

Price 10,000/-



**GOVERNMENT OF MAHARASHTRA  
STATE HEALTH SOCIETY,  
NATIONAL HEALTH MISSION, MAHARASHTRA**

( NHM, Procurement Cell)  
*Arogya Bhavan 2nd Floor,  
St.George's Hospital Compound,  
Near C.S.T.Station,Mumbai-400 001.  
Maharashtra State*

**Email - <http://nhm.procurement@gmail.com>**

**Website : <http://mahatenders.gov.in//aarogya.maharashtra.gov.in>**

**Phone : 022-22717609/22717610**

**TENDER DOCUMENT  
TO  
DEVELOP & OPERATE  
JUMBO AMBULANCE PROJECT**

**Not Transferable**

Tender reference No: Tender No. – E -11/NHM/EMS/16-17  
Last date for submission of tenders: - 11/4/2016, 05.00 pm

Issued to  
M/s.....

Tender no. 11 /16-17/ Jumbo Ambulance

## **Disclaimer**

This TENDER DOCUMENT is being issued by State Health Society, National Health Mission, Mumbai, Maharashtra, for inviting tenders JUMBO AMBULANCE PROJECT for selection of Service Provider on such terms and conditions and technical specifications as set out in this TENDER DOCUMENT.

It is hereby clarified that this TENDER document is not an agreement and is not an offer or invitation by the SHS, Maharashtra to any – party. The purpose of this TENDER document is to provide interested parties with information to assist the formulation of their Application for Final Bidding. This TENDER document does not purport to contain all the information each Applicant may require. This TENDER document may not be appropriate for all persons, and it is not possible for SHS, Maharashtra their employees or advisors to consider the investment objectives, financial situation and particular needs of each party who reads or uses this TENDER document. Certain applicants may have a better knowledge of the proposed Project than others. Each applicant should conduct his own investigations and analysis and should check the accuracy, reliability and completeness of the information in this TENDER document and obtain independent advice from appropriate sources. SHS, Maharashtra their employees and advisors make no representation or warranty and shall incur no liability under any law, statute, rules or regulations as to the accuracy, reliability or completeness of this TENDER document.

SHS, NHM Maharashtra may in their absolute discretion, but without being under any obligation to do so, update, amend or supplement or relax any condition / information in this TENDER document.

**GOVERNMENT OF MAHARASHTRA**  
**STATE HEALTH SOCIETY, MAHARASHTRA**  
NATIONAL HEALTH MISSION, MAHARASHTRA  
NOTICE FOR INVITING TENDER TO DEVELOP & OPERATE  
JUMBO AMBULANCE PROJECT

Tender No. - E -11/NHM/EMS/16-17

Date: 19/3/2016

Government of Maharashtra through NHM - State Health Society, Maharashtra intends to launch JUMBO AMBULANCE PROJECT with 1 JUMBO AMBULANCE on Pilot basis and proposes to Commissioner (FW) & Director, Procurement Cell, 3rd Floor, Arogya Bhavan, St. George's Hospital Compound, Mumbai-400 001. NHM – State Health Society, Maharashtra invites Tender to develop and operate JUMBO AMBULANCE PROJECT.

SHS, Mumbai, Maharashtra will provide the capital cost for procurement of JUMBO AMBULANCE, Equipment's, and operational expenses to operate the existing 108 Control Room / ERC and the Ambulances.

The Turn Key service provider selected through Two Bid System will have to procure JUMBO Ambulances and operate JUMBO Ambulance service 24 X 7 hrs free of cost to the individuals in the medical emergencies.

Interested eligible Tenderers may obtain further information of technical specifications, required quantities and other terms and conditions applicable to develop & operate JUMBO AMBULANCE PROJECT from our website <http://mahatenders.gov.in> & [aarogya.maharashtra.gov.in](http://aarogya.maharashtra.gov.in)

## **Eligibility Criteria:**

Operating at least 50 AMBULANCE Service is a specialised life saving service requiring state of the art, life support Ambulances, trained manpower, critical operational processes, specialised software and most importantly organizational experience of having run such a critical service. Based on such specialised Individual companies/registered societies/consortium of companies are eligible to take part in the RFP. In case of a consortium, (max. two members allowed, through a MoU), the consortium members need to fulfil the bid criteria jointly. Consortium members to nominate the lead member, who will be responsible to implement the project. The members of the consortium specific to this assignment, meeting all the following criteria, may submit the Tender Document.

1. Bidders shall have one year experience in managing a fleet of minimum 50 ambulances.
2. Should have at least 1 year experience in GIS, GPRS and GPS integrated vehicle Monitoring System and Software components for the same.
3. Necessary training shall be given to Doctor & paramedics who will works on the ambulance. The training shall be given by recognized institute
4. Annual Turnover shall not less than 400 Lakhs.
5. In case of consortia, the Lead member shall fulfil criteria No. 4 independently and other members of the consortia to meet the criteria no. 1, 2, and 3 independently.
6. Testimonials of all relevant experience should be enclosed with the Bid Document...

**If any tenderer wishes to lodge any complaint against the other tenderer regarding submission of false documents, information etc. the tenderer has to deposit ₹. 1,00,000 (Rupees One Lacs only )in the form of Demand Draft drawn in favour of State Health Society, Mumbai in terms of deposit. The amount so deposited shall be refunded if after scrutiny the complaint is found to be true. However, if the complaint found to be false and malafide the deposit will be forfeited. No interest shall be paid against this deposit**

## TENDER SCHEDULE

Item No.	Description of	Items for Tender	Period of Sale of Bid	Bid Submission	Bid Opening
1.	TO DEVELOP & OPERATE  JUMBO ambulance project.	1) 1 JUMBO ambulance project. 2) Operationalization of JUMBO ambulance project.	19-03-2016 at 10.00 am to 11-4-2016 2.00 pm	19-03-2016 at 10.00 am to 11-4-2016 2.00 pm	13/4/2016, 2.00 pm to 5.30 pm
<b>Date of Pre Bid Meeting :</b> 02/04/2016, 11.00 am National Rural Health Mission, State Health Society, Maharashtra Arogya Bhavan, 3 <sup>rd</sup> Floor, St. George Hospital Compound, P. D'mello Road, Mumbai 400 001.					
Sr. No.	Description				EMD
2.	TO DEVELOP & OPERATE JUMBO ambulance project. 1) Procurement of 1 jumbo Ambulances with medical equipment's 2) Operationalization of JUMBO ambulance project.				Rs. 1 lakh 10 thousand

Address for communication: Office of the  
Commissioner (FW) & Director, NHM  
(Procurement Cell)  
2nd Floor, Arogya Bhavan  
St. Georges Hospital Compound,  
Mumbai 400 001  
Phone NO : 022-22717609/22717610

A complete set of tender documents may be purchased by interested eligible tenderer upon payment of a non refundable fee of **Rs. 10,000/-** (Rupees Ten Thousand only) in the form of a Demand Draft issued by Nationalized/Scheduled Bank in favour of "**State Health Society, Mumbai**" payable at Mumbai during office hours from 10.00 hours to 17.00 hours on all working days on or before date & time of closing of sale of tender document.

Tenders which are downloaded from website, the tenderers should specifically super scribe "**Downloaded from the website**" on the top left corner of the envelope. However tender cost of **Rs. 10,000/-** (Rupees Ten Thousand only) in the form of Demand draft will have to be submitted along with the tender document. The tenders shall be rejected summarily upon failure to follow procedure prescribed in the Tender document. **The conditional tender is liable to be rejected.**

State Health Society, Commissioner (FW) & Director, NHM (Procurement Cell), Mumbai reserves the right to increase or decrease the quantity to be purchased and also reserves the right to cancel or revise or any of the all the tenders or part of tenders without giving any reasons thereto.

Commissioner (FW) & Director, NHM  
**(Procurement Cell) Mumbai**

## KEY DETAILS

Name of Office	Commissioner Family Welfare & Director National Rural Health Mission, State Health Society, Maharashtra Arogya Bhavan, 3 <sup>rd</sup> Floor, St. George Hospital Compound, P. D'mello Road, Mumbai 400 001
Date of Issue of TENDER DOCUMENT	19-3-2016, 10.00 am
Authority & Place for purchase of TENDER DOCUMENT, submission & Opening of Bids	Commissioner (FW) & Director, NHM, 2nd Floor, Arogya Bhavan, St. George Hospital Compound, P.D'mello Road, Mumbai 400 001
Authority and address for seeking clarifications of the TENDER DOCUMENT	Commissioner (FW) & Director, NHM, 2nd Floor, Arogya Bhavan, St. George Hospital Compound, P.D'mello Road, Mumbai 400 001
Date and Time of Pre-Bid Conference	02/04/2016, 11.00 am
Venue of Pre-Bid Conference	Conference Hall 3rd floor, Arogya Bhavan, St. George's Hospital Compound, P. D'mello Road, Mumbai 400 001
Last date for sale of TENDER DOCUMENT	11/4/2016, 5.00 pm
Earnest Money Deposit Amount	Rs. 1 Lakhs 10 thousand
Last date and time for Receipts of TENDER DOCUMENT	Up to 11/4/2016, 5.00 pm
Date & Time of Opening of Technical Bids (Envelope no. 1)	13/4/2016, 2.00 pm to 5.30 pm
Date & Time of Opening of Price Bids (Envelope 2)	To be notified later

Please note carefully the requirements for submitting Bids as set-forth in this TENDER DOCUMENT, and the date and time for submission of TENDER DOCUMENT late tender on any account shall be rejected summarily. Delay due to Post or any other reason will not be condoned.

## **TABLE OF CONTENTS**

<b>Sr. No.</b>	<b>Descriptions</b>	<b>Page No.</b>
1	Disclaimer	2
2	Notice for Bid invitation	3
3	Key Details	7
4	Project Profile	9
5	Annexure-I (Format for Letter of Application)	25
6	Annexure-II (Format for Power of Attorney- for signing of Application)	26
7	Annexure-III (Format for Power of Attorney- for lead member of consortium)	27
8	Annexure-IV (Details of Applicant)	28
9	Annexure-V (Relevant Experience of the Applicant)	29
10	Proforma A	31
11	Proforma B	32
12	Proforma C	33
13	Proforma D	34
14	Proforma E	35
15	Proforma F	36
16	Annexure-VI (Financial Status)	37
17	Annexure-VII (Affidavit)	38
18	Annexure-VIII (Letter of Exclusivity)	39
19	Annexure-IX (Anti-collusion certificate)	40
20	Annexure-X (Training for Emergency Personnel)	41
22	Annexure XI (Specifications Of JUMBOAmbulance)	43
23	Annexure-XII (Procedure for Debarring)	63
24	Annexure-XIII (Details of Work Unit)	64
25	Annexure-XIV (Proforma for Performance Statement)	65
26	Annexure-XV (Checklist)	66
27	Annexure- XVI (Price Bid)	68
28	Appendix-A	73
29	Appendix-B	75
30	Appendix-C	81
31	Appendix-D	82
32	Appendix-E	83
33	Rider A	84



# Project Profile

## 1. Background

State Health Society, National Health Mission Mumbai, Government of Maharashtra envisages that 1 JUMBO ambulance project be made operational & scaling. The Service Provider selected through Tender process of two bid systems shall procure the jumbo ambulance, medical equipment's. Capital cost will be provided by SHS, Maharashtra. This jumbo ambulance shall be operated by the Successful Bidder and operational costs shall be reimbursed by SHS, Maharashtra as per the lowest financial bid received in this TENDER. The Selected service provider shall be required to use existing call centre 108, at 2nd Floor, Chest Hospital Aundh, Pune for the jumbo Ambulance operations and all the existing infrastructure, call centre & call assistant by 108 shall be continue to be use jumbo ambulance also. The necessary training to manage calls from jumbo ambulance will be given to ERC 108 staff.

### 1.1 Objectives:

The Objectives of disaster response and relief jumbo ambulance are as follows;

1. To respond to any mass casualty incident.
2. To provide on-site treatment to patients in mass casualty incident.
3. To supply the required life saving equipment, consumables and medicines in mass casualty incident.
4. To supply personal protective equipment's and extrication devices in case of mass casualty incident.
5. To provide a central communication and coordination point for Medical incident command in mass casualty incident or disaster.
6. To complete necessary documentation of mass casualty incident.
7. To provide the electrical supply, safety tools, rest place for EMS providers, snacks and drinking water to rescuers in mass casualty incident.

The disaster response and relief Bus ambulance is an extremely specialized vehicle equipped with essential supplies needed to manage a mass-casualty incident or disaster. This cache includes: backboards, bandages, floodlights, airway supplies, blankets, portable generators, triage tags and additional triage tools, colored cones that correlate with triage tags and tarps, incident command vests, intravenous solutions and a special ALS pack with additional supplies such as advanced airway management adjuncts, additional intravenous supplies, etc. In regard to operational advantages, the disaster response and relief bus ambulance allows responding ambulances to keep much of their equipment in the vehicle for safe transport and care of patients. Response and relief bus ambulance can provide back up or resources to 30 to 50 patients in any incident.

Disaster Response and relief bus ambulance can respond to following situations like Landslide, Building or bridge collapse, Earthquake, Fire hazard, Floods, Cyclones, Explosion and Terrorist attacks, Motor vehicle collisions involving multiple casualties, Train Accidents, Stampede, etc.

In case of mass casualty incident or any disaster, Emergency response officer (ERO) in Emergency response centre (ERC) receives calls and dispatches jumbo ambulance immediately. ERC (108) managers are informed about the incident so that they can reach the site in time and assist in further Medical management of Multi Casualty Incident.

## **1.2 Salient features of the Project**

Disasters and Mass-casualty incidents present EMS providers with unique operational and logistical challenges. These can include multiple patients with varying degrees of injury or illness; Nuclear, Biological, Chemical (NBC) agents; the possibility of adverse weather conditions; scenes with multiple emergency agencies; difficult access and egress routes; and prolonged medical operations. Various EMS systems have seen that large scale emergencies can deplete significant resources in a short time. In response to this, specialized Disaster Response and Relief Bus ambulance need to be developed to provide better EMS response in Disasters.

The present proposal is to start-

- a. A pilot project of 1 jumbo ambulance launch in Maharashtra.
- b. One trained DOCTOR (MBBS/BAMS from recognised university & registered in Maharashtra under Maharashtra Medical Practitioner act), one trained paramedical staff (BSc / GNM – Nursing) - Trained as per national standards of medical protocols
- c. 24/7 uptime, with 8 hour shift operations, for the ambulance doctor. Doctors shall be posted in 3 shifts & 3 separate doctors as well as paramedical staffs shall be present on each day to keep system ready all the time.
- d. To contain a carefully selected list of drugs.
- e. Medical Equipment - To contain a series of carefully selected emergency  
Medical devices that are certified for pre-hospital use  
Are designed to work outdoors,  
Are dust and waterproof  
Besides coping with trauma, burn and multiple injury cases.
- f. 24 x 7 hour existing call centre 108 Emergency Response Centre (ERC) for managing and coordinating the ambulance services
- g. Jumbo Ambulance base station / ambulance parking space to be identified and decided by State Health Society, Maharashtra, Mumbai across Maharashtra.

## **2. Duration of the project:**

The tentative duration of the project will be five years from the date of issuing of LOI for the project and will be extended later by mutual consent from Supply and operationalization of jumbo ambulance.

### **2.1 Service Package**

The service package is defined as follows: Free of cost jumbo Ambulance Service to the emergency, critical patients capable of providing first aid as well as trauma care treatment to the affected individual/s in a medical emergency in any disaster or mass casualty incidence.

### **2.2 Investment and Ownership:**

- a. The jumbo ambulances and the control room will be owned by Government of Maharashtra.
- b. SHS, Maharashtra & NHM, Mumbai will require the Successful Bidder to operate the jumbo ambulances and control room through MEMS (108) call centre with a transparent and open method.
- c. SHS, Maharashtra & NHM, Mumbai will pay to the Successful Bidder the charges (as quoted) for services rendered in accordance with the terms of the TENDER DOCUMENT.
- d. Ownership of database and software and therefore the Intellectual Property rights for the database generated shall remain with SHS, Maharashtra & NHM, Mumbai
- e. SHS, Maharashtra & NHM, Mumbai also retains the right to require the Successful Bidder to adhere to accreditation by any national / international organization.
- f. Any claim on account of accident or otherwise will be governed under section 149 (2) of Motor Vehicle Act, 1988 & the provisions thereof will be binding on service provider to follow/observe the conditions laid therein and in any circumstances there will no breach of condition on the part of service provider so that claims will not be defeated by the Insurance company on the ground of breach of condition or for non-compliance of conditions.

## **2.3 Roles and Responsibilities, Obligations:**

### **2.3.1 NHM-SHS- GOVERNMENT:**

- 1) To reimburse capital cost for the procurement of well-equipped jumbo ambulances as per specifications in Annexure XI, XII A and XII B
- 2) Provide jumbo ambulance stations/shelters, offices and night halt facilities in suitable health care institutions.
- 3) Take up with the concerned authorities in the Health and family Welfare Department to issue necessary instructions for making available required emergency medical facilities and strengthen the facilities in all the Primary Health Centres, Community Health Centres, General Hospitals, and other hospitals in the district.
- 4) Make all efforts to ensure the availability of medical and paramedical staff, equipment, medical supplies, and drugs for effective handling of emergencies in the government hospitals and to coordinate with all departments for making the healthcare services available to the beneficiaries.
- 5) Undertake to coordinate with the concerned authorities in the Police, Fire, Transport, Highway Authorities, Medical Education and other departments to issue appropriate instructions to the field officers of these departments for making available required assistance and resources.
- 6) Issue suitable administrative instructions to the field officers of all concern departments in the government, so as to prevent diversion of the ambulances for any purposes other than as described in this agreement.
- 7) Provide statutory framework to enable efficient response to emergencies and establish policies and procedures that enhance better co-ordination among the multiple government departments and agencies.
- 8) **Disclaimer of the liability** – Government of Maharashtra, SHS & NHM, Mumbai shall not be liable for in respect of any damages or compensation payable in law on account of injury or death arising out of accident caused to any workman/employee or other person in the employment of the bidder or any sub-bidder as well as any claim made by third party against the bidder.

### **2.3.2. Responsibility of Successful Bidder**

1. Procurement of well-equipped Jumbo Ambulance as per Technical Specifications (Annex XI).
2. Provide technological leadership, administrative and managerial support as the Partner in an open and transparent manner to produce mutually agreed outcomes.
3. Develop a suitable integrated solution including Computer Technology Integration, Voice logger system, General Packet Radio Service (GPRS), Geographic Information systems (GIS), Geographical positioning systems (GPS), Automatic Vehicle Location & Tracking (AVLT) Computer Aided Dispatch (CAD) and Mobile Communication Systems integrated with existing 108 call center (Annex-XI)

4. Provide the Application Software for the project and the hardware components. The Successful Bidder shall update the software periodically to accommodate additional functions/ processes for effective delivery of service. Any hardware which requires replacement/upgradability with respect to the latest technological advancement, which in turn enables to make the emergency response service faster and more efficient, should be done by the bidder during the contract period at their own cost.
5. Promote public awareness in emergency response through various state agencies and departments
6. Operate the jumbo ambulances and ensure that ambulance services are available on a 24 x 7 hours and 365 days a year basis to the people without any charges levied from the public and make efforts to reach the required spot.
7. In case of Chassis built jumbo ambulance, the bidder must appoint body builder accredited as per I.S.O. 425 (E) dated 23-March-2007, issued by Ministry of Road Transport & Highways (MoRTH) Govt. Of India.
8. Service provider should take approval from ARAI or appropriate authority for the jumbo ambulance certifying that ambulance satisfy CMVR rules 1989 and guidelines regarding jumboambulance. Fees for certification shall be paid by service provider.
9. Or in case of built monocoque the vehicle shall comply all the technical specifications given in the tender document.
10. Jumbo ambulances should have GPS/GPRS device on it and two active mobile phone connections of with maximum local coverage. The Emergency Response Centre shall communicate with the jumbo ambulance by means of voice data as well. The data includes the destination name, landmark and other relevant information shall flash on the GPS/GPRS device monitor kept on jumbo ambulance. The map shall be displayed on this monitor with current position of ambulance, destination and all the nearest hospitals. In the later stage it should be possible to highlight the shortest distance to the destination as well as the hospital on the map displayed on the monitor. The device should also have facilities to log the status of emergency calls attended by the ambulances to the control room.
11. The basic minimum qualification of the DOCTOR to be appointed by the service provider shall be (MBBS/BAMS) from recognized university.
12. All doctors shall be given sufficient training to manage and handle all the equipment's used in jumbo ambulance. The same shall be certified by
  - a) Recognised institute or
  - b) By qualified trainer/Doctor who have trained them.
13. In the event of multiple causality or major accident jumbo ambulance shall be deployed depending upon the condition within stipulated time.(i.e. 10 min)
14. The dispatch time for jumbo ambulance shall be within 10 min.
15. Collate and store reports of patients served by the service.
16. Recruit, train and position the required man power (Annex-X), DOCTOR(MBBS/BAMS), Paramedical staff (Bsc/GNM – Nursing) who will be present in the jumbo ambulance & two Call takers (Science Graduate) who will be present in 108 ERC, Pune for three shifts.

17. Ensure that in jumbo ambulance one DOCTOR, one paramedic & one Driver shall be present at any given point of time to provide patient-stabilization, first-aid and other pre-hospital care. An illustrative list of total number of personnel involved in pre hospital emergency management and shall be appointed/hired by the Successful Bidder is attached as per (ANNEX- X).
18. To ensure comprehensive maintenance of the jumbo ambulance and all equipment's therein at his cost. Any warranty claims of the vehicle shall be coordinated and executed by bidder at SHS, Maharashtra and & NHM, Mumbai satisfaction.
19. The jumbo ambulance vehicle must be in working condition 24x7 hours. and in case of break-down, immediate replacement of 2 Ambulances not less than ALS standard provided for serving needy patients at his cost.
20. Jumbo ambulance shall be repaired within 7 days of breakdown.
21. Bidder shall replace at his cost all the missing tools or equipment's from the jumbo ambulance with tools and equipments of same specification from the supplier of the ambulance equipments and tools.
22. Bidder shall meet all expenses towards Annual Fitness certification, Maintenance, Minor & Major repairs, replacement of tyres, batteries etc.
23. Bidder shall maintain separate log books for vehicle and patient, stock register and status register in ambulance with relevant details (Appendix- A,B,C,D & E). Bidder shall also implement any system which SHS, Maharashtra & NHM, Mumbai intends to introduce.
24. Provide daily (operational), monthly (administrative and financial) reports and quarterly (fund utilization) statements to the SHS, Maharashtra and & NHM, Mumbai.
25. Attend periodical review meetings held by the Government or SHS, Maharashtra or & NHM, Mumbai (physically or virtually) for the assessment of the operationalization of the scheme.
26. Maintain separate financial accounts and records of its operations in the State. These accounts shall be duly audited by a Chartered Accountant firm as approved by SHS, Maharashtra and & NHM, Mumbai and furnished to SHS, Maharashtra and & NHM, Mumbai by the end of the first quarter of the succeeding year.
27. Make all attempts to attend every mass emergency call that is received at the Emergency Response Centre.
28. Bring in technology and service excellence and work towards improving delivery of emergency response of global standards over a period of time.
29. Jumbo ambulance shall be able to capture live video of the patients & surrounding while serving patients. Captured video shall be able to upload on MEMS Dashboard.
30. Liaise with various departments and agencies of the Government of India and the Government of Maharashtra.
31. Necessary training shall be given to Doctor, paramedic & Driver who will work on the jumbo ambulance. The training shall be given by recognized institute and syllabus/training module approved by NHM, Mumbai or State Health Society.

32. Both Driver & Paramedic staff shall be working under Doctor on duty in Jumbo ambulance.
33. Conduct periodic training programs to policy makers, government personnel
34. IEC to be undertaken by the Service Provider across Maharashtra.
35. Prepare the standard operating procedure framework (SOPF) for Emergency Response Centre in consultation with SHS, Maharashtra and & NHM, Mumbai
36. In case of Consortia, lead member shall be solely responsible for any default in execution and operation of the entire project.
37. During lean period or waiting time the jumbo ambulance shall be utilised as a Mobile Medical Unit which will cater to patients around Mumbai. (Till date place is decided Mumbai, place may change as per decision taken SHS/NHM) In the case of emergency this Jumbo ambulance will report to incidence-crisis or major calamities.
38. Service provider shall follow all the existing Labour laws for man power recruited at Jumbo ambulance & 108 ERC. NHM is not liable for any irregularities if followed by service provider regarding Labour Law.

### 3. Time Schedule:

All the components of Turn Key Contract will be completed and made functional by the Service Provider as per the following schedule.

<b>Finalization / Approval of Prototypes</b>	45 days from the date of issue of work order (Ratio)
<b>Body Building / Fabrication of the JUMBO ambulance and delivery thereof ( 1 JUMBO Ambulance)</b>	30 days from the date approval of prototype
<b>Training</b>	Completion of training before delivery of jumbo Ambulances and the necessary training to manage calls from jumbo ambulance will be given to 108 ERC call assistant staff.
<b>Launch of operation</b>	Maximum 7 days from delivery of jumbo ambulances.

### 3.1 **BID VALIDITY**

The Bid shall remain valid and open for acceptance for a period of 120 days from the specified date of Price Bid opening.

### 3.2. **Monitoring:**

a. An appropriate entity/committee has been designated by, State Health Society Government of Maharashtra, to monitor the procurement and operations of the project.

- |  |   |                  |
|--|---|------------------|
| 1. Commissioner FW & & Director, NHM   | - | Chairman         |
| 2. Director of Health Services, Mumbai | - | Member           |
| 3. Project Director, EMS, NHM          | - | Member Secretary |
| 4. Joint Director Technical, NHM       | - | Member           |
| 5. Joint Director Finance, NHM         | - | Member           |
| 6. Programme Officer, EMS, NHM         | - | Member           |
| 7. Programme Officer, IT EMS, NHM      | - | Member           |

b. Verification and approval for Medical equipment and instruments in the jumbo ambulances, medicines and drugs, Protocol for the Training of DOCTOR will be done by expert committee designated by State Health Society, Maharashtra.

c. Verification and approval for assessing IT specifications and all hardware and software for the existing Control Room and ambulances as per specifications will be done by expert committee designated by State Health Society, Maharashtra.

d. Monitoring committee shall take yearly review & decide about contract renewal of the project.

- Monitoring and evaluation of the activities will be done through the Management Information System and various reporting formats developed for the purpose.
- The monitoring committee will look in to the updation / replacement of the software and hardware applications periodically

### 3.3 **Clarifications**

Organizations requiring any clarification on the TENDER document shall contact the Purchaser **by letter or email 10 days prior to last date & time of closing tender . Email ID – [http://nhm.procurement@gmail.com](mailto:http://nhm.procurement@gmail.com)**. phone no- 022-22717609/22717610 Any queries / clarifications sought after the last date of submission thereof shall be considered void.

### 4. **Language**

All related correspondence and documents should be written in English language. Supporting documents and printed literature furnished by the Applicant with the Application may be in any other language provided that these are accompanied by appropriate translations of the pertinent passages in the English language. Supporting material, which are not translated into English, may not be considered. For the purpose of interpretation and evaluation of the Application, the English language translation shall prevail.



#### **4.1 Currency**

The currency for the purpose of the Application shall be the Indian Rupee (INR). The conversion to Indian Rupees shall be based on the closing exchange rate published by the Reserve Bank of India. In all cases where the original figure is in foreign currency, such original figures in the relevant foreign currency and the INR equivalent thereof must be given. The exchange rate(s) applied shall be clearly stated. NHM, however, reserves the right to use any other suitable exchange rate for the purpose of uniformly evaluating all Applicants.

#### **5. Amendment of tender document**

**5.1** At any time prior to the deadline for Sale of tender, the Purchaser may amend the tender documents by issuing Addenda/Corrigendum.

**5.2** Any addendum/corrigendum as well as clarification thus issued shall be a part of the tender documents. And it will be assumed that the information contained in the amendment will have been taken into account by the Tenderer in its tender.

**5.3** To give prospective Tenderers reasonable time in which to take the amendment into account in preparing their tenders, the Purchaser shall extend, at its discretion, the deadline for submission of tenders, in which case, the Purchaser will notify all Tenderers by placing it on website of the extended deadline and will be binding on them..

#### **6. Submission of tenders**

**Tender should be submitted online on or before last date of submission.**

Tender should be submitted in two envelopes i.e. Technical Bid in envelop no.. 1 & Commercial bid in Envelop no. 2. Both bids i.e. Technical Bid & Commercial Bid should be put in one envelop indicating Bid No. Subject & Date of opening of Bid

#### **6.1 Technical Bid - Envelope 1**

The Bidder should furnish the following enclosures in a separate cover (herein after called Envelope 1.

##### **Enclosures**

- i. Letter of Application (ANNEX- I)
- ii. Power of Attorney for Signing of the Application (in case of Consortium, this would need to be provided by the Lead Member. (ANNEX- II)
- iii. In case of Consortium, Power of Attorney for signing of Application by the Lead Member (ANNEX- III)
- iv. Details of Applicant (in case of Consortium, this would need to be provided by all the members of the consortium).(ANNEX- IV)
- v. Experience of Applicant (in case of Consortium, Technical experience of Member of consortium) (ANNEX- V) Financial Capability of the Applicant (in case of Consortium, Financial Capability of Lead member) - (ANNEX- VI). In case of Consortium, Registered Memorandum of Understanding (MoU) and

Agreement amongst the members. Audited Balance sheets / Profit and Loss A/c Statements

- vi. Bank Draft issued by Nationalised Bank / Scheduled Bank towards the cost of TENDER Document
- vii. EMD shall be Rs. 1lakh 10 thousand in the form of Demand Draft or a Bank Guarantee issued by Nationalised Bank only in favour of State Health Society, Maharashtra payable at Mumbai.
- viii. An affidavit clearly mentioning that the Applicant has not been blacklisted by SHS, Maharashtra or any of other state government or government organization in the past 5 years (in case of consortium, the same needs to be submitted separately for all consortium members) (ANNEX- VII)
- ix. Letter of Exclusivity (in case of application by Consortium) - (ANNEX- VIII)
- x. A letter of declaration (Anti Collusion Certificate) mentioning that the Applicant/ Consortium will not collude with the other Applicants/Consortiums between the Tender phase and the TENDER phase of the project (ANNEX- IX)
- xi. A copy of the TENDER document signed and sealed in all pages by the bidder.
- xii. Details of work unit (Annex- XIII)
- xiii. Performance Statement (Annex- XIV)
- xiv. Authorization from Manufacturer for purchase of Vehicles/ambulances
- xv. Authorization from manufacturer for purchase of Medical Equipments
- xvi. Check List (Annex-XV)

**xvii. Declaration :**

A successful bidder shall produce Declaration on stamp paper of Rs. 100 stating that all the terms and conditions in the tender document are binding. Affidavit on non-judicial stamp paper of Rs. 100/- that the rates quoted in the tender are not higher than the rates quoted to other Govt. Departments/Govt. Undertakings or any prevailing rate contracts.

**6.2 Price Bid - Envelope 2**

Bidder must fill in item wise prices as shown in Annex-XVI.

Envelope 2 contains the price bid of the tender. Each page of the price list should be duly signed by the Bidder affixing the office seal. The rate quoted by the bidder shall be inclusive of all taxes (sales tax, excise duty, customs duty as the case may be and freight and insurance charges etc). The price bid shall include all items under clause 2.3.1, 2.3.2.and in general all conditions of TENDER DOCUMENT.

- i. Capital Cost for procurement of well-equipped JUMBO Ambulances with Technical Specifications and medical equipment for 1 jumbo Ambulances as per specifications in ANNEX- XII & XIII for the financial year 2016-17.
- ii.
  - i) Operational Cost for 1 Jumbo Ambulances (for the Financial Year 2016 -17)  
(Per annum)
  - ii) Operational Cost for 1 Jumbo Ambulances (for the Financial Year 2017 -18)

Tender no. 11 /16-17/ Jumbo Ambulance

- (Per annum)
- iii) Operational Cost for 1 Jumbo Ambulances (for the Financial Year 2018 -19  
(Per annum)
- iv) Operational Cost for 1 Jumbo Ambulances (for the Financial Year 2019 -20  
(Per annum)
- v) Operational Cost for 1 Jumbo Ambulances (for the Financial Year 2020 - 21  
(Per annum)

**vi. The above list is illustrative and not exhaustive.**

The two separate covers {Technical Bid – (Envelope 1), and Price Bid – (Envelope 2)} shall be placed in a large cover which shall be sealed and super scribed as **Tender for Jumbo Ambulance**.

The capital cost shall include procurement of vehicle, fabrication of vehicle & equipment's for the jumbo Ambulances shall be from leading reputed brands (original manufacturer).

Split up of capital cost must be shown separately. Split up shall also be given for additional capital cost related to scaling up the project.

The operational cost shall include operational staff salary, Maintenance cost of jumbo ambulance and equipments, running cost for jumbo ambulances, cost of consumables, medicines for management of mass emergency casualties. Split up of Operational cost must be shown separately.

**Other conditions:**

- i. The Agreement will be valid for 5 (five) years from supply & operationalization of jumbo ambulance.
- ii. The operational cost shall be quoted for the entire contract period.
- iii. Operational cost shall be quoted for jumbo ambulance per month
- iv. Mandatory to attend each and every emergency call.
- v. The operational cost shall include all maintenance costs.
- vi. Approved clarification to the points / queries raised in the pre-bid meeting shall constitute as part of tender document.

**6.3 Opening of Bids:**

Technical Bids (Envelope 1) of all the Bidders will be opened at the time, date and place indicated in the key details, in the presence of Bidders/ representatives who choose to attend the Bid opening. The Bidders/ representatives, who are present at such opening, shall sign a register evidencing their attendance as a witness to the Bids opening process. If any Bidder, not fulfilling technical criteria will be disqualified at this stage only. The Bidder who are found eligible after technical evaluation will only be invited to be present at the time and date of the opening of Price Bid (Envelope 2) to be intimated later on for participation.

**6.4 Evaluation of the Bids**

The bid will be evaluated by taking the capital expenses, additional capital expenses to scale up the project, operational expense for the entire period of the contract for evaluating L1 bidder. If any bidder is not technically qualified, such bidder will be disqualified at this stage only.

**6.6 Earnest Money Deposit (EMD)**

EMD shall be Rs. 1 lakh 10 thousand in the form of Demand Draft or a Bank Guarantee issued by Nationalised Bank only in favour of State Health Society, Maharashtra payable at Mumbai.

**6.7 Acceptance of Bid**

1. Government of Maharashtra reserve the right to accept or reject any or all tenders without assigning any reason.
2. The acceptance of the tender will be communicated to the Successful Bidder in writing.

**7. PAYMENT TERMS**

SHS, Maharashtra shall provide compensation to Service Provider in following manner;

**Reimbursement of Capital Expenditure**

The reimbursement of the capital expenditure for Procurement of jumbo Ambulances to Service Provider after actual operation of jumbo ambulance from the date of submission of bills / vouchers within 30 days only after due verification by State Health Society / NHM/Govt. of Maharashtra.

**Reimbursement of Operational Expenses**

The SHS, Maharashtra shall reimburse the 70 % operational expenditures on monthly basis from date of submission of bill & 30 % operational expenditures on quarterly basis will be released after through analysis & verification of system generated proofs as stated in tender on quarterly basis. Any deductions/penalties as per clause 7.3 of this tender and applicable in the quarter shall be deducted from quarterly payment of remaining 30% & as per availability of funds.

**The operational expense shall include:**

- a) Salary of the staff (including Training) – Operation of Control room and Jumbo Ambulance.
- b) Maintenance cost of jumbo ambulance, jumbo ambulance equipment's and Control room
- c) All other operational cost for Medicines, Surgical, Consumables, and Disposables etc.

Production of certificate dully signed by the competent Authority of the Hospital for admitting the patient will be mandatory. Bidder to quote operational cost jumbo ambulance per month.

In case of any dispute between the parties, Service Provider shall not stop or delay the service to SHS, Maharashtra.

### **7.1 Performance Security**

The Successful Bidder will have to pay equal to 5% of total contract value as Performance Security by way of a Demand Draft or Bank Guarantee issued by Nationalised Bank only valid for 5 years and 3 months from the date of signing the Agreement in favour of SHS/NHM, Maharashtra within 30 days of award of contract. The proceeds of the Performance Security shall be payable to the **State Health Society Maharashtra** as part of compensation for any loss resulting by failure of the Service Provider's to complete his obligations.

### **7.2 EMD Refund**

- a) EMD of the Successful Bidder may at the discretion of SHS/NHM, Maharashtra be adjusted toward the security deposit payable by him. The EMD will be refunded to the non Successful Bidder after finalization of the tender as far as possible within 4 weeks.
- b) The EMD of the bidder will be forfeited without further notice, if the bidder files wrong or false information / affidavit to get qualified for TENDER DOCUMENT

### **7.3 PENALTY**

#### **A. Penalty in case of Delay in operationalization of the jumbo Ambulance Project:**

Any delay in launching the project after receiving the jumbo ambulances will invite penalty of @ 0.5 % per week to maximum of 10% of the total contract value.

If the jumbo ambulances / equipment are received in damaged conditions the service provider will have to rectify the defects pointed out at his own cost. Payment for executed work will be released only after successful completion of the work to be certified by the SHS/NHM, Maharashtra.

#### **B. Non availability of doctor, paramedical staff and driver in on road ambulance-**

Penalty of Rs. 1000 for Doctor and Rs. 500 for Driver. Respective ambulance will be declared off road immediately till the Doctor or Driver is made available.

#### **C. Non Providing Jumbo ambulance service in any case after receiving emergency call to ERC-**

In such case penalty will be imposed as Rs. 2000 per case and particular case will be cross verified by EMS cell before imposing in the penalty.

#### **D. Off road hours exceeding 72 Hrs. at a time -**

If in any case, ambulance remains off road for more than 72 hours then penalty shall be liable to Service Provider as Rs. 2000 per day.

#### **E. Non-Functioning of GPS/GPRS device-**

Penalty of Rs. 1000 will be imposed on ambulance per day basis in case of non-functioning of GPS/GPRS device.

**F. In case of untrained Doctor, paramedical staff or Driver recruited in jumbo ambulance and if any Doctor could not operate the medical equipment installed in jumbo ambulance-** Immediate termination of particular Doctor or Driver and Rs. 5,000/- as a penalty for respective case will be imposed on service provider. However, this penalty shall be imposed after verification by EMS team and one representative of Service Provider.

**G. In case of non-functioning or non-availability of biomedical equipment's such as,**

**I. Defibrillator**

**II. Ventilator**

**III. Volumetric & Syringe Infusion Pump**

**IV. Suction Pump Manual & Electronic**

**V. Oxygen System Case of non-availability of or non-functioning of Biomedical Equipment's.**

If these five vital medical equipments are not available or in non-functioning condition, then the penalty of Rs. 2,000/- per equipment per month will be imposed on the Service Provider. It will be the responsibility of Service Provider to rectify the defective medical equipment and make it functional within the period of 48 hours after date of receipt of report to Service Provider.

**H. Poor maintenance of jumbo ambulance Vehicle-**

If any ambulance is found in poor maintained condition such as non-working of AC, Battery, Head lights, poor tyre condition, horn and siren then the penalty of Rs. 2,000/- will be imposed on Service Provider. Also, the Service Provider will need to rectify the defects within 7 working days from the date of reporting to the on duty doctor or driver of service provider.

**I. In case of non-maintenance of medical stock in MEMS ambulance.**

The Service Provider is bound to maintain all medicines in the ambulance in proper stock. If any of the medicine as prescribed in tender found to be not available then the penalty of Rs. 500 per ambulance will be imposed on the Service Provider. The Service Provider will need to rectify and maintain the missing stock within next 7 days

#### **7.4 Termination of Agreement**

This Agreement may be terminated by SHS/NHM, Maharashtra by issuing written notice to Service Provider if any breach of the terms of Agreement is caused by Service Provider, unless such breach is cured or the service is improved to the satisfaction of SHS/NHM, Maharashtra in thirty (30) days after the written notice. The performance security shall be forfeited if the agreement is terminated by SHS, Maharashtra. SHS/NHM, Maharashtra will be free to forfeit Performance security for any loss suffered by SHS/NHM, Maharashtra on account of such breach of contract.

(1) Service Provider cease to work from date of termination of agreement however, will continue to provide services till the new service provider is in position.

**Or**

(2) Three months prior notice will be issued by either side, so that substitute arrangement with new service provider can be made

#### **7.5 FORCE MAJEURE**

For purposes of this Contract, Force Majeure means an event beyond the control of the parties to the Contract and not involving either party's fault or negligence and not foreseeable events.

- a. If, at any time during the existence of the Contract, either party is unable to perform in whole or in part any obligation under this contract because of an event rendering performance of obligations impossible, which include acts of God, war, revolutions, hostility, civil commotions, strike, floods, earthquake, epidemics, quarantine restrictions, freight embargoes or explosions, then the date of fulfilment of contract shall be postponed during the period when such circumstances are operative.
- b. The party which is unable to perform its obligations under the present contract shall, within seven (07) days from the occurrence of Force Majeure event, inform the other party with suitable documentary evidence. Non-availability of any component, etc or any price escalation or change in any duty, tax, levy, charge, etc shall not be an excuse for the Service Provider for not performing his obligations under this clause / contract.
- c. Any waiver / extension of time in respect of delivery or commissioning shall not be deemed to be a waiver / extension of time in respect of remaining deliveries / commissioning.
- d. In such inability on account of force majeure to perform continues for a period of more than three months, each party shall have the right to be released from further performance of the contract, in which case, neither party shall have the right to claim damages from the other. However, all prior performance shall be subject to contract terms.

**7.6 INSURANCE**

Service Provider shall maintain adequate general comprehensive liability insurance and insurance cover/s for his personnel's engaged in performing services under jumbo Ambulance Service. Service Provider shall extend insurance cover on back to back basis i.e. as provided by the concerned insurance agency, and shall not be liable for any claim not covered by such an insurance policy. Upon Service Provider's request, SHS/NMH, Maharashtra shall provide support to obtain such insurance covers.

Service providers shall extend insurance cover in the name of SHS/NHM, Maharashtra /Govt. of Maharashtra to all jumbo ambulances in fixtures and all medical equipment.

**7.7 Warrantee & Annual Maintenance Contract**

All equipments and fabrication of jumbo ambulances are covered under comprehensive warranty for five years. SHS/NHM, Maharashtra shall enter into comprehensive annual maintenance contract after the warranty period. Service Provider shall liaise and coordinate with Annual Maintenance Contract (AMC) contractors to receive services under such AMC's.

**7.8 Rights of the Government:**

Government reserves the right to cancel the entire bidding process at any point of time without giving any reason. Number of ambulances may increase (up to 10) or decrease depending on circumstances and as per decision of NHM, Maharashtra.



## ANNEXTURE - I

### **Format for Letter of Application**

*[On the Letter head of the Applicant (in case of Single Applicant) or Lead Member (in case of a consortium)]*

To  
Commissioner(FW) & Mission Director  
(Procurement Cell)  
National Health Mission  
3<sup>rd</sup> Floor, Arogya Bhavan,  
Mumbai: - 400 001.

Dear Sir

Having examined the tender document, the receipt of which is hereby acknowledged, we, the undersigned, offer to supply and deliver the goods under the above-named Contract in full conformity with the said tender document and our financial offer in the Price schedule submitted in Envelop No. 2 which is made part of this tender.

We undertake, if our tender is accepted, to deliver the goods in accordance with the delivery schedule specified in the tender document.

If our tender is accepted, we undertake to submit the security deposit in the form, in the amounts, and within the times specified in the tender document.

We agree to abide by this tender, for the Tender Validity Period specified in the tender document and it shall remain binding upon us and may be accepted by you at any time before the expiration of that period.

Until the formal final Contract is prepared and executed between us, this tender together with your written acceptance of the tender and your Acceptance of Tender, shall constitute a binding Contract between us. We understand that you are not bound to accept the lowest or any tender you may receive.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

In the capacity of \_\_\_\_\_

Duly authorized to sign this bid for and on behalf of \_\_\_\_\_

**ANNEXTURE - II**

**Format for Power of Attorney for Signing of Application**

*(On a Stamp Paper of relevant value)*

**Power of Attorney**

Know all men by these presents,

We..... (name and address of the registered office) do hereby constitute, appoint and authorise Mr/Ms.....(name and residential address) who is presently employed with us and holding the position of ..... As our attorney, to do in our name and on our behalf, all such acts, deeds and things necessary in connection with or incidental to our bid for jumbo Ambulance Services Project in Maharashtra including signing and submission of all documents and providing information / responses to the NHM, GoM, representing us in all matters before NHM, and generally dealing with NHM in all matters in connection with our bid for the said Project.

We hereby agree to ratify all acts, deeds and things lawfully done by our said attorney pursuant to this Power of Attorney and that all acts, deeds and things done by our aforesaid attorney shall and shall always be deemed to have been done by us.

Dated this the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_  
For \_\_\_\_\_

(Name, Designation and Address)

Accepted

\_\_\_\_\_ (Signature)

(Name, Title and Address of the Attorney)

Date : \_\_\_\_\_

**Note:**

*To be executed by the Lead Member in case of a Consortium.*

*The mode of execution of the Power of Attorney should be in accordance with the procedure, if any, laid down by the applicable law and the charter documents of the executants(s) and when it is so required the same should be under common seal affixed in accordance with the required procedure.*

*In case the Application is signed by an authorised Director of the Applicant, a certified copy of the appropriate resolution/ document conveying such authority may be enclosed in lieu of the Power of Attorney.*

*In case the Application is executed outside India, the Applicant has to get necessary authorisation from the Consulate of India. The Applicant shall be required to pay the necessary registration fees at the office of Inspector General of Stamps.*

### ANNEXTURE – III

#### **Format for Power of Attorney for Lead Member of Consortium**

*(On a Stamp Paper of relevant value)*

#### **Power of Attorney**

Whereas the SHS/NHM, Maharashtra, Government of Maharashtra (GoM), has invited applications from interested parties for establishing and running of jumbo Ambulance Services Project.

Whereas, the members of the Consortium are interested in bidding for the Project and implementing the Project in accordance with the terms and conditions as per TENDER DOCUMENT and other connected documents in respect of the Project, and

Whereas, it is necessary under the TENDER Document for the members of the Consortium to designate the Lead Member with all necessary power and authority to do for and on behalf of the Consortium, all acts, deeds and things as may be necessary in connection with the Consortium's bid for the Project who, acting jointly, would have all necessary power and authority to do all acts, deeds and things on behalf of the Consortium, as may be necessary in connection with the Consortium's bid for the Project.

NOW THIS POWER OF ATTORNEY WITNESSETH THAT;

We, M/s. \_\_\_\_\_ (Lead Member), M/s \_\_\_\_\_ (Member) *(the respective names and addresses of the registered office)* do hereby designate M/s. \_\_\_\_\_ being one of the members of the Consortium, as the Lead Member of the Consortium, to do on behalf of the Consortium, all or any of the acts, deeds or things necessary or incidental to the Consortium's bid for the Project, including of application/proposal, participating in conferences, responding to queries, of information/ documents and generally to represent the Consortium in all its dealings with the Department, any other Government Organization or any person, in connection with the Project until culmination of the process of bidding and thereafter till the Concession Agreement is entered into with SHS/NHM, Maharashtra and service provider.

We hereby agree to ratify all acts, deeds and things lawfully done by Lead Member, our said attorney pursuant to this Power of Attorney and that all acts deeds and things done by our aforesaid attorney shall and shall always be deemed to have been done by us/Consortium.

Dated this the \_\_\_\_ day of 20\_\_

(Executants)

*(To be executed by all the members of the Consortium)*

**Note:** *The mode of execution of the Power of Attorney should be in accordance with the procedure, if any, laid down by the applicable law and the charter documents of the executant(s) and when it is so required the same should be under common seal affixed in accordance with the required procedure.*

**ANNEXTURE - IV**

**Details of Applicant**

1.	<b>Name of Project</b>	JUMBO AMBULANCE SERVICE PROJECT
2.	<b>Details of the Applicant</b>	
i	Name and Address of the organization with postal code	
ii	Telephone number with STD code	
iii	Fax No	
iv	Email address	
v	Year of establishment	
vi	Chief Executive: Name, Address, Telephone No, email id	
vii	Chief Contact person: Name, Address, Telephone No, email id	

**In case of a Consortium:**

- a. The information above (2) should be provided for all the members of the consortium.
- b. Information regarding role of each member should be provided as per table below:  
\*Specify whether Lead Member or Member.

No	Name of Member	Role
1.		
2.		

**Signature of authorized signatory  
With Seal of the Organization**

**Name of Signatory:  
Designation:**

## ANNEXTURE – V

### Relevant Experience of the Applicant

[Details to be provided only for the Applicant/Lead Member (in case of Consortium)]

1.1	Details of Organization		
A.	Name of the organization		
B	Legal entity	See instruction 1	
C	Year of in corporation		
D	Registration No.	See instruction 2	
E	Registered Address		
F	Does Memorandum of Association permit the organization to carry out the business of ambulatory services	See instruction 3	
1.2	Relevant Experience (Type 1) #		
A	Years of Experience in ambulance service operations		
B	Current areas of operation – specify key locations		
		<b>FY 2014-15</b>	<b>FY 2015-16</b>
C	Certificate of satisfactory performance (see instruction 11)		

Project experience of the Applicant’s parent company or any associate company will not be considered for eligibility under the Experience criteria.

#### **Instruction 1:**

Legal entity can be only one of the following:

- a. Company registered under the Companies Act, 1956 including Company registered under Section 25 of the Companies Act, 1956, or an equivalent law outside India
- b. Society registered under The Societies Registration Act, 1860,
- c. Trust registered under The Indian Trust Act, 1882.

#### **Instruction 2**

Please enclose Registration / Incorporation Certificates.

#### **Instruction 3**

Please enclose Memorandum & Articles of Association, Byelaws or Trust Deed as the case may be.

#### **Instruction 4:**

- a. In case ambulances are owned submit copies of Registration Certificates.
- b. In case of any certification by the Government / Semi Government / Charitable trust for the ambulances owned, provide documentary evidence for the same.

**Instruction 5**

In case ambulances are not owned, please enclose the relevant existing documents such as MOUs / Agreements signed with the ambulance owners

**Instruction 6**

Provide summary of all current staff – name, age, education qualification (Degree/diploma/certificates with specific reference to Project, training, number of Years in employment, total relevant experience as a Paramedic/ Emergency Response Centre (ERC) employee. (Proforma A)

**Instruction 7**

Please submit consolidated yearly performance report of ambulances (No. of calls, number of patients shifted, distance covered (Proforma B)

**Instruction 8**

Details of area of operation be separately provided for covering the distance. (Proforma C)

**Instruction 9**

Provide letter of award / copy of Registered agreement / MOU in support of the eligibility conditions. (Proforma-D)

**Instruction 10**

Bidder must submit certificates of the original manufacturer authorising purchase of Vehicles/ Ambulances and Medical equipments (Proforma E & F)









**PROFORMA - D**

**Certificate from the Client**

**C E R T I F I C A T E**

This is to certify that \_\_\_\_\_ (Name of the Applicant) has been operating a fleet of \_\_\_\_\_ (No of ambulances) ambulances with ... .. No of employees since \_\_\_\_\_ (mention period) satisfactorily.

**Signature & Seal of the Authorized Signatory  
of the Client**

**PROFORMA - E**  
**AUTHORISATION FROM MANUFACTURER FOR PURCHASE OF VEHICLE/  
AMBULANCE**

No. \_\_\_\_\_ dated

To,  
Commissioner (FW) & Mission Director, NHM  
Procurement Cell, 2nd Floor, Arogya Bhavan,  
St. George's Hospital Compound, Mumbai - 400 001

**Tender Reference No.:** -----

Dear Sir,

We \_\_\_\_\_ who are established and reputable manufacturers of \_\_\_\_\_ (name and description of Vehicles/Ambulances offered) having factories at \_\_\_\_\_ (address of factory) do hereby authorize M/s. \_\_\_\_\_ (Name and address of Authorized Person) to submit a bid, and sign the contract with you for the goods manufactured by us against the above mentioned tender for the State Health Society/ NHM, Govt. of Maharashtra.

No company of firm or individual other than M/s. \_\_\_\_\_ are authorized by us to compete in the bid, and conclude the contract in this regard to transact against this specific tender for the supply of Vehicles/ Ambulance.

Further we state that we are possessing the valid license to manufacture this product (PLEASE ENCLOSE THE COPY OF LICENCE) and we hereby undertake to supply the Vehicles/ Ambulances required by State Health Society/ NHM, Govt. of Maharashtra as mentioned in this Tender.

We hereby extend our full guarantee and warranty as stipulated in the tender document.

Yours faithfully,

(Name of manufacturer)

**Note: This letter of authority should be on the letterhead of the manufacturer and signed by a person competent having the power of attorney legally to bind the manufacturer. It should be included by the Bidder in Bid Document as mentioned in Annex- V, Instruction No. 12.**

**PROFORMA - F**  
**AUTHORISATION FROM MANUFACTURER FOR PURCHASE OF MEDICAL**  
**EQUIPMENTS**

No. \_\_\_\_\_ dated

To,  
Commissioner (FW) & Mission Director, NHM  
Procurement Cell, 2nd Floor, Arogya Bhavan,  
St. George's Hospital Compound, Mumbai - 400 001

**Tender Reference No. : -----**

Dear Sir,

We..... who are established and reputable manufacturers of .....(name and description of medical equipments offered) having factories at .....(address of factory) do hereby authorize M/s. ....(Name and address of Authorized Person) to submit a bid, and sign the contract with you for supply of medical equipments manufactured by us against the above mentioned tender for the State Health Society/ NHM, Govt. of Maharashtra.

No company of firm or individual other than M/s. \_\_\_\_\_ are authorized by us to compete in the bid, and conclude the contract in this regard to transact against this specific tender for the supply of medical equipments.

Further we state that we are possessing the valid license to manufacture this product (PLEASE ENCLOSE THE COPY OF LICENCE) and we hereby undertake to supply the medical equipments required by State Health Society/ NHM, Govt. of Maharashtra as mentioned in this Tender.

We hereby extend our full guarantee and warranty as stipulated in the tender document.

Yours faithfully,

**(Name of manufacturer)**

**Note: This letter of authority should be on the letterhead of the manufacturer and signed by a person competent having the power of attorney legally to bind the manufacturer. It should be included by the Bidder in Bid Document as mentioned in Annex- V, Instruction No. 12.**

**ANNEXTURE – VI**

**FINANCIAL STATUS**

<b>Gross turn over (Rs. in crores)</b>			<b>Net Worth (FY Ending 31-03-2015)</b>
<b>Financial year for reporting</b>			
2013-14	2014-15	2015-16	

**Instruction 1:**

“Gross Income” means aggregate value of the realisation made from sale, supply or distribution of goods or on account of services rendered, or both by a Company during the financial year.

**Instruction 2:**

- a. The financial year means year commencing on 1<sup>st</sup> April and ending 31<sup>st</sup> March.
- b. The bidder should provide own financial statements to demonstrate eligibility. Financial Capability of the Applicant’s associate company would not be considered for computation of the Financial Capability of the Applicant.

**Instruction 3:**

- a. The bidder shall provide the audited annual financial statements for **each of the last** three years ( FY 2013-14, FY 2014-15 & FY 2015-16) and Net Worth as on 31.03-2015 certified by Chartered Accountant as required for this TENDER failure, to do so would result in a non-responsive bid.

ANNEXTURE - VII

**Format for Affidavit Certifying that Entity / Promoter(s) /Director(s) of Entity are not Blacklisted (On a Stamp Paper of relevant value)**

**Affidavit**

I, M/s. .... (Sole Applicant / Lead Member / Member), (the names and addresses of the registered office) hereby certify and confirm that we or any of our promoter(s) / director(s) are not barred by NHM/ or any other entity of GoM or blacklisted by any state government or central government / department / organization in India from participating in Project/s, either individually or as member of a Consortium as on the \_\_\_\_\_ (Date of Signing of Application).

We further confirm that we are aware that, our Application for the captioned Project would be liable for rejection in case any material misrepresentation is made or discovered at any stage of the Bidding Process or thereafter during the agreement period.

Dated this .....Day of ....., 2011.

Name of the Applicant

.....  
Signature of the Authorised Person

.....  
Name of the Authorised Person

Note:

*To be executed separately by all the Members in case of Consortium.*

**ANNEXTURE - VIII**

**Letter of Exclusivity**

I, we, \_\_\_\_\_, hereby declare that we are/ will not associate with any other firm/entity/consortium for submitting an application for the project under consideration.

Dated this the \_\_\_\_\_ day of \_\_\_\_\_ 2015

For \_\_\_\_\_

(Name, Designation and Address of the Chief Executive Officer of the applicant (lead organization in case of consortium )

Accepted

\_\_\_\_\_(Signature)  
(Name, Title and Address of the Applicant/s)  
Date : \_\_\_\_\_

**Note:**  
*To be executed separately by all the Members in case of Consortium.*

## ANNEXTURE - IX

### **Anti Collusion Certificate**

We hereby certify and confirm that in the preparation and submission of our proposal for jumbo Ambulance service project, Government of Maharashtra”, We have not acted in concert or in collusion with any other Bidder or other person(s) and also not done any act, deed or thing which is or could be regarded as anti-competitive.

We further confirm that we have not offered nor will offer any illegal gratification in cash or kind to any person or organization in connection with the instant proposal.

Dated this \_\_\_\_\_ Day of -----, 2015

For \_\_\_\_\_

(Name)  
Authorized Signatory

Note – To be issued by separately by all members in case of consortium.



## ANNEXTURE – X

### **Training for Emergency Personnel** **Pre-hospital Personnel**

Necessary training shall be given to paramedics will works on the jumbo ambulance. The training shall be given by recognized institute & syllabus/training module approved by NHM/STHS, GoM.

#### **Ambulance Driver -**

- Vehicular Safety Checks
- Elements
- Ambulance Driving Techniques
- Accident Avoidance and Crash Procedures
- Basic Life Support
- Disaster Management Protocols
- Communications
- Ambulance Operations
- GIS/GPS Navigation
- Vehicle Tracking

#### **Emergency Medical Technician (Doctor ) –**

- In Depth Anatomy and Physiology
- Primary Care Theory
- Trauma Care Theory
- IV Administration and Theory
- Nasopharyngeal Suctioning
- D50W Administration Theory
- Pharmacology
- Cardiac Monitoring
- Oxygen Delivery Theory and Practical
- Patient Assessments
- Communications
- Ambulance Operations
- Trauma
- CPR
- AED
- Clinical Hospital Practice
- Ambulanced Trauma Management
- Advanced Cardiac Life Support
- Paediatric Life Support
- Medical Management
- Core issues

### **Paramedical Staff -**

- Pre hospital Care Introduction
- Anatomy and Physiology
- Primary Care Theory
- Pharmacology and IV administration Theory
- Oxygen delivery and suctioning
- Patient Assessment
- Basic Life Support (BLS),
- CPR and AED
- Ambulance Medical Management
- Cardiac Monitoring
- Trauma Care Theory
- Trauma
- Ambulance Operations
- Communication
- Disaster Management Protocols
- Transportation
- Ambulance Practice
- Clinical Hospital Practice
- Child Birth & Delivery

### **Communication Officer (Existing ERC -108) -**

- Dispatch System
- Telecommunication Essentials
- Protocol Instruction and Practice
- Roles of the Communication Officer
- Operations
- Legal issues
- Quality Improvement

## Annexure – XI

### SPECIFICATIONS OF JUMBOAMBULANCE

#### DETAILS OF SPECIFICATIONS

Nature of work	Number of Vehicles
Supply of Jumbulance on turn key basis as per the specification DETAILED BELOW	1

**TECHNICAL SPECIFICATION OF JUMBULANCE (Large Multi Stretcher Ambulance):** The specification consists of four parts :

- I. Vehicle Chassis
- II. Vehicle Fabrication and Accessories
- III. Medicine, Consumables & Equipment's
- IV Capturing real time Video

#### I. VEHICLE CHASSIS SPECIFICATION

The specifications of the vehicle chassis shall be as follows

<b>1. CHASSIS DIMENSIONS</b>		
i	Wheel base	3850 – 4200 mm
ii	Overall width	2000 – 2400 mm
iii	Overall Length	6200 – 8500 mm
iv	Overall Height	2200 – 2900 mm
iv	Minimum usable Passenger platform width	6.6feet
v	Minimum usable Passenger platform length	14.3feet ( Excluding Driver area)
vi	Minimum Ground	200 mm
<b>2. ENGINE</b>		
i	Maximum Power (DIN)	60 - 95 Kw@ 2400 - 3200rpm
ii	Maximum Torque (DIN)	320- 400 Nm@ 1250 - 1800rpm
iii	Air cleaner	Dry Type
<b>3. ELECTRICAL SYSTEM</b>		
i	Battery	12 V – 130 Ah
ii	Alternator (Max. Output)	12V – 50 A
<b>4</b>	<b>Fuel Tank Capacity</b>	90 - 160 Litres
<b>5</b>	<b>Transmission type</b>	Manual Synchromesh
<b>6</b>	<b>Gears</b>	5 Forward and 1 Reverse (min.)
<b>7</b>	<b>Frame</b>	Ladder C type channel
<b>8</b>	<b>Minimum turning radius</b>	6.5-8.3 mm
<b>9. ADDITIONAL REQUIREMENTS APART FROM THE ABOVE SPECIFICATIONS</b>		
i	Alternator	With chargeable cable and connector.
ii	Wind divertor	Wind divertor on driver cabin
iii	Mounting provision	Mounting provision for AC compressor

## II. SPECIFICATION FOR VEHICLE FABRICATION AND ACCESSORIES

As per the requirements detailed below the fabricator should submit layout representing the design and plan for the installation of medical/electronic/service devices and equipments on the Jumbulance. There shall be enough space for easy movement of the patients and the staff.

<b>Specifications</b>
<b>1. Body</b>
A. The exterior dimensions of the Jumbulance patient compartment body shall be max.2.3 meter in width, max. 2.15 meter height ,;max. 6 metres length.
B. The body shall aluminium/GI construction bolted to inter-framework, which shall be connected to the chassis.
C. The internal walls shall be made up of fibre reinforced plastics/ABS sheets.
a. Inner Skin: Minimum 1.5mm thick, traffic white , dyed Glass fiber laminates with high standard gel coat layer based on isophthalic acid with UV stabilizer/ABS sheets.
b. (H)CFC free, high performance, rigid Polyurethane block foam, 20-40 mm thick, for optimum insulation.
D. The skin and insulation foam shall be joined together by polymer based moisture curing adhesive and sealant or equivalent having optimum elastic and humidity properties.
<b>2. Floor</b>
A. Floor shall have reinforcements for receiving and fastening of stretcher-trolleys, seats, storage compartments and inner framework.
B. Floor shall be coated with 3-4 mm thick multicolored polyurethane, or vinyl or Jerflor and suitable for cleaning needs to be, anti skid ,and impervious to body fluids.
<b>3. Roof</b>
A. Roof shall have reinforcement for mounting air conditioning unit, ceiling lamps, And storage head-racks.
B. The roof design shall allow rapid draining of water from the roof so that water would not accumulate anywhere on the roof.
<b>4. Rear Door</b>
A. Doors shall be located on the rear.
B. Door shall be designed as to afford easy release and prevent accidental opening.
C. Door shall have 270 degrees opening, supported by rust resistant high grade steel hinges.
D. A handrail shall be provided in unobstructed location inside doorway. The hand rail shall assist pregnant women during entry and exit.
E. Door shall have flush pull latch lock and allow operation from inside and outside.
F. All hardware shall be certified for passenger vehicle usage.
<b>5. Emergency equipment-Fire Extinguisher</b>
A. The Jumbulance shall be equipped with two standard fire extinguishers of 2.0 Kg capacity each, totaling to 4Kg.
B. The fire extinguisher shall be secured in an extinguisher manufacturer bracket of automotive type and located in full view and in an accessible place.
C. The fire extinguisher shall bear a label of ISI/ CE/ UL/ NFPA showing a rating of 2 BC.
<b>6. Window</b>

A. The Jumbulance shall have two windows with sliding glasses, the dimensions of each window, vertical – 400-550 mm and Horizontal –400-500 mm.
B. Both the windows shall provide effective ventilation and outside vision for the Jumbulance staff.
C. The tinted glass shall be set in an acceptable manner in a sturdy, durable electrostatic black powder painted aluminum frame.
D. The sliding window shall be equipped with a positive latch / lock that can be secured from inside of the Jumbulance.
<b>7. Seats</b>
A. Jumbulance shall have 2-doctor's seats, and two floor/wall mounted foldable seat (between two trolley stretchers).
B. All seats shall be aesthetically pleasing and ergonomically well designed.
C. All seats shall be padded at least 460mm wide and have the largest padded backrest.
D. Padding shall be furnished with polyester urethane foam of a medium to firm density, neither too hard nor too soft. Padding shall provide ultimate comfort during the vehicle transit to the passengers.
E. The doctor's seats shall have retractable armrest, folds to a vertical position allowing easy entry and exit.
F. The upholstery shall be of leather-match vinyl/polyurethanes/leatherette, color in dark blue.
G. The padding and upholstery shall be fire retarded. Additionally the upholstery shall be non-absorbent, washable in impervious to disinfectants.
H. All seats shall be equipped with seat belts complying with AIS 005 and AIS 015.
<b>8. Interior Storage Compartments</b>
A. Storage compartments shall be furnished to accommodate all items specified in this document and specified in Tables.
B. All storage compartments shall be aesthetically pleasing and ergonomically well designed.
C. To preclude injury in the event of an accident all cabinet shall be firmly anchored to tapping plate of the body structure.
D. Storage cabinets, drawers and kits shall be easily opened but shall not come open during transit.
E. The storage compartments shall be produced with minimum 12 mm thick marine grade high-pressure laminated boards, skin plates in light grey and cutter blocks in dark blue color. SS 304 cladding of the compartments can be done.
F. All medical electronic devices/equipment listed in Table-C shall be stowed and properly fastened with shock absorbing rubber mountings to resist the vibrations and shall not produce noise during transit.
H. Storage compartment shall be divided into sections according to the size of the medical/ electronic devices and equipment for optimum space utilization.
I. All the doors shall have self-locking press type knobs. The door shall be locked automatically, when the knob is pushed.
J. All front wall storage compartments shall have vertical flap doors .The doors shall be latched at its fully open position.
<b>9. Overhead Racks</b>
Overhead racks shall be furnished to accommodate medical supplies/equipments.
A. Overhead racks shall be aesthetically and ergonomically well designed.
B. To preclude injury in the event of an accident all overhead racks shall be firmly anchored to tapping plate of the body structure.
C. Overhead racks shall be easily opened but shall not come open during transit.

D. Overhead racks shall be produced with minimum 12mm thick marine high-pressure laminated boards, skin plates in light grey and cutter blocks in dark blue color or molded light grey ABS or 2-3 mm FRP.
E. Overhead racks above the seats shall have sliding acrylic doors. The depth of the overhead rack shall be minimum 330mm.
F. Overhead racks other than above the seat area shall have rigid wood/ABS or rigid acrylic vertical flap doors. The depth of the overhead rack shall be minimum 450mm and have a height of 350mm.
G. Vertical flap doors shall be latched at its fully open position. All the doors shall have self-locking press type knobs.
<b>10. Spare tyre removal opening</b>
Floor shall have a closed opening (Co-centric with the spare tyre removal bolt axis) to facilitate the spare tyre removal.
<b>11. Steps</b>
A. Folding stairs shall be integrated on to the inter-frame at the rear doors.
B. Steps shall be enclosed to prevent accumulation of dirt.
C. The height between each step shall not exceed 150mm +/- 10mm; steps shall be “EXTREMELY FLAT” during operation and resist deflection and vibration & shall not produce noise during transit.
D. Step surfaces shall be fabricated from anti-slip Aluminum plate.
E. Folding stairs shall be designed to prevent accidental opening.
<b>12. Unit Weight</b>
A. Gross vehicle weight (GVW) is the sum of the chassis weight, plus the body weight, plus the devices /equipment weight, plus driver and passenger weight (9 passengers X 75 Kgs).
B. Actual gross vehicle weight (GVW) shall not exceed the chassis manufacturers gross vehicle weight rating (GVWR) for the chassis.
<b>13. Weight Distribution</b>
Weight distribution of a fully loaded Jumbulance on a level surface shall be such as not to exceed the manufacturers front gross axle rating and rear gross axle weight rating.
<b>14. Ground Clearance</b>
The lowest part of the vehicle, when loaded to the GVWR, shall have a ground clearance suitable for rural routes.
<b>15. Mounting</b>
A. The inter framework of Jumbulance body shall be attached to chassis frame in such a manner as to prevent shifting or separation of the body from chassis under severe operating conditions (crash).
B. Stiffener shall be used for ‘U’ bolt to ensure chassis frame does not deform when ‘U’ bolt is tightened.
C. Insulating material shall be placed at all contact points between body and chassis frame. Insulating material shall be minimum 6mm thick and so attached to chassis frame or body member that it will not move under sever operating conditions.
D. Making holes in top or bottom flanges or side units of the frame and welding to the frame shall not be permitted except as provided or accepted by the chassis manufacturer.
<b>16. Wiring</b>
A. All wires shall be concealed (channels to be provided in the walls) and so arrange that they can be readily inspected and renewed without affecting the finish of the vehicle.
B. The wires shall be PVC insulated wires.

C. Wiring shall be of sufficient size to carry the required load without excessive voltage drop. Preferably LT wire shall be of 5mm outer diameter having 28 strands of 0.03mm thick for vehicle and from supply for switchboards. Battery cable shall consist of 440 strands of 0.1mm conductor copper of single length.
D. The earth return system shall be used for body wiring.
E. Wherever PVC sleeved cables pass through the outside body or structural members, shall have suitable grommets/bushes made out of rubber or backlite inserted in the holes and PVC tube carrying cable be clipped as near as possible.
F. Wires shall be permanently continuous color-coded and permanently number coated for easy identification of the various circuits. Use of tapped numbers is not acceptable.
G. Wires shall be of sufficient length to provide a loop at terminals so as to permit ample slack for directional positioning. The length shall allow replacement of end terminals twice, without pulling, stretching or replacing the wire.
H. Corrosion-resistant full ring or interlocking terminals shall be used for terminating wire ends at components. All wires shall be continuous and terminate at appropriate connector. "T" or butt connectors shall not be used.
I. Battery cable terminals, component terminals and connectors exposed to the ambient shall be coated with terminal corrosion preventive compound.
J. Except for those on large wires, such as battery cables, terminals shall be machine crimped to the wiring. A ratchet type hand crimper may be used where it is not possible to use a large machine crimper.
<b>17. Lights</b>
<b>Interior Lights</b>
A. Total six 18 watts fluorescent(CFL) or led lights shall be used inside the vehicle. Four lights shall be provided on top of the stretcher-trolley.
B. Fixtures shall have a removable cover that positively locks in place.
C. The florescent tube (CFL) shall be properly locked in place to preclude loosening due to vehicle movement or vibration.
D. The interior lights shall not be powered by the vehicle.
<b>Exterior Lights</b>
A. Total four 18 watts fluorescent (CFL) or led lights shall be used on co driver side and two 18 watt fluorescent or led lights shall be used on driver side of the vehicle.
B. The light fixtures shall be of stainless steel, plastic or other weather resistant materials and installed in a manner that will not cause electrolysis of light housings or vehicle body. The light assembly shall be certified for exterior usage.
C. Fixtures shall have a removable cover that positively locks in place.
D. The florescent tube (CFL) shall be properly locked in place to preclude loosening due to -vehicle movement or vibration.
<b>18. Sockets</b>
A. Jumbulance shall have following sockets with switches for all the electrical & electronic devices:
<b>Interior</b>
• In front wall LH: Two 6 Amp and One 15 Amp
• In front wall RH: Two 6 Amp and One 15 Amp
• Front wall middle: Two 6 Amp
• TV compartment: Two for TV and DVD player
• Outside examination compartment: Two 6 Amp and One 15 Amp sockets
• Inside examination compartment: Three 6 Amp
• Between service door and examination couch: Two 6 Amp
<b>Exterior</b>
• Co driver side under chassis compartment-front: Two 6 Amp and One 15 Amp

<ul style="list-style-type: none"> <li>• Co driver side under chassis compartment-rear: Two 6 Amp and One 15 Amp</li> </ul>
B. Sockets shall comply with IS1293 standards.
C. Sockets shall have tubular contacts to ensure larger area of contact with the pin. The ring springs around the tubular contacts shall ensure uniform pressure and a firm unwavering multipoint contact.
D. Socket shall have integrated shutters to prevent accidental contacts with live parts.
E. The mountings shall be sturdy enough to handle wire/plug pressure and vibrations during transit.
F. The socket shall be made up of a industrial grade thermo set electrical insulation material and resist heat and fire.
<b>19. Inverter and Battery</b>
A. DC to AC inverter shall be provided in conjunction with the onboard 220/240 Volts AC wiring system of Microtech/Luminous or equivalent brand. Additionally, a silent, diesel generator of 10KVA is to be fitted on-board.
B. The device furnished shall be capable of continuously delivering at least 1500 watts of sine wave type regulated AC power to safely power all types of electrical or electronic loads and maintain a frequency of 50+/- 5 Hz.
C. The insulation shall include an on/off switch to activate the device and low battery warning system.
D. Two 200Ah sealed maintenance free battery of reputed brand shall be securely attached on a side out tray in a closed vented compartment in the body skirt so that the battery is accessible for convenient service from the outside.
E. Battery shall be charged by the vehicle, and an AC source. A receptacle to charge the battery from external supply is provided.
F. Inverter and Battery shall be stowed or properly fastened with shock absorbing rubber mountings to resist the vibrations and shall not produce noise during transit.
G. Battery shall be secured in under chassis boxes, which shall have minimum 6mm asbestos sheets fastened all around the box except topside.
H. Battery shall be secured in under chassis boxes, which shall have effective ventilation in the rear & top wall of the box (use standard louvers).
I. Should have provision to change over to connect generator supply. The generator shall be kept outside conveniently and sockets to accept generator supply shall be placed accordingly.
<b>20. AC system</b>
A. Standard OEM split air conditioning system of rated cooling capacity of minimum 6.5KW, condenser capacity of 2000m <sup>3</sup> per hour, evaporator capacity of 1240 m <sup>3</sup> per hour and a compressor capacity of minimum 160cc .
B. Evaporator shall be free blow and mounted on front wall. The position of the evaporator shall provide uniform distribution of airflow to all the seats & examination couch.
C. The condenser shall be mounted on the roof.
D. Hoses shall be machine crimped to avoid the leakages. A ratchet type hand crimper may be used where it is not possible to use a large machine crimper.
<b>21. Public address system</b>
A combination of electronic siren and mini light bar with integral public address system of 50Watts shall be provided. Light bar shall be a blue color halogen R/L.
<b>22. Intercom</b>
An Intercom system (preferably wireless) shall be provided for drivers and Jumbulance staff communication.
<b>23. Socket Extensions and Cables</b>
A. 18-meter cable shall be provided to charge the battery form the AC source.
B. Two 6-meter extension sockets certified for external use shall be provided.



C. One 12-meter extension sockets certified for external use shall be provided.
<b>24. Cold Flask</b>
A. Jumbulance shall have four cold flasks of 10 Liters capacity stowed in the co-driver side under chassis compartment.
B. Cold flasks shall be in two different colors for easy identification.
<b>25. Exterior Design /painting</b>
Detailed drawings and specifications will be furnished along with the work order.

**Table 1- Glass fiber laminate with high standard gel coat layer**

Property	Value	Unit
<b>Physical Properties</b>		
Density	1.38	G/cm <sup>3</sup>
Glass Content	23	%
Water Absorption	11	mg
Barcol Grade	>45	-
<b>Mechanical Properties</b>		
Flexural Strength	155	N/mm <sup>2</sup>
Flexural Modulus	4200	N/mm <sup>2</sup>
Flexural Strain	3.7	%
Tensile Strength	77	N/mm <sup>2</sup>
Tensile Modulus	6500	N/mm <sup>2</sup>
Elongation at break	1.2	%
Impact strength	31	KJ/m <sup>2</sup>
Deformation of temperature of deflection under load (Norm thickness 3.0-4.2 mm)	>200	°C
Penetration Test	4.1	Nm

**Table 2- Rigid Polyurethane block foam**

Property	Value	Unit
Density	40	Kg/ m <sup>3</sup>
Thermal conductivity 10 °C	0.020	W/m.K
aged, diffusion open	0.026	
facings aged, diffusion	0.022	
Ozone Depletion Potential	0	-
Compressive strength	>260	kPa
Tensile strength	>350	kPa
Closed cell content	>90	%
Water absorption	<2	Vol-%
Fire behavior	<60	mm
Dim. Stability 70 °C /97%RH	<2	%
-40 °C /ambient RH	<1	linear
100 °C /ambient RH	<1	change

Linear exp. Coefficient	50.10 <sup>-0</sup>	m/m.k
Operating Temperature	-100 to +100	°C

### III. Medicine, Consumables & Equipment's -

#### Annexure – (A)

#### **DRUGS & CONSUMABLES FOR EACH JUMBO AMBULANCE:**

All emergency & essential drugs, surgical, consumables and disposables should be made available in the jumbo ambulances

**Note: The bidder must ensure adequate and appropriate storage space to house at least these drugs and consumables securely during ambulance's day to day run. (THE PROTOTYPE PRESENTED FOR APPROVAL MUST HAVE THE FOLLOWING LISTED ITEMS IN STOCK AS PER THE QUANTITIES DETAILED FOR VERIFICATION OF THE STORAGE SPACE IN TERMS OF ADEQUACY AND APPROPRIATENESS)**

Medicine & Consumables List		
Sr. No.	Item	Quantity
1.	Cotton roll 500 gm	8
2.	Bandage (a) 15cm (b) 10cm (c) 6cm x 5mtrs	12 each
3.	Antiseptic solution 200 ml	8 Bottles
4.	Povidine Iodine solution 100 ml	8 Bottles
5.	Leucoplast, Micropore x 1mtr	8 Rolls
6.	Pain Spray	8 Cans
7.	Mistdress Spray	8 Cans
8.	Vinodine Spray	8 Cans
9.	Coolex Spray	8 Cans
10.	Face Mask (Disposable)	2 Box
11.	Surgical Gloves (Size 6.5,7,7.5)	2 Box
12.	Classic LMA disposable (2,2.5,3,4)	2 Each
13.	Endo Tracheal Tube – Disposable (all sizes)	2 Each
14.	Wide bore needles	4
15.	Syringes ABG ( 2 & 5 ml)	10 each
16.	Three way stop cork	20

Tender no. 11 /16-17/ Jumbo Ambulance

17.	Extension I/V lines	8
18.	Disposable Delivery Kit	8
19.	ECG electrodes	2 box
20.	Guedel's airway 00-5,00,0,1,2,3,4,5	8 each
21.	Nasal airways(all sizes) & catheters	8 each
22.	Binasal Cannula,	8 each
23.	Tracheostomy tube cuff & Plain (all sizes)	8 each
24.	Mini Tracheostomy kit	4
25.	Ventimask, facemask with nebulizer	4
26.	Pressure Infusion Bags	8
27.	Rightangled Shivel Connector	8
28.	Bone Marrow Needle	8
29.	I.V. Fluids (RL, NS, DNS 5%, 5% D, Isolyte P, Hemaxyl),HES	8 each
30.	Micro drip-set & Drip-set	8 each
31.	Nasogastric Tubes (various sizes)	8 each
32.	Burn Pack : Standard package, clean burn sheets (or towels for children)	8
33.	Triangular bandages ( Minimum 2 safety pins each)	8
34.	Sterile multi-trauma dressings (various large and small sizes)	8 each
35.	ABDs, 10"x12" or larger	8
36.	4"x4" gauze sponges	8
37.	Tab. Paracetamol 500mg	100 Tab
38.	Gauze rolls Sterile (various sizes)	8 each
39.	Elastic bandages Non-sterile (various sizes)	8 each
40.	Occlusive dressing Sterile, 3"x8" or larger	8
41.	Adhesive tape : Various sizes (including 2" or 3")	8 each
	Adhesive tape (hypoallergenic): Various sizes(including 2" or 3")	

Tender no. 11 /16-17/ Jumbo Ambulance

42.	Cold packs	8
43.	Waste bin for sharp needles, etc.	4
44.	Disposable bags for vomiting, etc.	80
45.	Teeth guard	8
46.	Sample collection kits	8
47.	Inj. Adrenaline	80
48.	Inj. Atropine 0.6 mg	80
49.	Inj. Calcium Carbonate	20
50.	Inj. Dopamine	20
51.	Inj. Dobutamine	20
52.	Inj. Noradrenaline	20
53.	Inj. Nitroglycerine	20
54.	Inj. Sodium Bicarbonate	80
55.	Inj. Hydrocortisone	16
56.	Inhaler Beclomethasone	8
57.	Inhaler Salbutamol	8
58.	Inj. Frusemide	40
59.	Inj. Diazepam/Midazolam	40
60.	Inj. Etofylline 77mg + Theophylline 23mg	2ml x 40
61.	Inj. Phenytoin sodium	40
62.	Inj. Pheniramine maleate 22.75 mg/ml	2 ml x 40
63.	Inj Dexamethasone	40
64.	Inj. Ondansetrone	40
65.	Inj. KCl	20
66.	Inj. Lignocaine 2%	20
67.	Inj. Amiodarone (50 mg/ml)	20
68.	Inj. Magnesium sulphate 25% 2ml.	20

Tender no. 11 /16-17/ Jumbo Ambulance

69.	Inj. Mannitol 20 %	20
70.	Activated charcoal	8 pack
71.	Inj. Naloxone HCl	20
72.	Inj. Fentanyl	20
73.	Bacteriostatic water for Injection	80
74.	Inj. Sodium Valporate	20
75.	Inj. Diclofenac Sodium	3ml x 40
76.	Inj. Paracetamol	40
77.	Syp. Paracetamol 125mg/ml	60ml x20
78.	Tab. Isosorbide Dinitrate 5mg	1000Tab
79.	Tab. Aspirin 75 mg	1000Tab
80.	Tab. Amlodipine 5mg	400 Tab
81.	Urin Pot for patient	2

**Note:**

- 1) Bidder need not quote separate cost for drugs and consumables as it is a part of overall operational cost.
- 2) Medicines/Drugs, consumables, surgical and disposable should be highest standard and approved by SHS/NHM, Maharashtra, Mumbai.

## Annexure – (B)

### Jumbo Ambulance Equipment

#### Medical Equipments with Fixtures

All equipment & accessories being used in the ambulance including those in the Oxygen Delivery System should be BIS, US FDA, CE or EN certified (Copy of the certificate to be enclosed along with the technical bid)

All wall mounted medical equipment & their mounts in the ambulance should be EN 1789 or AS/NZS 4535 or ASSE/ANSI 2006 certified (Copy of the certificate to be enclosed along with the technical bid)

<b>Oxygen Delivery System</b>	<p>The ambulance shall have piped medical oxygen system (manifold) capable of storing and supplying medical grade oxygen. The <b>manifold</b> should have oxygen cylinders of B or D size only manufactured as per IS:7285, BIS-certified and approved by the Chief Controller of Explosives, Government of India, Nagpur (<b>minimum one D &amp; one B type cylinder or two D type cylinders.</b>) These cylinders should be changeable from outside the patient compartment and a cylinder changing wrench should be housed at an appropriate location.</p> <p>These cylinders should be individually connected to a <b>pressure regulator</b> each in such a way that one cylinder acts on duty and the other as a stand-by. Both these regulators should be capable of reducing the cylinder pressure to a static outlet pressure of 4.12 bars / 60 psi and should include a safety relief valve and a locking mechanism to prevent settings from being inadvertently changed. It should maintain accurate readings and calibrations during ambulance operation and not be affected by the temperature conditions.</p> <p>Changing from one cylinder to the other should not affect the distribution pressure in any way and this change over should occur with manual or automatic operation of single valve. The inlet port of the regulator should be connected to both the cylinders in parallel using two nos. of ball vales, allowing any of the cylinders to be in line or of line with the cylinder at any point of time without closing the individual cylinder valves.</p> <p>The patient cabin must have a digital display panel for oxygen supply status. The display panel should be certified for use with Medical Oxygen and should have individual LED display windows to constantly indicate the pressure level of both the cylinders as well as the distribution pressure level. The digital displays should show the actual pressure measured by individual digital pressure sensors as per the pressure level under monitoring (one each for both the cylinders and one for the line pressure).</p> <p>The connections of the high-pressure regulator, isolation valve, high &amp; line pressure sensors, high-pressure connecting hose from cylinder to</p>	4 sets
-------------------------------	--	--------

	<p>high-pressure regulator, low-pressure hose from the outlet of the high-pressure regulator to the terminal outlet block should be connected to each other using high pressure flexible connectors. There should be no welded joints in the entire connection assembly of the oxygen distribution system. The manifold should be so designed that it shall ensure proper fixation of cylinders during travel and should ensure easy cylinder changing and positioning. There should not be any electrical connection in near vicinity or inside the oxygen cylinder housing, except pressure regulator integrated with flow control valve.</p> <p>Minimum <b>two oxygen outlets for the primary patient</b>, flush with right side wall or fitted flush on a outlet panel board near the primary patient's head end (distance between patient head and oxygen / air outlets to be less than 89 cm) to be provided - one outlet normally meant for Oxygen therapy through flow meter &amp; one meant for driving breathing equipment like ventilators, etc.</p> <p>These duplex outlet stations shall be appropriately labelled and colour coded as per IS standards to indicate their use with medical grade oxygen. Oxygen outlet stations shall be installed with sufficient vertical space to accommodate attachment of flow meters, humidifiers, and nebulizers. There shall also be sufficient horizontal clearance to prevent interference with the suction inlet quick-disconnect if any and equipment directly attached thereto.</p> <p>The oxygen outlets should be universal in design to be able to accommodate the probe of the oxygen flow-meter and the probe of the driving gas hose of the ventilator directly in one single action without any intermediate connectors and adapters.</p>	
--	--	--

