

North Eastern Indira Gandhi Regional Institute of Health and Medical Sciences, Shillong

(An Autonomous Institute, Ministry of Health and Family Welfare, Government of India)

Director's Block, GPO Post Bag No.92, Mawdiangdiang, Shillong 793 018, Meghalaya

Store & Procurement:

Tele Fax: (0364) 2538032

F. No: NEIGR/S&P/O -03/2020 -2021

Email: storeneigrihms@gmail.com

Website: neigrihms.nic.in

Dated: 14/01/23

To,  
Nebula Surgical Private Limited,  
NEBULA, 5<sup>th</sup> Floor, Narmada Park-3,  
Opp. King's Height, Vidhyakaunj Society main Road  
Amin Marg, Rajkot-360001  
Phone-91-2812584832  
Email-info @nebulasurgical.com

Sub: Awarding/Provisional letter of Intent /Award-Rate Contract for processing of Consumables, accessories, Implants, Devices, Screw Set, on case to case consignment basis, on rate contract for a period of three years, extendable upto 6 months or till the finalization of the next tender, whichever is later, for Department of orthopaedics.

Ref: Our Open Tender No: NEIGR/S&P/OT/E-05A/2022-23; Dated: 16/01/2023 and your offer in response to our tender.

Sir,

1. With reference to your bid and in accordance with the terms, conditions of the tender document and this letter of intent, the Institute is pleased to offer a rate contract for Implants/ Consumables for Orthopaedics Department w.e.f. 01<sup>st</sup> October, 2023, for the items and cost listed at Annexure "A".
2. The tendered rates and the validity of bids shall be for a period of **Three year from the date of Award, extendable up to 6 months, or till the finalization of next tender, whichever is later.** It may be made clear that the said contract period may be extended on the option of the Director, NEIGRIHMS, if situation warrants till the finalization of the next tender, subject to satisfactory performance; However, the Institute reserves the right to terminate the contract with one month notice.
3. The Accepting officer reserves the right to have second inspection/enquiry which would be nominated by Director of the Institute, and have the right to take necessary action, if found not conforming to the terms and conditions of the contract though the report of the earlier inspection has been accepted by the normal inspection authority.
4. On insistence, the vendor/contractor, the supplier should be in a position to submit quality assurance certificate from the competent authority. Stores will be accepted subject verification and inspection by the competent authority / inspecting agency at NEIGRIHMS, Shillong.
5. The terms and conditions of the tender and the agreement executed will be binding on the vendor. This offer is being issued in accordance with the terms & conditions of NEIGRIHMS / Government of India and in the manner specified herein shall operate to create a specific contract between the vendors (with whom the contract referred to) on one part and NEIGRIHMS, Shillong, on the other part.
6. The stores need to be provided will be as per the desired specification, as per WHO GMP/BIS/DCGI standards, as applicable to each category, within time schedule prescribed by the Department/concerned faculty.
7. In the event of failure on the part of the vendor to provide adequate service /delay in supply, then, necessary action will be taken by the management of NEIGRIHMS. If there is any complaint against the vendor, the vendor shall be afforded an opportunity to furnish explanation within 7 (seven) days. If the explanation is not

फार्मास्यूटिकल केमिस्ट  
Pharmaceutical Chemist  
अधीक्षक फार्मास्यूटिकल  
Superintendent Pharmacist  
शिल्लोंग 18  
Shillong 18

UDC Store Accounting  
Central Store NEIGRIHMS

Store & Procurement Officer  
NEIGRIHMS Shillong-18

satisfactory, the appropriate authority reserve the right to terminate /discontinue the contract and take suitable action deemed fit in the interest of the Institute.

