Dated

Expression of Interest

Expression of Interest is hereby called by the MSVP, CMSDH, Government of West Bengal, Department of Health and Family Welfare, regarding selection of laboratories to provide Diagnostic Services which are not done at the hospital.

The EOI should be addressed to the MSVP, CMSDH. Participants may download the Expression Of Interest from the website <http://www.cmsdh.edu.in>. Last date for submission of the EOI is 20.02.2016 at 2.00 p.m.

The undersigned reserves the right to accept or cancel the whole procedure at any time in partial or in totality stating any reason, thereof.

Medical Superintendent cum Vice Principal
College of Medicine & Sagore Dutta Hospital
Kamarhati, Kolkata-700058

Memo No: CMSDH/ 240/1(4)

Date: 9.02.2016

Copy forwarded for information and n/a please:-

1. The Principal, COMSDH, Kamarhati, Kolkata-58
2. Accounts Officer, COMSDH, Kamarhati, Kolkata-58
3. Assistant Superintendent, Kamarhati, Kolkata-58
4. Account Personnel, COMSDH, Kamarhati-58


09.2.16
Medical Superintendent cum Vice Principal
College of Medicine & Sagore Dutta Hospital
Kamarhati, Kolkata-700058

TERMS AND CONDITION FOR SELECTION OF VENDORS TO PROVIDE DIAGNOSTIC SERVICES FOR ALL THE REGISTERED PATIENTS AT COLLEGE OF MEDICINE & SAGORE DUTTA HOSPITAL

1. The Annual Turnover of the participants should be above Rs.30,00,000/- for last three consecutive years.
2. Parties interested to participate may quote the highest discount on the revised rate list under West Bengal Health Scheme, 2008(Notification No. 796-F (MED) dated 31/01/2011 in sealed envelope.
3. The name of the participants along with the official memo number of published EOI is to be super scribed outside the envelope also.
4. EOI once submitted cannot be modified or withdrawn.
5. Participants shall quote rates both in figures and words. If there is any difference between the rates in figures and words then the higher of the two shall be considered.

FORMAT FOR SELECTION:

1. Name of the laboratory
2. Address
3. PAN
4. Photocopy of PAN Card
5. Trade license
6. VAT Registration Certificate
7. Last Quarter VAT Return
8. IT Return for the assessment year 2015-16
9. Particulars of Certificate of enlistment of local body or municipality
10. AERB registration for radiological facilities
11. PNDT for USG facility
12. NABL/similar accreditation certificate