<p><b>2. Ambulance Cot</b></p>	<ul style="list-style-type: none"> <li>• Roll-in Self Collapsing Ambulance Cot with separable stretcher (EN 1865/1789 or equivalent certified)</li> <li>• The cot should have a separable stretcher with the main stretcher frame which could be removed from trolley and used as a separate stretcher</li> <li>• The separable stretcher should also have sliding wheels and telescopic handles to use it as a separate stretcher and also easy locking/unlocking system to lock the separable stretcher into the trolley</li> <li>• The cot should have minimum four wheels with minimum two swivel types to allow cot to be handled and to slide into the ambulance easily without damaging the ambulance floor</li> <li>• One person should be able to load and unload the fully assembled cot it into an ambulance easily</li> <li>• Should be lightweight and should be built with anodized aluminium/ stainless steel</li> <li>• Swing-down/push up-down side rails to enable convenient patient transfer from bed to cot</li> </ul>	<p>4 sets</p>
--------------------------------	---	---------------

	<ul style="list-style-type: none"> <li>• Adjustable backrest angle from 0 - 65 deg</li> <li>• At least three strap-type restraining devices (chest, hip, and knee) to prevent longitudinal or transverse dislodgment of the patient during transit.</li> <li>• Should be supplied with suitable accessories to fix the portable oxygen cylinder</li> <li>• Should be light weight</li> <li>• One number of folding IV Poles should be provided with easily foldable facility.</li> <li>• Locks on wheels/legs if required to ensure that the cot doesn't collapse/move while standing</li> <li>• 50 mm thick high density foam mattress holstered with water proof and fire proof material</li> <li>• Minimum Dimensions <ul style="list-style-type: none"> <li>○ Length: 190cm</li> <li>○ Width : 55 cm</li> </ul> </li> <li>• Loading Capacity : minimum 150 kg</li> <li>• The device must be supplied with an <b>integrated loading platform</b> with minimum three point anchorage.</li> <li>• The loading platform should have an integrated foldable flap to guide the stretcher in and out of the ambulance without any part of the stretcher (including the legs) striking any part of the ambulance body including the rear footstep.</li> <li>• The loading platform should have integrated space in it to securely accommodate a full body length spine board (and a scoop stretcher if space permits) inside it for ergonomic storing. Once the loading is completed the foldable flap of the loading platform should be lifted and remain firmly in position not getting inadvertently opened when the vehicle is in move. This should be supported with pneumatic lifters.</li> </ul>	
<b>3. Scoop Stretcher</b>	<ul style="list-style-type: none"> <li>• Should be light, safe and reliable</li> <li>• Aluminium alloy with adjustable length</li> <li>• Clutch Design (Lateralised / in center) so that the stretcher can be divided into left and right halves.</li> <li>• Easy to lock and unlock</li> <li>• 3 Quick release buckle belts</li> <li>• Dimensions: <ul style="list-style-type: none"> <li>▪ Min. Size L*W*H : 168*43*7cm</li> </ul> </li> <li>• Net weight: &lt;10 Kgs</li> <li>• Weight bearing: 150 kg minimum</li> <li>• To be supplied with a mountable &amp; detachable 'Double Head Immobilizer'</li> </ul>	4 sets
<b>4. Spine Board</b>	<ul style="list-style-type: none"> <li>• High Density Polyethylene - Single piece</li> <li>• Rigid , Light &amp; Floatable</li> <li>• Resistant to bumps and corrosion</li> <li>• Non-absorbent, immune to infiltrations</li> <li>• Easy to clean- water &amp; soap</li> <li>• X ray &amp; MRI compatible</li> <li>• Load Capacity : 150 kg minimum</li> </ul>	4 sets

Tender no. 11 /16-17/ Jumbo Ambulance



	<ul style="list-style-type: none"> <li>• L*W*H : approx 184 * 45 * 5 cm</li> <li>• Should have suitable whole body restrains</li> </ul>	
<b>5. Transfer Sheet</b>	<ul style="list-style-type: none"> <li>• Two (2) transfer sheet with a minimum of six (6) handles, or equivalent</li> </ul>	2 sets
<b>6. Wheel chair</b>	<ul style="list-style-type: none"> <li>• Should be light, safe and reliable</li> <li>• Made of aluminium alloy with 4 wheels</li> <li>• Folded size : approx 93*51*16 cm</li> <li>• Net weight : less than 10 Kgs</li> <li>• Pull through, telescoping long handles built in to lift patients &amp; carry them through narrow passages.</li> <li>• Two handles on the top to facilitate the lifting of patients , working in harmony with telescoping handles</li> <li>• Loading Weight : 150 kg minimum</li> </ul>	2 sets
<b>7. Bi-Phasic Defibrillator cum Cardiac Monitor with Recorder</b>	<ul style="list-style-type: none"> <li>• Wall Mounted, Transport defibrillator cum Cardiac Monitor with ambulance mount</li> <li>• Lightweight, Easy to Use with both Manual &amp; AED Capabilities.</li> <li>• Suitable for ambulance operation, with adult and paediatric external fixed paddles and Patient cables</li> <li>• Minimum 6.5 inches Colour LCD Display</li> <li>• Should be able to deliver shock from 2-200 joules through biphasic technology.</li> <li>• Should have charging time up to 200J in less than 6 seconds with a new fully charged battery</li> <li>• Should have built in Non-invasive pacing and SpO2 monitoring</li> <li>• Should have 12 lead ECG.</li> <li>• Integrated Multi Parameter Monitor with the following parameters: <ul style="list-style-type: none"> <li>▪ NIBP - Adult and Paediatric</li> <li>▪ SpO<sub>2</sub> - Adult &amp; Paediatric</li> <li>▪ Respiration Rate (Optional)</li> <li>▪ 12 Lead ECG</li> </ul> </li> <li>• ECG signal shall be via defibrillator paddles, disposable defibrillation electrodes or patient cables</li> <li>• Should be able to print critical events via a built in printer</li> <li>• The device should have charger with DC charging module to directly charge the internal batteries of the device from the 12V ambulance batteries as soon as the device is ready for charging.</li> <li>• Should be easily Transportable by hand or on a Hospital Bed/Ambulance Cot using the bed hook</li> <li>• All required leads, probes, accessories &amp; manuals to be supplied along with <ul style="list-style-type: none"> <li>▪ Monitor, Defibrillator Unit</li> <li>▪ Reusable External Shock / defibrillation Paddles</li> <li>▪ Protective Foil for the Display Screen</li> <li>▪ 4 Pole ECG Cable (Monitoring)</li> <li>▪ 6 Pole ECG Cable (Diagnostics)</li> <li>▪ SpO<sub>2</sub> Extension Cable, 1m. min</li> <li>▪ SpO<sub>2</sub> Sensor - Universal Adult &amp; Children Finger Sensor</li> <li>▪ NIBP Hose, 2.5m. Min</li> </ul> </li> </ul>	2 sets

Tender no. 11 /16-17/ Jumbo Ambulance

	<ul style="list-style-type: none"> <li>▪ NIBP Cuff, Adult &amp; Paediatric</li> <li>▪ Defibrillation Electrode with Cable, Adult - 1 No.</li> <li>▪ Printer Paper, Box of 10 Rolls, Min 20m. Long</li> <li>▪ Accessory Bag for all the cables and accessories mentioned above</li> <li>▪ Provision for future up-gradation to enable transmission of Patient Vitals via Telemetry for remote monitoring</li> </ul>	
<b>8. Transport Ventilator</b>	<ul style="list-style-type: none"> <li>• Pneumatic/Electrical Transport Ventilator with wall mount Wall Mount / ambulance mount</li> <li>• Suitable for adults, children and infants up to 5 kg</li> <li>• Modes of ventilation: <ul style="list-style-type: none"> <li>▪ CMV &amp; SIMV</li> <li>▪ PEEP</li> </ul> </li> <li>• Adjustable pressure limit to safely cope with all patients.</li> <li>• High inflation pressure alarm</li> <li>• Power source : Compressed air / oxygen/electrical</li> <li>• It should be able to deliver respiratory rate ratio of up to 1: 1.5 or higher</li> <li>• FIO2: 100% oxygen &amp; air mix mode (with approx. 45% to 100 %)</li> <li>• Equipment should be supplied complete with integrated carrying bracket for ambulance mounting as well as on ambulance cot, patient circuit, driving gas hose, PEEP Valve and breathing valve. (Transport Ventilator Kit)</li> <li>• Should have airway pressure monitor</li> <li>• Should have a disconnect/low pressure alarm. (Visual and audible)</li> <li>• The above kit should be supplied with all required brackets / mounts to ensure mounting in ambulance and on ambulance cot without hampering patient care in an acute scenario.</li> </ul>	2 sets
<b>9. Oxygen Flow Meter with Humidifier</b>	<ul style="list-style-type: none"> <li>▪ Dial setting type without any floats, needles or moving parts to indicate the flow level.</li> <li>▪ Pressure compensated for inlet pressure range of 3 to 5 bar, be able to regulate the flow from 0 to 15 litres per min and should show the actual oxygen flow rate.</li> <li>▪ Installed vertically so as to not interfere with the other outlets and should be easily readable from the Doctor's/Paramedic' seat.</li> <li>▪ The inlet probe should be fully adaptable to the terminal outlet in the ambulance as well as to the outlet adapter of the portable oxygen cylinder specified below in the list of medical equipments</li> <li>▪ The outlet of the flow-meter should be universal in design to accept the humidifier, the flow selector switch or a direct connector</li> <li>▪ Should be calibrated for fixed flow settings and calibrated in multiple scale thereby allowing precision settings in low flow ranges as well.</li> <li>▪ Should allow the following minimum flow settings <ul style="list-style-type: none"> <li>➤ 0 to 1 L range: 4 settings</li> <li>➤ 1 to 5 L range: 4 Settings</li> <li>➤ 5 to 15 L range: 5 settings</li> </ul> </li> <li>▪ Should have a humidifier made up of an impact resistant</li> </ul>	4 sets

Tender no. 11 /16-17/ Jumbo Ambulance

	<p>polycarbonate bowl with cap and inlet outlet nipples</p> <ul style="list-style-type: none"> <li>▪ Should include a flow selector switch to bypass the flow of the oxygen through the humidifier and allow nebulization to the patient directly using the flow of the oxygen</li> <li>▪ Should be supplied with a direct connector to provide oxygen therapy without humidifier, insufflation kit and nasal prong</li> </ul>	
<b>10. Suction Pump (Manual &amp; Handheld)</b>	<ul style="list-style-type: none"> <li>• Portable &amp; Lightweight</li> <li>• Vacuum (max): 550mmHg.</li> <li>• Non disposable container - 500 ml connecting jar made out of polycarbonate with overfilling valve</li> <li>• Operating environmental temperature: -20C to + 50C.</li> <li>• Maximum Weight: 900 gms</li> </ul>	4 sets
<b>11. Suction Pump (electronic)</b>	<ul style="list-style-type: none"> <li>• Electronic Suction device with ambulance mount</li> <li>• Control knob for continuously adjustable vacuum level up to maximum level of 630 mm. Hg starting from zero</li> <li>• Suction capacity of minimum 30 litre per minutes</li> <li>• Minimum 500ml capacity secretion bottles with efficient overflow protected</li> <li>• Ambulance Wall mountable</li> <li>• Rechargeable Battery with minimum capacity of 60 minutes</li> <li>• The ambulance wall mount should have built in charger with integrated DC charging module to directly charge the internal batteries of the device from the 12V ambulance batteries as soon as the device is placed on the bracket.</li> <li>• Should be supplied with Wide - bore tubing, rigid pharyngeal curved suction tip; Tonsillar and flexible suction catheters, 5F - 14F</li> </ul>	2 sets
<b>12. Self-inflatable Resuscitation Bags</b>	<ul style="list-style-type: none"> <li>• Hand operated, self-re-expanding bag (adult &amp; infant sizes), with oxygen reservoir/accumulator, clear mask (adult, child, infant and neonate sizes); valve (clear, disposable, operate-able in all weather conditions)</li> <li>• To be supplied in proper Carrying case</li> </ul>	4 sets
<b>13. Mouth to Mask ventilation device</b>	<ul style="list-style-type: none"> <li>• Suitable for Adult, Child &amp; Infant / Neonate</li> </ul>	4 sets
<b>14. Oxygen Cylinder (Portable) with Oxygen Pressure Reducer</b>	<ul style="list-style-type: none"> <li>• Aluminium Cylinder as per BIS Specifications</li> <li>• Max. Working Pressure at 150 C: 150kgf/cm<sup>2</sup></li> <li>• Water capacity: min 1L</li> <li>• Built in / attached with Pressure gauge, regulator and cylinder wrench/key</li> <li>• Pressure regulator with plug-in type outlet port capable to accommodate the probe of the driving gas hose of ventilator or the inlet probe of the oxygen flow-meter directly in single action without any intermediate connectors or adapters etc.</li> </ul>	4 sets
<b>15. Oxygen Administration Equipment</b>	<ul style="list-style-type: none"> <li>• Adequate length tubing, mask (adult, child and infant sizes), transparent, non-rebreathing, venturi, and valve-less, nasal cannulas (adult, child and infant sizes)</li> </ul>	4 sets

<b>16. Laryngoscope with blades</b>	<ul style="list-style-type: none"> <li>• Standard Laryngoscope</li> <li>• With Mckintosh blade (1,2, 3 &amp; 4)</li> <li>• Handle should have comfortable grip</li> </ul>	2 sets
<b>17. Syringe Infusion Pump</b>	<ul style="list-style-type: none"> <li>• Flow rate programmable from 0.1 to 200 ml/hr or more in steps of 0.1 ml/hr with user selectable flow set rate option.</li> <li>• Save last infusion rate even when the AC power is switched OFF.</li> <li>• Bolus rate should be programmable to 400 – 500 ml/hr or more with infused volume display.</li> <li>• Reminder audio after every 0.5 ml delivered bolus.</li> <li>• Save last Bolus rate even when the AC power is switched OFF.</li> <li>• Display of Drug Name with a provision of memorizing 10~15 names</li> <li>• Keep Vein Open (KVO) must be available 1.0 ml/hr or set rate if lower than 1.0 ml. User should have choice to disable KVO whenever desired.</li> <li>• Occlusion pressure trigger levels selectable from 300/500/900 mmHg</li> <li>• Must Work on commonly available ISI/CE/FDA APPROVED/CERTIFIED 20, 50/60 ml Syringes with accuracy of minimum of +/-2% or better.</li> <li>• Automatic detection of syringe size &amp; proper fixing.</li> <li>• Must provide alarm for wrong loading of syringe such as flanges out of slot; disengaged plunger, unsecured barrel etc.</li> <li>• Anti bolus system to reduce pressure on sudden release of occlusion</li> <li>• Should have comprehensive alarm package including: Occlusion limit exceed alarm, Near end of infusion pre-alarm &amp; alarm, Volume limit pre-alarm &amp; alarm, KVO rate flow, Low battery pre- alarm and alarm, AC power failure, Drive disengaged and preventive maintenance</li> <li>• Rechargeable Battery</li> </ul>	1 set
<b>18. Handheld Glucometer</b>	<ul style="list-style-type: none"> <li>• One unit with 100 units of disposable lancets/tips and Gluco Sticks</li> <li>• The brand provided should have supplies easily available across the state</li> </ul>	2 sets
<b>19. Stethoscope</b>	<ul style="list-style-type: none"> <li>• Paediatric &amp; Adult</li> <li>• Tuneable diaphragm and a bell</li> <li>• High quality buffed stainless steel snap tight ear tubes</li> <li>• Poly vinyl chloride double lumen tubing 76 cms in length</li> <li>• Soft sealing ear tips</li> </ul>	2 sets
<b>20. BP Apparatus (Digital)</b>	<ul style="list-style-type: none"> <li>• One Nos.</li> <li>• Motion tolerant, self-inflating</li> <li>• <math>\pm 2</math> mm of Hg systolic or Diastolic</li> <li>• AC / DC , Rechargeable in Ambulance</li> <li>• Supplied with regular/extra large and paediatric size cuffs</li> </ul>	2 sets
<b>21. Pupillary Torch</b>	<ul style="list-style-type: none"> <li>• One Nos. with Spot illumination without peripheral ring of light</li> </ul>	2 sets
<b>22. Needle &amp;</b>	<ul style="list-style-type: none"> <li>• To be placed at an appropriate location to allow easy disposal of</li> </ul>	2 sets

Tender no. 11 /16-17/ Jumbo Ambulance

<b>Syringe Destroyer and Sharp dispenser</b>	<ul style="list-style-type: none"> <li>needles</li> <li>• Maximum weight 2.5 Kgs</li> <li>• Motion Tolerant</li> </ul>	
<b>23. Thermometer (Digital)</b>	<ul style="list-style-type: none"> <li>• Two Nos.</li> <li>• Battery operated</li> <li>• with on and off audio alarm</li> <li>• Measurable in Fahrenheit and Centigrade</li> <li>• Memory of the last reading</li> </ul>	4 sets
<b>24. Pneumatic Splints</b>	<ul style="list-style-type: none"> <li>• Set of 6 adult sizes (Hand &amp; wrist, Half arm, Full arm, Foot and ankle, Half leg &amp; Full leg) with carrying case</li> <li>• X-ray through the splints</li> <li>• Inflation tubes' extension with closing clamp makes closing easy and quick after inflation</li> <li>• Fixing of splint is by zipper or belt</li> <li>• Distal end left open to expose toes</li> <li>• Should be washable and reusable</li> <li>• Should be supplied with the appropriate pump required to inflate the splints</li> </ul>	2 sets
<b>25. Roller Splints</b>	<ul style="list-style-type: none"> <li>• Two Nos</li> <li>• The splint should be made from a thin core of alloy, sandwiched between two layers of closed-cell foam</li> <li>• Should be extremely pliable</li> <li>• Can be used for all the sizes - small, medium &amp; large</li> </ul>	2 sets
<b>26. Cervical Collars</b>	<ul style="list-style-type: none"> <li>• One Nos.</li> <li>• Rigid and should be suitable for children aged 2 years or older, infant and adults</li> <li>• Should be adjustable to 4 different sizes - Tall, Regular, Small &amp; No neck</li> <li>• Should have pre-moulded chin support, locking clips and rear ventilation panel, enlarged trachea opening.</li> <li>• Should be high-density polyethylene and foam padding with one piece design enabling efficient storage where space is limited</li> <li>• Should be X-ray lucent and easy to clean and disinfect</li> </ul>	4 sets
<b>27. EMT Shears</b>	<ul style="list-style-type: none"> <li>• One Nos. with Thermoplastic handles.</li> <li>• Should cut a 1 rupee coin.</li> <li>• 6" made of SS with one edge round and other edge sharp</li> </ul>	2 sets
<b>28. Toothed Forceps-Dissecting</b>	<ul style="list-style-type: none"> <li>• 15 cms, high tensile stainless Steel</li> </ul>	2 sets
<b>29. Artery Forceps 6"</b>	<ul style="list-style-type: none"> <li>• Two Nos.</li> <li>• 6", high tensile stainless Steel</li> </ul>	2 sets
<b>30. Toothed Forceps 6"</b>	<ul style="list-style-type: none"> <li>• 6", high tensile stainless Steel</li> </ul>	2 sets
<b>31. Magill's</b>	<ul style="list-style-type: none"> <li>• Standard Equipment in High Quality Stainless Steel</li> </ul>	2 sets

<b>forceps</b>		
<b>32. Kidney Tray</b>	<ul style="list-style-type: none"> <li>• 20 cms. X 15 Cm x 4 cm</li> <li>• 18/ 8 Stainless Steel.</li> <li>• 500 ml capacity</li> </ul>	2 sets
<b>33. Klik Clamp</b>	<ul style="list-style-type: none"> <li>• 50 nos.</li> </ul>	2 sets
<b>34. Tongue Depressor</b>	<ul style="list-style-type: none"> <li>• 100 nos. Disposable Wooden Spatulas</li> </ul>	2 sets
<b>35. First Aid Kit Bag</b>	<ul style="list-style-type: none"> <li>• An off the Shelf Resuscitation &amp; First Aid Kit Bag made of Nylon/tougher material having space for Emergency Airway Management and Resuscitation including essentials drugs, equipment &amp; a portable Oxygen Cylinder of with regulator, etc.</li> </ul>	2 sets
<b>36. Search Light (NOT TORCH LIGHT)</b>	<ul style="list-style-type: none"> <li>• Portable with spot beam of around 500 Meters, sealed lead acid/NiCd battery operated, capacity of 60 minutes with full intensity, rechargeable</li> <li>• The search light should be securely installed at a suitable &amp; easily accessible location in the ambulance with connection for continuous charging when not in use</li> </ul>	2 sets
<b>37. Rescue Equipment</b>	Crowbar (min 48 inches, with pinch point) & A multipurpose tool such as 'Stanley FuBar Forcible Entry Tool'/equivalent for vehicle extrication	2 sets

## VI Capturing real time video –

### Specification of Real Time Video Camera Surveillance System for live coverage of disastrous events in the State.

Sr. No.	Particular	Specifications
1	Camera	900TVL, 6MM Lens, weather-proof indoor day/night camera
2	Mobile DVR	4Channel MDVR, Built-in GPS, wireless module - 3G connectivity, Real-time video recording, Video quality 1-4 Level Local Hard disk -1TB for Storage of Video Data with GPRS incl.
3	Wiring and Camera connectivity	Wiring cost per vehicle –Power connection from battery, CCTV-MDVR connectivity, Power switch and accessories
4	SIM card	SIM card as per availability network in that area.
5	Central	Essential software solution for Mobile CCTV monitoring from

	<b>Monitoring Software</b>	remote location. (It is compatible with ERC Software.)
--	----------------------------	--

**Minimum Technical Specifications for GPS device**

The GPS Device shall be a stand-alone GPS Tracking Device and being submitted for registration must comply with the minimum specifications

SI	Specifications of GPS Devices	Validation Process	Confirmation (Yes / No)
1	Type 1 GPS device with Internal GPS (Frequency L1 1560 -1590 MHz ) and GPRS antenna: Dual band; Class 10, Device class B, TCP/IP Frequency band: L1 850/1900MHz and 900/1800MHz.	Self-certification by Applicant together with supporting document as under: - Certification from any NABL accredited laboratory or equivalent international certification, or - Component datasheet/ specification sheet from component manufacturer	
2	GPS Positional Accuracy: at least 5m	-Same as above-	
3	Internal battery (with minimum 4 hours backup)	Same as above-	
4	IP54 or higher protection classification,	Same as above-	
5	Temperature range : -10o C to +60o C	Same as above-	
6	Capacity to store 15000 positional logs on the device's internal memory. These shall be transmitted to the server as soon as the connectivity is restored.	Same as above- Same as above-	
7	GPS receiver: Minimum 20 channel, with - Acquisition sensitivity : better than (-)148dBm - Tracking Sensitivity better than (-)155 dBm TTFF Cold Start:	Same as above-	
8	Ports : at least two digital I/O ports	Self-certification by Applicant together with Device Data Sheet	

Legend: Yes: Feature is available in the GPS Device model submitted for Registration

No: Feature is not available in the GPS Device model submitted for Registration

## ANNEXURE – XII

### PROCEDURE FOR DEBARRING

#### DEBARRING OF BIDDER, WITHDRAWAL OF BIDDER

1. The Successful Bidder who fails to execute the agreement, to perform the obligations under the tender conditions and commits default in the performance of the contract will be debarred for a period of 3 years.
2. The Bidder who has withdrawn after participating in the tender will be ineligible to participate for a period of 3 years.
3. Non performance of any of the contract provisions will disqualify a firm to participate in the tender for a maximum period of 3 years.
4. (a) if the Bidder/s fail/s to execute the work order and informs SHS/NHM, Maharashtra about their inability to execute the order due to act of force *-majeure*, then the Commissioner FW & Director, SHS, Mumbai may pass appropriate order on merits of case.

(EXPLANATION: Increase in the cost of components, Power failure, Labour strike, Lay off, Closure of the factory etc. Would not be considered as act of *force-majeure*.)

(b) if the Bidder fails to execute 100% of the quantity mentioned in the Work order, then the Bidder will be ineligible to participate in any of the tenders floated by the SHS/NHM, Mumbai, Govt. Of Maharashtra for a period of one year immediately succeeding year in which Bidder was placed with work Order.

**The debarring of the Bidder is without prejudice to the other penalties stipulated in the conditions of Tender Document.**

### PROVISIONS FOR APPEAL

18. **A Bidder who has been debarred by the Tender Inviting Authority may, within 15 days from the date of receipt of such order, appeal to the State Government. The State Government after such enquiry into the matter, as is considered necessary and after giving the said Bidder an opportunity for representing his views , may pass such order in relation thereto as it thinks fit.**



**ANNEXURE- XIII**

**DETAILS OF WORK UNIT**

Name of the & Full Address of the  
Unit :

Name of Proprietor/Partner/Director :  
**PAN Number** :  
Phone Nos. :  
Fax :  
E-Mail :

Date of Inception :  
Licence No. & Date :  
Issued by :  
Valid up to :

Details (Address, Phone No,Fax,  
Email, Contact person) of all the  
service centres in Maharashtra :  
(Attach details separately) :

Signature of the Bidder

Place:  
Date:

## ANNEXURE-XIV

### PROFORMA FOR PERFORMANCE STATEMENT (FOR A PERIOD OF LAST 3 YEARS)

Name of firm -----  
-----

<b>Sl.</b>	<b>Name of the work</b>	<b>Year</b>	<b>No. of units equipped/fabricated</b>	<b>Name and full address of the purchaser</b>
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
1.				
2.				
3.				

Signature and seal of the Bidder-----

## ANNEXURE – XV

### CHECK LIST

Sl. No		Page No	Yes	No
1	Letter of Application (Annex - I)			
2	Power of Attorney (Annex- II)			
3	Power of Attorney for Lead Member Consortium (Annex- III)			
4	Details of Applicant/ Bidder (Annex – IV)			
5	Experience of the Applicant/ Bidder (Annex- V)			
6	Details of Staff (Annex- V, Inst. 6, Proforma A)			
7	Consolidated Yearly Performance of Ambulance (, Patients Attended etc.) (Annex-V, Inst. 7, Proforma - B)			
8	Details of covering distance by Ambulance (Annex-V, Inst.-8, Proforma-C)			
9	Authorisation from manufacturer for purchase of Vehicles/ Ambulances (Proforma E, Inst. 12- Annex-V)			
10	Authorisation from manufacturer for purchase of Medical equipments (Proforma F, Inst. 12- Annex-V )			
11	Details of Financial Status – Profit & Loss A/c Statements, Audited Balance Sheet for the Last 3 financial year (2013-14, 2014-15, 2015-16 Annex – VI)			
12	Affidavit – not Black listed (Annex- VII)			
13	Letter of Exclusivity (Annex – VIII)			
14	Anti-Collusion Certificate (Annex- IX)			
15	Details of Work Unit (Annex- XV)			
16	Performance statement (Annexure XVI)			
17	DD for cost of Tender Document			
18	EMD in the form of DD/Bank Guarantee to be kept in an envelope			
19	Documentary evidence incorporation of the company / concern (Annex- V, Inst.-2)			

<b>20</b>	Memorandum & Article of Association, Bye laws/ Trust Deed (Annex- V, Inst.-3)			
<b>21</b>	Registration of Certificate of Ambulance (Annex- V, Inst.-4)			
<b>22</b>	Copy of MoU/ Agreement for ownership of Ambulances (Annex- V, Inst.-5)			
<b>23</b>	Copies of Letter of Award/work orders issued to the Bidder & Registered Agreement/MoU in support of experience (Annex- V, Inst. 10)			
<b>24</b>	The instruments such as resolution of board to participate in Bid			
<b>25</b>	Client list			
<b>26</b>	Addresses of maintenance offices in Maharashtra State			
<b>27</b>	Statement on the make and model of the vehicle quoted with printed catalogue			
<b>28</b>	Notary attested copy of license/registration and its renewal certificate if any			
<b>29</b>	Notary attested copy of registration issued by sales tax authority			
<b>30</b>	Notary attested copy of PAN Card			
<b>31</b>	Notary attested copy of income tax return of last 3 financial year			
<b>32</b>	Sale tax clearance certificate			
<b>33</b>	Signed and sealed tender document (signature & sealed on each page)			

Place:  
Date:

Signature :  
Name in Capital Letters :  
Designation :

**ANNEXURE- XVI**

**STATE HEALTH SOCIETY, MAHARASHTRA**

**&**

**National Health Mission, Mumbai**

**TENDER FOR FIXING THE RATE CONTRACT FOR THE SUPPLY  
JUMBOAMBULANCE**

**PRICE BID**

**I. Rates Quoted For Procurement of Fabricated & well equipped  
JUMBOAMBULANCE**

**⋮ "A"**

**jumbo Ambulance**

Work specification	Rate quoted for one unit (in Rs. & Np.) & Total for 1 <b>Jumbo</b> Ambulance
	<b>Jumbo</b> Ambulance- 1
Purchase of fabricated & well equipped as <b>Jumbo</b> Ambulance as per the specifications given in ANNEXURE- XI(I,II,III,IV) illustrative list mentioned under the clause 3.5 of the TENDER Document.	<p><b><u>Cost per unit</u></b>                      In figures-----                      In words-----                      -----                      -----</p> <p><b><u>Cost for 1</u></b>                      In figures-----                      In words-----                      -----                      -----</p>

Total cost of **Jumbo** Ambulance– (Rs. In figures and words -----  
 -----  
 ----)

## II. Medical Equipments with Fixtures "B"

1	2	3	4
Sr. No.	Item Description	Quantity	Price
1	Oxygen Delivery System	4 sets	
2	Ambulance Cot	4 sets	
3	Scoop Stretcher	4 sets	
4	Spine Board	4 sets	
5	Transfer Sheet	2 sets	
6	Wheel chair	2 sets	
7	Bi-Phasic Defibrillator cum Cardiac Monitor with Recorder	2 sets	
8	Transport Ventilator	2 sets	
9	Oxygen Flow Meter with Humidifier	4 sets	
10	Suction Pump (Manual & Handheld)	4 sets	
11	Suction Pump (electronic)	2 sets	
12	Self-inflatable Resuscitation Bags	4 sets	
13	Mouth to Mask ventilation device	4 sets	
14	Oxygen Cylinder (Portable) with Oxygen Pressure Reducer	4 sets	
15	Oxygen Administration Equipment	4 sets	
16	Laryngoscope with blades	2 sets	
17	Syringe Infusion Pump	1 set	
18	Handheld Glucometer	2 sets	
19	Stethoscope	2 sets	
20	BP Apparatus (Digital)	2 sets	
21	Supillary Torch	2 sets	
22	Needle & Syringe Destroyer and Sharp dispenser	2 sets	
23	Thermometer (Digital)	4 sets	
24	Pneumatic Splints	2 sets	
25	Roller Splints	2 sets	
26	Cervical Collars	4 sets	
27	EMT Shears	2 sets	
28	Toothed Forceps-Dissecting	2 sets	
29	Artery Forceps 6"	2 sets	

Tender no. 11 /16-17/ Jumbo Ambulance

30	Toothed Forceps 6"	2 sets	
31	Magill's forceps	2 sets	
32	Kidney Tray	2 sets	
33	Klik Clamp	2 sets	
34	Tongue Depressor	2 sets	
35	First Aid Kit Bag	2 sets	
36	Search Light (NOT TORCH LIGHT)	2 sets	
37	Rescue Equipment	2 sets	

**Real Time Video Camera Surveillance System for live coverage of disastrous events.**

Sr. No.	Particular	Specifications	Price
1	Camera	900TVL, 6MM Lens, weather-proof indoor day/night camera	
2	Mobile DVR	4Channel MDVR, Built-in GPS, wireless module - 3G connectivity, Real-time video recording, Video quality 1-4 Level Local Hard disk -1TB for Storage of Video Data with GPRS incl.	
3	Wiring and Camera connectivity	Wiring cost per vehicle –Power connection from battery, CCTV-MDVR connectivity, Power switch and accessories	
4	SIM card	SIM card as per availability network in that area.	
5	Central Monitoring Software	Essential software solution for Mobile CCTV monitoring from remote location. (It is compatible with ERC Software.)	

Total cost of all the medical equipments for Rs. In figures and words -----  
 -----)

Sr. No.	Particular /Specifications	Price
1	GPS Device as per specification	

**III. OPERATIONAL COST OF THE JUMBOAMBULANCE  
with Annual Comprehensive maintenance PER MONTH "C"**

<b>Rate quoted for one unit (in Rs. &amp; Np.) &amp; Total for jumbo Ambulances</b>
<b>Phase</b>
<b>jumbo Ambulance - 1</b>
<u><b>Cost per unit</b></u> In figures----- In words----- ----- -----
<u><b>Cost for 1</b></u> In figures----- In words----- ----- -----

**The operational expense shall include:**

- a) Salary of the staff (including Training) – Operation of jumbo Ambulance,
- b) Maintenance cost of jumbo ambulance, equipments,
- c) All other operational cost for Medicines, Surgicals, Consumables, and Disposables etc.

**Total operational cost of jumbo ambulance with annual comprehensive maintenance**

**(Rs. In Figures and words -----  
-----  
-----)**



**IV. Total of Rates Quoted (A,B &C)**

Sl. No.	Description	In figures	In words
1	Total of 'A'		
2	Total of 'B'		
3	Total of 'C'		
4	Total of 'D' (i & ii only)		
5	Total of 'A', 'B' 'C' & D		

Rates of Eligible Bidder will be compared for L1 (Lowest 1) on **Total of A + B + C** as shown in above table no V in column no. 5 (five)

**Note:**

- *In case of discrepancy between unit price and total price, the unit price shall prevail.*
- ***This price schedule should be placed in separate sealed cover “Envelope 2”***
- *Specifications of designing and fabricating (interior & exterior )of the Ambulances & medical equipments offered should be as per the tender specification or with a higher configurations as prescribed in Annex- XII & XIII of this TENDER.*
- *The price quoted should be in Indian currency.*
- *In case of discrepancy between the prices quoted in words and in figures, lower of the two will be considered.*
- *The total value of fabrication including comprehensive warranty charges, equipments including comprehensive warranty charges, all taxes and other charges and the comprehensive maintenance charges will be taken as a single figure for computing the Bid ranking. Rates of individual items will not be taken into consideration for Bid evaluation.*
- *Bidder should sign each page of the bid document with seal/stamp of the office.*
- *Bidder should sign with seal/ stamp of the office A,B,C components of this Annex-XVIII for prices quoted.*

Place:

Signature of Bidder.....

Date:

Name.....

Business Address .....

## A PPENDIX – A

Service Provider shall maintain two log books. First log book (Vehicle log book) shall contain details of starting kilometre and time, closing kilometre and time on every journey, destination place and purpose with details of case. The other log book (patient log book) shall contain the summary of patient case details, the consumables and medicines used for every patient and the details of medication and procedures performed in a day to day basis. These shall be authorized by a responsible person of Service Provider. The formats are given in Appendix B.

Service Provider shall maintain a stock register book and status register book. The stock register contains the quantity of all the medicines, consumables and equipments available in the jumbo Ambulance and used details. The expiry dates of medicines and equipments working status shall be entered and updated into Status register and shall be authorized by a responsible person of Service Provider every month. In the stock register the quantities of medicines and consumables and in the status register the status of equipments shall be updated in a daily basis. The medicine expiry dates shall be updated monthly. The formats are given in Appendix B.

Service Provider shall implement patient consent form and patient report form as per Appendix C.

Service Provider shall ensure to include the following duties of Emergency Medical Technician.

Checks the functioning of all the equipments daily and are updated on the stock register.  
Properly dressed in uniform with clear identity

Provide patient stabilization, first aid services and other pre-hospital care during emergency transportation.

Maintaining patient log book, patient report form and patient consent form.  
Maintaining proper inventory.

Service Provider shall ensure to include the following duties of Drivers  
Make sure vehicle is roadworthy and carries all statutory documents including driver's license.

Properly dressed in uniform with clear identity.  
Be clear about the location of the incident and nearest safe route to take the journey  
Observe the road traffic rules and regulation.  
Park the jumbo ambulance in a safe, suitable position for easy departure.  
Prepare the para-medics of the nearest designated hospital to receive the patient, opening rear door.

Gather the equipment and tools and ensure its proper storage.  
Assist the Emergency Medical Technician and deal with other casualties as required by the accident.

Before leaving the incident spot check to make sure all the equipment has been returned to the jumbo ambulance.

Close and secure the rear doors.

Ensure a safe, smooth and comfortable journey.

Park the ambulance in suitable entrance to shift the patient to the emergency room.

Reporting the call status feedback to the Emergency Response Centre

Always maintain the vehicle logbook.

Service Provider shall maintain break-down log book for equipments and vehicle separately for all which contains all the break-down and corrective action details.

Driver shall coordinate all problems related to vehicle. Driver shall maintain the log of preventive actions corrective actions, spares replaced including replacement of tyres and preventive schedule of maintenance of jumbo ambulance. The formats of the logs are given in Appendix D.

Service Provider shall also appoint supervisors (Fabrication and Equipments) to coordinate all equipment and fabrication related issues. Service Provider shall provide all the jumbo ambulance with three years comprehensive warranty. Any problem related to fabrication and equipments shall be coordinated with the supplier and corrective actions are taken. The supplier shall not exceed break down time of 72 hours from fault reporting shall be ensured. The supervisor shall maintain the log of preventive actions corrective actions, spares replaced and preventive schedule of maintenance of jumbo ambulance. The supervisor shall also ensure four preventive maintenance schedules per year by the suppliers. The formats of the logs are given in Appendix D.

The jumbo ambulance shall be washed and cleaned every day. The jumbo ambulance interiors are cleaned after shifting every case and every day.

The jumbo ambulance is fumigated at least every week to control infection and repeated whenever necessary.

**APPENDIX – B**

**VEHICLE LOG BOOK FORMAT**

Vehicle Registration No. :

District Name :

Date	From (Place name and institute name)	To (Place name and institute name)	Time Out	Time In	Starting Km Reading	Ending Km Reading	Total Km Run	Particulars of patient (Patient Name & Address)	Signature of competent Authority

**VEHICLE LOG BOOK FORMAT**

Vehicle Registration No. :

District Name :

Date	Particulars of Patient (Patient Name & Address)	Patient Sex & Age	Patient Case summary	Ventilate or usage time	Treatment done during transit	Consumables/medicines used	Cost of the consumables/medicine used	Type (Emergency, Transfer etc)	Signature of competent authority

**STOCK REGISTER**

Vehicle Registration No. :

District Name :

Month :

Date	Name of Medicines																			
	Adrenaline				Atropine				Deriphyllin				Dobutamine 150 mg		Dobutamine 200 mg		Nor adrenaline			
	Qty	Issued	Pt Id.	Bal	Qty	Issued	Pt Id.	Bal	Qty	Issued	Pt Id.	Bal	Qty	Issued	Pt Id.	Bal	Qty	Issued	Pt Id.	Bal

This table shall be repeated for all other Medicines

Signature of DOCTOR:

Name:

Date	Name of Medicines																							
	Glucometer Strips				ET Tubes				Surgical Gloves				Oxygen mask & tubing				Airways				Disposables delivery kit			
	Qty	Issued	Pt Id.	Bal	Qty	Issued	Pt Id.	Bal	Qty	Issued	Pt Id.	Bal	Qty	Issued	Pt Id.	Bal	Qty	Issued	Pt Id.	Bal	Qty	Issued	Pt Id.	Bal

This table shall be repeated for all other consumables.

Signature of DOCTOR:

Name:

Sr. No.	Name Of Equipment	Quantity
1	2	3
Sr. No.	Item Description	Quantity
1	Oxygen Delivery System	4 sets
2	Ambulance Cot	4 sets
3	Scoop Stretcher	4 sets
4	Spine Board	4 sets
5	Transfer Sheet	2 sets
6	Wheel chair	2 sets
7	Bi-Phasic Defibrillator cum Cardiac Monitor with Recorder	2 sets
8	Transport Ventilator	2 sets
9	Oxygen Flow Meter with Humidifier	4 sets
10	Suction Pump (Manual & Handheld)	4 sets
11	Suction Pump (electronic)	2 sets
12	Self-inflatable Resuscitation Bags	4 sets
13	Mouth to Mask ventilation device	4 sets
14	Oxygen Cylinder (Portable) with Oxygen Pressure Reducer	4 sets
15	Oxygen Administration Equipment	4 sets
16	Laryngoscope with blades	2 sets
17	Syringe Infusion Pump	1 set
18	Handheld Glucometer	2 sets
19	Stethoscope	2 sets
20	BP Apparatus (Digital)	2 sets
21	Penicillary Torch	2 sets
22	Needle & Syringe Destroyer and Sharp dispenser	2 sets
23	Thermometer (Digital)	4 sets
24	Pneumatic Splints	2 sets
25	Roller Splints	2 sets
26	Cervical Collars	4 sets
27	EMT Shears	2 sets
28	Toothed Forceps-Dissecting	2 sets
29	Artery Forceps 6"	2 sets
30	Toothed Forceps 6"	2 sets
31	Magill's forceps	2 sets
32	Kidney Tray	2 sets
33	Klik Clamp	2 sets
34	Tongue Depressor	2 sets
35	First Aid Kit Bag	2 sets
36	Search Light (NOT TORCH LIGHT)	2 sets
37	Rescue Equipment	2 sets

Signature of DOCTOR:  
Name

Tender no. 11 /16-17/ Jumbo Ambulance

**STATUS REGISTER**

MEDICINES STATUS FOR THE MONTH OF -----

Vehicle Registration No. :

District Name :

Medicine & Consumables List		
Sr. No.	Item	Quantity
1.	Cotton roll 500 gm	8
2.	Bandage (a) 15cm (b) 10cm (c) 6cm x 5mtrs	12 each
3.	Antiseptic solution 200 ml	8 Bottles
4.	Povidine Iodine solution 100 ml	8 Bottles
5.	Leucoplast, Micropore x 1mtr	8 Rolls
6.	Pain Spray	8 Cans
7.	Mistdress Spray	8 Cans
8.	Vinodine Spray	8 Cans
9.	Coolex Spray	8 Cans
10.	Face Mask (Disposable)	2 Box
11.	Surgical Gloves (Size 6.5,7,7.5)	2 Box
12.	Classic LMA disposable (2,2.5,3,4)	2 Each
13.	Endo Tracheal Tube – Disposable (all sizes)	2 Each
14.	Wide bore needles	4
15.	Syringes ABG ( 2 & 5 ml)	10 each
16.	Three way stop cork	20
17.	Extension I/V lines	8
18.	Disposable Delivery Kit	8
19.	ECG electrodes	2 box
20.	Guedel's airway 00-5,00,0,1,2,3,4,5	8 each
21.	Nasal airways(all sizes) & catheters	8 each
22.	Binasal Cannula,	8 each
23.	Tracheostomy tube cuff & Plain (all sizes)	8 each
24.	Mini Tracheostomy kit	4
25.	Ventimask, facemask with nebulizer	4
26.	Pressure Infusion Bags	8

Tender no. 11 /16-17/ Jumbo Ambulance

27.	Rightangled Shivel Connector	8
28.	Bone Marrow Needle	8
29.	I.V. Fluids (RL, NS, DNS 5%, 5% D, Isolyte P, Hemaxyl),HES	8 each
30.	Micro drip-set & Drip-set	8 each
31.	Nasogastric Tubes (various sizes)	8 each
32.	Burn Pack : Standard package, clean burn sheets (or towels for hildren)	8
33.	Triangular bandages ( Minimum 2 safety pins each)	8
34.	Sterile multi-trauma dressings (various large and small sizes)	8 each
35.	ABDs, 10"x12" or larger	8
36.	4"x4" gauze sponges	8
37.	Tab. Paracetamol 500mg	100 Tab
38.	Gauze rolls Sterile (various sizes)	8 each
39.	Elastic bandages Non-sterile (various sizes)	8 each
40.	Occlusive dressing Sterile, 3"x8" or larger	8
41.	Adhesive tape : Various sizes (including 2" or 3")	8 each
	Adhesive tape (hypoallergenic):Various sizes(including 2"or 3")	
42.	Cold packs	8
43.	Waste bin for sharp needles, etc.	4
44.	Disposable bags for vomiting, etc.	80
45.	Teeth guard	8
46.	Sample collection kits	8
47.	Inj. Adrenaline	80
48.	Inj. Atropine 0.6 mg	80
49.	Inj. Calcium Carbonate	20
50.	Inj. Dopamine	20
51.	Inj. Dobutamine	20
52.	Inj. Noradrenaline	20

53.	Inj. Nitroglycerine	20
54.	Inj. Sodium Bicarbonate	80
55.	Inj. Hydrocortisone	16
56.	Inhaler Beclomethasone	8
57.	Inhaler Salbutamol	8
58.	Inj. Frusemide	40
59.	Inj. Diazepam/Midazolam	40
60.	Inj. Etofilline 77mg + Theophylline 23mg	2ml x 40
61.	Inj. Phenytoin sodium	40
62.	Inj. Pheniramine maleate 22.75 mg/ml	2 ml x 40
63.	Inj Dexamethasone	40
64.	Inj. Ondansetrone	40
65.	Inj. KCl	20
66.	Inj. Lignocaine 2%	20
67.	Inj. Amiodarone (50 mg/ml)	20
68.	Inj. Magnesium sulphate 25% 2ml.	20
69.	Inj. Mannitol 20 %	20
70.	Activated charcoal	8 pack
71.	Inj. Naloxone HCl	20
72.	Tab. Amlodipine 5mg	400 Tab
73.	Bacteriostatic water for Injection	80
74.	Inj. Sodium Valporate	20
75.	Inj. Diclofenac Sodium	3ml x 40
76.	Inj. Paracetamol	40
77.	Syp. Paracetamol 125mg/ml	60ml x20
78.	Tab. Isosorbide Dinitrate 5mg	1000Tab
79.	Tab. Aspirin 75 mg	1000Tab

Tender no. 11 /16-17/ Jumbo Ambulance



Shall include all other medicine on board

Signature of DOCTOR:

Name:

EQUIPMENT STATUS FOR THE MONTH OF -----

Vehicle Registration No : \_\_\_\_\_

District Name :

Ventilator	Defibrillator	Foetal monitor	Syringe pump	Suction pump	Tourniquet	Pulse oxymeter	Nebulizer	Glucometer	Needle Destroyer	BP apparatus & steth	Ref. Medicine cabinet	Oxyflowmeter	Warningtorch	Pupillary torch	Thermometer	Larygoscope

Signature of DOCTOR:

Name:

**APPENDIX – C**  
**CONSENT FORM**

**Date** : \_\_\_\_\_ **Veh. No.:** \_\_\_\_\_  
**Patient's Name** : \_\_\_\_\_  
**Address** : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Phone No. /Mobile** :

**IF THE FORMS IS TO BE FILLED BY PATIENT**

1. Mr./Mrs/Ms. \_\_\_\_\_ Aged \_\_\_\_\_ Male/Female is in need of transfer in the ambulance operated under MEMS from \_\_\_\_\_ to \_\_\_\_\_

All the likely consequences, which have been explained to me in the language I best, understand, will be solely borne by me at my own risk under all circumstance.

Patient Signature  
Paramedic/Doctor/Attendant  
Name (In Block Letters)

Counter Signature of  
Name: \_\_\_\_\_

**IF THE FORMS IS TO BE FILLED BY PATIENT'S RELATIVE/COMPANION**

2. Mr./Mrs/Ms. \_\_\_\_\_ Aged \_\_\_\_\_ Male/Female have understood and granted consent to \_\_\_\_\_ ambulance service to transfer my \_\_\_\_\_. The risks and consequences have been fully explained to me and my \_\_\_\_\_ to our satisfaction and we agree that the transfer will be at our own risk under all circumstances.

Relative/ Companion Signature  
Paramedic/Doctor/Attendant  
Name (In Block Letters)

Counter Signature of  
Name: \_\_\_\_\_

**APPENDIX – D**

**EQUIPMENT BREAKDOWN LOG BOOK**

District Name :

S/n	Name of the equipment	Nature of complaint	Date of Break Down	Repaired/ Re placed date	Details of Service undertaken	Name of Spares replaced	Equipment Status	Company name & signature and name of Engineer

Signature of Supervisor :

Name:

**EQUIPMENT PREVENTIVE MAINTENANCE REGISTER**

S/n	Name of the equipment	Preventive maintenance date	Details of preventive action	Spares replaced (if any)	Equipment Status	Company name and signature & name of Engineer

Signature of Supervisor :

Name:

**VEHICLE BREAKDOWN LOG**

S/n.	Registration number of Vehicle	Nature of complaint	Date of Break Down	Repaired date	Details of Service undertaken	Name of the Spares replaced	Vehicle Status	Company name and signature and name of Engineer

Signature of Supervisor :

Name:

**VEHICLE PREVENTIVE MAINTENANCE LOG**

S/n.	Registration number of Vehicle	Preventive maintenance date	Details of preventive action	Spares replaced (if any)	Vehicle Status	Company name and signature and name of Engineer

Signature of Supervisor :

Name:

**APPENDIX – E**

**REPORT FORMATS**

**1) Patient transported reports**

Month	No. of ambulance	Total Calls	Total Emergency Calls	Total Emergencies attended	Total Trauma/accident
Total					

**2) Distance travelled reports**

Month	No. of ambulance	Total distance traveled by ambulance	Avg. distance traveled per ambulance per month
Total			

**3) Vehicle Report**

District	Registration No. of vehicle	Month	No. of break down calls	No. of preventive maintenance carried out	No. of accidents	Name of spares replaced	Cost of spares replaced	Back up vehicle available in hrs:min	Total down time hrs:min

**4) Equipments Report**

District	Registration No. of vehicle	Month	Name of the equipment	No. of break down calls	No. of preventive maintenance carried out	Name of spares replaced	Total down time hrs:min

**5) Employee Reports**

S/n	Emp.ID	Emp. Name	Designation	Department	Position	DOJ	Experience	Qualification	Age	Sex

**Issued to M/s. \_\_\_\_\_**

# **RIDER-A**

## **1. RESOLUTION OF DISPUTE**

In the event of any question, dispute or differences in respect of contract or terms and conditions of the contract or interpretation of the terms and conditions or part of the terms and conditions of the contract arises, the parties may mutually settle the dispute amicably.

## **2. ARBITRATION**

In the event of failure to settle the dispute amicably between the parties, the same shall be referred to the sole arbitrator (insert name and designation of the officer), Government of Maharashtra. The award passed by the sole Arbitrator shall be final and binding on the parties.

The arbitration proceedings shall be carried out as per the Indian Arbitration and Conciliation Act, 1996 and the rules made there under.

## **3. GOVERNING LANGUAGE**

English language version of the contract shall govern its interpretation.

## **4. APPLICABLE LAWS**

The contract shall be governed in accordance with the law prevailing in India, Act, Rules, Amendments and orders made thereon from time to time.

## **5. INDEMNIFICATION**

The contractor shall indemnify the purchaser against all actions, suit, claims and demand or in respect of anything done or omitted to be done by contractor in connection with the contract and against any losses or damages to the purchaser in consequence of any action or suit being brought against the contractor for anything done or omitted to be done by the contractor in the execution of the contract. .