8. The agency shall undertake to sign the contract agreement within 15 (fifteen) days from the date of issue of the letter of acceptance/Intent. However, successful bidder shall execute an agreement on non – judicial stamp paper of value of Rs. 100/- (stamp duty to be paid by the bidder).
9. Provision of samples for inspection/second inspection, shall be provided by the supplier/vendor/contractor within the cost indicated.
10. In case of decrease in rate, supplies should be in accordance with the decreased rates. Vendors are required to certify that rates have not reduced during the period of supply.
11. No work will be allotted to Non-tribal bidder, contractors, Suppliers, stockist, bonded warehouse, private carriage contractors, cooperative societies etc except under a valid trading license issued by the Khasi Hills Autonomous District Council, Shillong.
12. In case of Stores with life:
  - a. Stock should be supplied to this Institute from the latest batch and such stock should have a minimum life period of two years, depending upon the normal potency prescribed thereof.
  - b. In the event of such stores not being utilized within their life period, the bidder shall replace the unutilized unexpended stocks by fresh stock without any extra cost.
13. The stores should be supplied to the Institute based on the functional requirements of the user department and in compliance to the desired specifications, quality and quantity.
14. The responsive vendor has to provide the details vendor/supplier address, contact no of the authorized representative to be contacted along with awarded stores with cost, warranty, service to be provided etc to the respective deptt/Institute.
15. The Invoice will be submitted in quadruplicate to store along with the challan/e-remittance copy duly countersigned by the user department for processing of the Bills of the vendor.
16. The stores as detailed however modification by the authority from time to time shall include Consumables,accessories,Implants,Devices,Screw Set etc "on consignment basis".
17. Department shall raise demands /indents on quarterly basis for above stores for being included in the open e-tender rate contract/ GeM, for being conveyed to the vendor.
18. The "hospital user charges" for the services, procedure shall be remitted to the respective payment counter/MRD, prior to the commencement of the service /procedure, receipt/ e-receipt shall be verified by the Nursing Officer / senior most technicians on duty and concerned Faculty. Copy of the financial record shall be retained in the respective departmental and MRD records.
19. The cost of consumables, accessories, implantable devices etc "on consignment basis" shall be recovered on case to case basis, as per notified prevailing rates through open e-tender rate contract/GeM, which shall be available with the department, MRD, Hospital administration and the Institute's website.
20. The cost of consumables, accessories, implantable devices etc "on consignment basis" shall be remitted by the beneficiary to the Bank of Baroda, Mawdiangdiang (S/B-Accountno. 30270100005127, IFSC code: BARBOMAWDIA, Name: NEIGRIHMS Hospital Revolving Fund") by challan or RTGS, prior to the commencement of the procedure. Receipt/E-receipt shall be verified by the Nursing Officer/senior most Technicians on duty and concerned Faculty. The challans under "NEIGRIHMS Hospital Revolving Fund" shall be available with the stores, user department and on the website of the Institute. The same can be deposited

Pharmaceuticals  
NEIGRIHMS  
Shillong

Admission

UDC Store - Accounting  
Central Store - NEIGRIHMS

Signature

with the consent of user department / stores to Bank of Baroda, NEIGRIHMS campus branch by challan or RTGS. Copy of the receipt/ e-receipt of financial transaction shall be retained in the respective department and copy forwarded by the department to Central Medical stores/MRD along with bill by the vendors.

21. The vendor should maintain a log book of stores, assistive devices, instrumentation set, service details, equipment etc provided to the department by the rate contacted vendor in order to fulfill the medical procedures as may be required/ certified by the Head of department/ Faculty In charge. All details in regard to the vendor/ supplier name, address, contact no, stores provided with cost, warranty period, services provided, repair and maintenance requirement should be clearly recorded.
22. In the process of replenishment of stores on consignment basis and processing of bills of vendors the Pharmacist/Superintendent Pharmacist, Central Medical Stores shall verify receipt /E-receipt /Challan, the procedure /services performed in the respective department, cost of stores utilized from the "consignment basis/buffer stock" as per record and the inventory of the user department shall be processed for replenishment as per notified prevailing rates through open e-tender rate contract/ GeM, with certification of the concerned Faculty In charge and MS/DMS. The vendor shall ensure receipt of stores of the quantity required as per order/specifications, based on usage. Vendor will take necessary steps to replenish stocks well in time to avoid any difficulty in supply on account of any item going out of stock.
23. Settlement of disputes – If there is any dispute or differences, the same may be referred to Director, NEIGRIHMS. Director, NEIGRIHMS or his authorized representative shall be the final authority in all disputes and decision taken by the authority will be binding on all concerned. The vendor hereby indemnify that they have no objection to settle the dispute, if any, by the Director, NEIGRIHMS or his authorized representative, being the employee of the Institute.
24. The onsite Technical Support as desired by the user department should be provided by the respective bidder.
25. It is hereby agreed that all Terms & Conditions are as per Tender Enquiry No: NEIGR/S&P/OT/E-05A/2022-23; Dated: 16/01/2023 forms part of this agreement.

Yours faithfully,

Store & Procurement Officer,  
NEIGRIHMS, Shillong

Copy forwarded for information and necessary action please:

1. Department of Orthopaedics
2. MS/DMS
3. Sr. Accounts Officer/ Accounts Officer/Assistant Accounts Officer
4. MRD/MSW/Billing Section
5. Relevant file
6. Institute website

Encl: ③ A & Shal

① Mr. Sankar for names for website update

② Mr. Sankar for names for website update

③ Mr. Sankar for names for website update

④ Mr. Sankar for names for website update

UDC Store Accounting  
Central Store NEIGRIHMS

Further

NEIGRIHMS, Shillong



Store & Procurement Office  
Department of Defense

439	BoQ1	Connecting Rod 110	Item439	Each	0.00	NEBULA SURGICAL PVT. LTD.	598.00	29.90	627.90	L1	Nil
441	BoQ1	Connecting Rod 130	Item441	Each	0.00	NEBULA SURGICAL PVT. LTD.	724.50	36.23	760.73	L1	Nil
443	BoQ1	Connecting Rod 150	Item443	Each	0.00	NEBULA SURGICAL PVT. LTD.	862.50	43.13	905.63	L1	Nil
445	BoQ1	Connecting Rod 170	Item445	Each	0.00	NEBULA SURGICAL PVT. LTD.	862.50	43.13	905.63	L1	Nil
446	BoQ1	Connecting Rod 180	Item446	Each	0.00	NEBULA SURGICAL PVT. LTD.	862.50	43.13	905.63	L1	Nil
447	BoQ1	Connecting Rod 190	Item447	Each	0.00	NEBULA SURGICAL PVT. LTD.	862.50	43.13	905.63	L1	Nil
453	BoQ1	Connecting Rod 250	Item453	Each	0.00	NEBULA SURGICAL PVT. LTD.	862.50	43.13	905.63	L1	Nil
459	BoQ1	Connecting Rod 300	Item459	Each	0.00	NEBULA SURGICAL PVT. LTD.	1046.50	52.33	1098.83	L1	Nil
463	BoQ1	Connecting Rod 350	Item463	Each	0.00	NEBULA SURGICAL PVT. LTD.	1368.50	68.43	1436.93	L1	Nil
483	BoQ1	DCS Lag Screw - 50 mm	Item483	Each	0.00	NEBULA SURGICAL PVT. LTD.	1610.00	80.50	1690.50	L1	Nil
484	BoQ1	DCS Lag Screw - 55 mm	Item484	Each	0.00	NEBULA SURGICAL PVT. LTD.	1449.00	72.45	1521.45	L1	Nil
485	BoQ1	DCS Lag Screw - 60 mm	Item485	Each	0.00	NEBULA SURGICAL PVT. LTD.	1449.00	72.45	1521.45	L1	Nil
486	BoQ1	DCS Lag Screw - 65 mm	Item486	Each	0.00	NEBULA SURGICAL PVT. LTD.	1449.00	72.45	1521.45	L1	Nil
487	BoQ1	DCS Lag Screw - 70 mm	Item487	Each	0.00	NEBULA SURGICAL PVT. LTD.	1449.00	72.45	1521.45	L1	Nil
488	BoQ1	DCS Lag Screw - 75 mm	Item488	Each	0.00	NEBULA SURGICAL PVT. LTD.	1449.00	72.45	1521.45	L1	Nil
489	BoQ1	DCS Lag Screw - 80 mm	Item489	Each	0.00	NEBULA SURGICAL PVT. LTD.	1449.00	72.45	1521.45	L1	Nil
490	BoQ1	DCS Lag Screw - 85 mm	Item490	Each	0.00	NEBULA SURGICAL PVT. LTD.	1449.00	72.45	1521.45	L1	Nil
491	BoQ1	DCS Lag Screw - 90 mm	Item491	Each	0.00	NEBULA SURGICAL PVT. LTD.	1449.00	72.45	1521.45	L1	Nil
492	BoQ1	DCS Lag Screw - 95 mm	Item492	Each	0.00	NEBULA SURGICAL PVT. LTD.	1449.00	72.45	1521.45	L1	Nil
493	BoQ1	DCS Lag Screw - 100 mm	Item493	Each	0.00	NEBULA SURGICAL PVT. LTD.	1449.00	72.45	1521.45	L1	Nil
494	BoQ1	DCS Lag Screw - 105 mm	Item494	Each	0.00	NEBULA SURGICAL PVT. LTD.	1449.00	72.45	1521.45	L1	Nil
495	BoQ1	DCS Lag Screw - 110 mm	Item495	Each	0.00	NEBULA SURGICAL PVT. LTD.	1449.00	72.45	1521.45	L1	Nil
496	BoQ1	DCS Lag Screw - 115 mm	Item496	Each	0.00	NEBULA SURGICAL PVT. LTD.	1449.00	72.45	1521.45	L1	Nil
497	BoQ1	DCS Lag Screw - 120 mm	Item497	Each	0.00	NEBULA SURGICAL PVT. LTD.	1449.00	72.45	1521.45	L1	Nil
504	BoQ1	4.5mm cortex screws - 20mm to 50mm, self-tapping (2mm increments)	Item504	Each	0.00	NEBULA SURGICAL PVT. LTD.	342.70	17.14	359.84	L1	Nil
505	BoQ1	5mm locking screws - 20mm to 50mm, self-tapping (2mm increments)	Item505	Each	0.00	NEBULA SURGICAL PVT. LTD.	471.50	23.58	495.08	L1	Nil
539	BoQ1	Diameter 13 mm x Length 34 cm	Item539	Each	0.00	NEBULA SURGICAL PVT. LTD.	1541.00	77.05	1618.05	L1	Nil
540	BoQ1	Diameter 13 mm x Length 36 cm	Item540	Each	0.00	NEBULA SURGICAL PVT. LTD.	1541.00	77.05	1618.05	L1	Nil
541	BoQ1	Diameter 13 mm x Length 38cm	Item541	Each	0.00	NEBULA SURGICAL PVT. LTD.	1541.00	77.05	1618.05	L1	Nil
542	BoQ1	Diameter 13 mm x Length 40 cm	Item542	Each	0.00	NEBULA SURGICAL PVT. LTD.	1541.00	77.05	1618.05	L1	Nil
543	BoQ1	Diameter 13 mm x Length 42 cm	Item543	Each	0.00	NEBULA SURGICAL PVT. LTD.	1541.00	77.05	1618.05	L1	Nil
544	BoQ1	Diameter 13 mm x Length 44 cm	Item544	Each	0.00	NEBULA SURGICAL PVT. LTD.	1541.00	77.05	1618.05	L1	Nil
545	BoQ1	Diameter 13 mm x Length 46 cm	Item545	Each	0.00	NEBULA SURGICAL PVT. LTD.	1541.00	77.05	1618.05	L1	Nil
548	BoQ1	5.0mm Locking Bolt 20 mm	Item548	Each	0.00	NEBULA SURGICAL PVT. LTD.	92.00	4.60	96.60	L1	Nil
549	BoQ1	5.0mm Locking Bolt 22 mm	Item549	Each	0.00	NEBULA SURGICAL PVT. LTD.	92.00	4.60	96.60	L1	Nil
556	BoQ1	5.0mm Locking Bolt 36 mm	Item556	Each	0.00	NEBULA SURGICAL PVT. LTD.	92.00	4.60	96.60	L1	Nil
557	BoQ1	5.0mm Locking Bolt 38 mm	Item557	Each	0.00	NEBULA SURGICAL PVT. LTD.	92.00	4.60	96.60	L1	Nil
558	BoQ1	5.0mm Locking Bolt 40 mm	Item558	Each	0.00	NEBULA SURGICAL PVT. LTD.	92.00	4.60	96.60	L1	Nil
559	BoQ1	5.0mm Locking Bolt 42 mm	Item559	Each	0.00	NEBULA SURGICAL PVT. LTD.	92.00	4.60	96.60	L1	Nil
560	BoQ1	5.0mm Locking Bolt 44 mm	Item560	Each	0.00	NEBULA SURGICAL PVT. LTD.	92.00	4.60	96.60	L1	Nil
561	BoQ1	5.0mm Locking Bolt 46 mm	Item561	Each	0.00	NEBULA SURGICAL PVT. LTD.	92.00	4.60	96.60	L1	Nil
562	BoQ1	5.0mm Locking Bolt 48 mm	Item562	Each	0.00	NEBULA SURGICAL PVT. LTD.	92.00	4.60	96.60	L1	Nil
563	BoQ1	5.0mm Locking Bolt 50 mm	Item563	Each	0.00	NEBULA SURGICAL PVT. LTD.	92.00	4.60	96.60	L1	Nil
564	BoQ1	5.0mm Locking Bolt 52 mm	Item564	Each	0.00	NEBULA SURGICAL PVT. LTD.	92.00	4.60	96.60	L1	Nil
565	BoQ1	5.0mm Locking Bolt 54 mm	Item565	Each	0.00	NEBULA SURGICAL PVT. LTD.	92.00	4.60	96.60	L1	Nil
566	BoQ1	5.0mm Locking Bolt 56 mm	Item566	Each	0.00	NEBULA SURGICAL PVT. LTD.	92.00	4.60	96.60	L1	Nil
567	BoQ1	5.0mm Locking Bolt 58 mm	Item567	Each	0.00	NEBULA SURGICAL PVT. LTD.	92.00	4.60	96.60	L1	Nil



<b>NEIGRIHMS::SHILLONG -793018</b> NEIGRIHMS HOSPITAL REVOLVING FUND S/B Account No: 30270100005127 Bank of Baroda, Mawdlangdiang, Shillong IFSC Code No: BARBOMAWDIA <b>BANK COPY</b>		
Challan No: .....	Dated: .....	
Name: .....	I.P. No: .....	
C.R. No: .....	Department: .....	
Consultant: .....		
Description of Items	Unit	Amount (Rs)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
Amount (in figures):		
Amount (in words):		
Bank Name & Branch in which Amount deposited:		
Bank Transaction ID No: (For Bank use only)		
Bank Seal and Signature of Authorized Bank Officer receiving the Amount	(Signature and Acceptance of the Patient Party)	

<b>NEIGRIHMS::SHILLONG -793018</b> NEIGRIHMS HOSPITAL REVOLVING FUND S/B Account No: 30270100005127 Bank of Baroda, Mawdlangdiang, Shillong IFSC Code No: BARBOMAWDIA <b>REGISTERED PATIENT COPY</b>		
Challan No: .....	Dated: .....	
Name: .....	I.P. No: .....	
C.R. No: .....	Department: .....	
Consultant: .....		
Description of Items	Unit	Amount (Rs)
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12		
Amount (in figures):		
Amount (in words):		
Bank Name & Branch in which Amount deposited:		
Bank Transaction ID No: (For Bank use only)		
Bank Seal and Signature of Authorized Bank Officer receiving the Amount	(Signature and Acceptance of the Patient Party)	

<b>NEIGRIHMS::SHILLONG -793018</b> NEIGRIHMS HOSPITAL REVOLVING FUND S/B Account No: 30270100005127 Bank of Baroda, Mawdlangdiang, Shillong IFSC Code No: BARBOMAWDIA <b>INCHARGE PHARMACY COPY</b>		
Challan No: .....	Dated: .....	
Name: .....	I.P. No: .....	
C.R. No: .....	Department: .....	
Consultant: .....		
Description of Items	Unit	Amount (Rs)
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9		
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12		
Amount (in figures):		
Amount (in words):		
Bank Name & Branch in which Amount deposited:		
Bank Transaction ID No: (For Bank use only)		
Bank Seal and Signature of Authorized Bank Officer receiving the Amount	(Signature and Acceptance of the Patient Party)	

<b>NEIGRIHMS::SHILLONG -793018</b> NEIGRIHMS HOSPITAL REVOLVING FUND S/B Account No: 30270100005127 Bank of Baroda, Mawdlangdiang, Shillong IFSC Code No: BARBOMAWDIA <b>ACCOUNTS COPY</b>		
Challan No: .....	Dated: .....	
Name: .....	I.P. No: .....	
C.R. No: .....	Department: .....	
Consultant: .....		
Description of Items	Unit	Amount (Rs)
1		
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Amount (in figures):		
Amount (in words):		
Bank Name & Branch in which Amount deposited:		
Bank Transaction ID No: (For Bank use only)		
Bank Seal and Signature of Authorized Bank Officer receiving the Amount	(Signature and Acceptance of the Patient Party)	

<b>NEIGRIHMS::SHILLONG -793018</b> NEIGRIHMS HOSPITAL REVOLVING FUND S/B Account No: 30270100005127 Bank of Baroda, Mawdlangdiang, Shillong IFSC Code No: BARBOMAWDIA <b>USER DEPARTMENT COPY</b>		
Challan No: .....	Dated: .....	
Name: .....	I.P. No: .....	
C.R. No: .....	Department: .....	
Consultant: .....		
Description of Items	Unit	Amount (Rs)
1		
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Amount (in figures):		
Amount (in words):		
Bank Name & Branch in which Amount deposited:		
Bank Transaction ID No: (For Bank use only)		
Bank Seal and Signature of Authorized Bank Officer receiving the Amount	(Signature and Acceptance of the Patient Party)	