

**HAMDARD INSTITUTE OF MEDICAL SCIENCES AND
RESEARCH
&
ASSOCIATED
HAKEEM ABDUL HAMEED CENTENARY HOSPITAL
GURU RAVIDAS MARG,
NEW DELHI – 110062**

**Subject: Tender for Dietary Services in HIMSR and HAHC
Hospital.**

Terms and conditions for Tender for Operating Dietary Services in Hakeem Abdul Hameed Centenary Hospital with reference to advertisement no HIMSR/Tender/2022/03.

GENERAL INSTRUCTIONS TO TENDERERS

1. **The tender document can be downloaded from HIMSR website www.himsr.co.in upto 09.05.2022 upto 02:00 PM after satisfying themselves of the eligibility for the work as per tender terms and conditions**
Earnest money (in form of DD) : Rs. 5, 00,000 (Adjustable/Refundable)
Tender Fee (in form of DD) : Rs. 5,000 (Non-refundable)
Last Date : 09.05.2022 at 02:00 PM
2. Interested parties may drop the tender in the tender box placed in the Office of Head Finance & Administration, HAHC Hospital on or before 09.05.2022 upto 02:00 PM alongwith separate Demand Drafts for earnest money and tender document fee (Rs 5,000 each tender non-refundable) shall be in sealed envelope clearly specifying the name of the work as stated above.
3. The DDs shall be in favor of **Hamdard Institute of Medical Science & Research** payable at **New Delhi**. The tender shall be opened on same day at 3:00 PM by the tender committee in the presence of available interested parties. In the event of non-following the required procedure, the tender is liable to be rejected.
4. HAHC Hospital, HIMSR reserves the right to reject any/all tenders without assigning any reason.
5. The tender will be a mix of technical and financial bids.
6. The tenderer shall furnish KYC details.
7. The successful bidder shall be informed to make a Demo within reasonable period, failing which the award of tender will be cancelled.
8. HAHC Hospital reserves the right to amend or withdraw any of the terms and conditions contained in the tender document.
9. The successful bidder will be required to enter into an agreement with HIMSR on the specified terms and conditions.
10. Preference will be given to those parties who have working experience.
11. The tenderer must attach all the relevant documents, like registration certificate of the firm, PAN/GST and license Nos etc. MOA in case of a partnership company.
12. **The tender cost and earnest money shall not be exempted for any reason whatsoever and without the tender cost and earnest money, the tender will not be entertained.**

(Mushtaq A. Zargar)
Head Finance & Administration
HIMSR/HAHC Hospital

Documents to be attached by the Party

1.	Reference cost of tender form (DD in original to be attached)	DD. No.----- Date-----
2.	Reference of Earnest Money (DD in original to be attached)	D.D. No. ----- Date-----
3.	Registration certificate (enclose the self-attested copy of registration certificate)	No.----- Date----- Validity: From----- To -----
4.	Permanent Account Number issued by the Income Tax Department (Enclose self-attested copy of PAN)	No. -----
5.	GST Registration Certificate (Enclose self- attested copy of tax registration certificate)	No. -----Date----- From-----To-----
6.	Annual Turnover Certificate for last 3 years(Enclose self-attested copy)	(i) Rs. _____ lakhs (2019-2020) (ii) Rs. _____ lakhs (2020-2021) (iii) Rs. _____ lakhs(2021-2022)
7.	Enclose copy of auditor's report with balance sheet of last 3 financial years	_____ _____ _____
8.	Proof of experience in last 03 Years (Attach the copy of experience certificate)	Name of organization From..... up -to..... 1..... 2..... 3..... 4.....
9.	Total number of Manpower under unskilled, Semi-skilled and Skilled categories.	

10.	Current Client List	
11.	Copy of PF & ESI registration certificate, with EPFO & ESI.	
12.	Copy of Trade license essential for carrying out the activities under the contract.	

Signature of bidder with seal

Specific terms and conditions for Tender for Operating Dietary Services in HIMSR/Hakeem Abdul Hameed Centenary Hospital with reference to advertisement no HIMSR/Tender/2022/03.

HAHCH will hereinafter be referred to as Licensor and Party as Licensee.

1. The Party shall supply approved quality meals consisting of breakfast, mid-morning assortments, lunch, evening tea, dinner and at bed time as per suggested diet plan given at **Annexure-I to III** for the patients in HAHCH as per rates approved and made part of the agreement. There will be no compromise of quality in this regard.
2. In this regard, Party should have hygienic kitchen at nearby reasonable area i.e. 2-3 Kms. Shall provide the details.
3. The Party will be responsible for engaging & maintaining adequate number of persons for timely cooking, distribution, serving of food and disposal of garbage and left over food.
4. The Party selected for the supply of patient diet, will be required to maintain such level of cleanness and standard of hygiene with regard to the persons under his employment and utensils for serving the food as may be decided by the Hospital Administration.
5. The Party shall arrange/obtain various statutory licenses from the concerned authorities in the name of HAHCH and in their own name for which the expenses will be borne by the Party/HAHCH as the case may be. HAHCH would provide necessary documents in this regard.
6. Diet menu for General Wards, Semi-Special, ICUs and Private Ward shall be set by HIMSR/HAHCH dieticians on weekly basis including diet plan for special category of patient's right from breakfast to dinner. The menu will specify the quantity and number of items to be served.
7. The Licensee will adhere to shift timings and attendance rules as per statutory norms and plan their operations across 3 shifts, 24x7 all through the year. Special arrangements for national holidays shall be made.
8. It would be the bounden duty and responsibility of licensee to maintain high standards of quality of diet to be served day after day and adhere to timelines scrupulously for serving breakfast to dinner. An indicative diet chart is enclosed at **Annexure I** for reference and follow up.

9. The Licensee shall suggest/set standard SLA and set of KPAs which would form part of the contract and shall be mutually signed off to achieve various compliances.
10. The Licensor will enforce rigorous monitoring of the functioning of the entire system by constituting a Monitoring Committee to be communicated to the Licensee separately. However, for specific monitoring of the diet plan services on day to day basis, a committee comprising two dieticians of HIMSR/HAHCH, Kitchen Manager would function under the overall supervision of Medical Superintendent.
11. Normally no upper or lower limits for serving of diets per day/or day to day basis in the general wards, special and private wards shall be set. However, HIMSR/HAHCH will notify to the Licensee the meal planning a day before, preferably in the evening, regularly. Both the Licensor and the Licensee will be in touch with each other.
12. The Licensee shall suggest rates for general, semi-special/special and private wards for meal from breakfast to dinner per day per patient exclusive of GST, which shall be paid by the Licensor, if applicable. If additional eatables shall be requisitioned on festivals, they shall be arranged from outside on the cost to be mutually decided. The Licensee shall bear any other tax liability on their own.
13. The diet will be delivered by the Licensee at the junction of the wards and its distribution will be handled by the staff of HIMSR/HAHCH. The Licensee shall be solely responsible for collection of the used utensils back to the kitchen. The Licensor will not be responsible for breakage, loss, pilferage etc. and no claim to compensate any damages will be entertained by the Licensor.
14. The contract will be valid for a period ranging from 1 to 2 years effective from the date of its signing. First 3 months shall be treated as probation period and on the basis of performance, further extension shall be considered. All the conditions of the contract/agreement will be observed scrupulously and binding on the Licensee. Any let up in the observance of the terms and conditions and their flagrant frequent violations by the Licensee will be viewed seriously and the contract will be revoked by HIMSR/HAHCH by giving two months' notice. In case the Licensee may not wish to continue for the full agreed term of the contract, they can suggest the termination of the contract by giving two months' notice to the Licensor in writing.
15. The Licensee shall arrange all consumptions/meals in their kitchen which will be inspected and approved by the Licensor before operation of the contract. Any changes/improvements required shall be immediately carried out by the Licensee to the satisfaction of the Licensor.
16. It would be the responsibility of the Licensee to ensure the verification of antecedents of the staff engaged at their own cost. Their medical on regular basis shall be conducted in HAHCH. The staff will wear proper uniform, clean and laundered.

17. The Licensee shall meet cost of all consumables & disposable items and include in the rates of supply.
18. The Licensee shall take care of the provisions of the Food and Adulteration Act and shall be responsible/liable for damages, claim etc. for any such act which may cause harm to the patients by any eatables/consumable items.
19. The Licensee will tender the bill for the supplies made by them, duly certified by Hospital Administration, on monthly basis from first to last day of the month by second of the succeeding month and HIMSR/HAHCH will normally make the payment by seventh of every month.
20. That in the event of any dispute, differences, arising between the parties to this License Agreement for any reason whatsoever relating to this License Agreement whether during the substance/currency of this License Agreement or thereafter the parties will endeavor to amicably resolve the same, but in case if dispute or differences still remaining unresolved, the same shall be referred to a Sole Arbitrator appointed by the Director General, HIMSR. The decision of the Arbitrator shall be final and binding upon both the parties concerned.

Head Finance & Administration
HIMSR/HAHC Hospital

I/We have read the above terms and conditions and are acceptable to me/us.

Signature of the authorized person:

Name of the signatory
(In block capital letters):

Status of the signatory i.e. Proprietor/Partner:

Place.....

Date: