

REQUEST FOR PROPOSAL

To develop a Mobile and Web based desktop Decision Support System for Community Health Officers of Mayurbhanj District

RFP Reference No: 9573 dt: 16/09/2021



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NOTICE INVITING PROPOSAL

RFP No. 9573 Dated: 16/09/2021

DETAILED PROPOSALS ARE INVITED FROM ELIGIBLE AGENCIES FOR SELECTION OF THE MOST SUITABLE AGENCY TO DEVELOP A MOBILE AND WEB BASED DESKTOP DECISION SUPPORT SYSTEM FOR COMMUNITY HEALTH OFFICERS OF MAYURBHANJ DISTRICT.

1	Period of Availability of RFP Document	From 17 th September 2021 to 01 st October 2021 (Downloadable from website: www.mayurbhanj.nic.in)
2	Last date for submission of Proposal	Date: 01st October 2021, Time: 11.00 AM Address: O/o – CDM & PHO, Mayurbhanj-757001 <i>NB : Proposals should be submitted through Speed post / Registered post / Courier.</i>
3	Date, time and place of opening of Proposal and presentation	a) Technical Proposal (Part A) Opening :01st October 2021 at 12.00 Noon in the NHM Conference Hall, DHH, Baripada. b) Financial Proposal (Part B) Opening :01st October 2021 at 12.30 PM in the NHM Conference Hall, DHH, Baripada. <i>(Bidders / authorized representative may remain present at the time of opening of proposal)</i>

SECTION 1 - INSTRUCTIONS TO BIDDERS**1.1 Scope of Proposal**

- (a) Interested bidders fulfilling the eligibility criteria may submit their bid to the CDM & PHO, Mayurbhanj.
- (b) Detailed description of the objectives, scope of services, deliverables and other requirements relating to “to develop a Mobile and Web based desktop Decision Support System for Community Health Officers of Mayurbhanj District” are specified in this RFP. The manner in which the Proposal is required to be submitted, evaluated and accepted is explained in this RFP;
- (c) The bidder shall submit its Proposal in the form and manner specified in this RFP. **The Financial Proposal (Part B) shall be submitted in the format specified in F1, F2.**

1.2 Eligibility Criteria

The bidder should fulfil the following Eligibility Criteria:

- | | |
|------|---|
| I. | Should be registered in India as a Company, Firm or Proprietorship. |
| II. | Consortium is not allowed |
| III. | Should have minimum 1 years of working experience in the field of development of software in Govt. sector on the stipulated date of bid submission and also 1 or 2 samples of similar assignments handled in the past. |
| IV. | The Bidder must not have been blacklisted either by the tender inviting authority or by any State Govt. or Govt. of India organization. The agency shall submit undertaking regarding the same on Non Judicial Stamp paper of Rs. 20/- as per Format T6. |
| V. | Must have ISO certification |
| VI. | Must have a PAN |
| VII. | Must have GST registration number |

1.3 Proposal Submission

Interested eligible bidders may submit their bid(s) to the CDM & PHO, Mayurbhanj.

The proposal shall be submitted in two parts:

(1) Part A -Bid Security & Technical Proposal as per format set out in RFP.

(2) Part B - Financial Proposal as per the format set out in RFP.

- (i) The Proposal shall be typed or written legibly in indelible ink and shall be signed the authorized representative of the bidder.
- (ii) Power of Attorney for signing of bid: The bidder should submit a Power of Attorney as per the **Form T 4**, authorizing the signatory of the bid to commit the bidder.
- (iii) Any interlineations, erasures or overwriting shall be valid only if the person or persons signing the Proposal have put his/their initial prior to submission of the same.

1.4 Bid Document Cost

The bidders shall have to furnish a bid document cost of **Rs.1,500/-**(non-refundable) in the shape of a **Banker's cheques / Demand Draft** from any Nationalized / Schedule Bank payable at Baripada and in favour of **ZSS NoN NRHM Funds A/c**.

In the absence of the bid document cost, the technical proposal of the bidder shall be rejected.

The bid document cost should be put in the Technical Proposal (Cover A) envelop.

1.5 Earnest Money Deposit (EMD)

The bidder along with the technical proposal shall have to furnish Earnest Money Deposit (EMD) amounting to **Rs. 30,000/-**(refundable) in the shape of Banker's cheques / Demand Draft from any Nationalized / Schedule Bank in favour of the **ZSS NoN NRHM Funds A/c, Payable at Baripada**.

In the absence of the EMD, technical proposal of the bidder shall be rejected. However, as per the Finance Department, Govt. of Odisha office memorandum no. 21926 dated 12.8.2015, the **local MSEs** registered with respective DICs, Khadi, Village, Cottage & Handicraft Industries, OSIC and NSIC are exempted from submission of EMD while participating in tenders of Govt. Departments and Agencies under its control. It is further clarified that the above exemption is applicable to **local MSEs registered in Odisha only**. This exemption to the local MSEs shall be applicable if the **kind of service** as required under this tender enquiry is clearly specified against the details of the service to be provided in their DIC / NSIC registration certificate (to be furnished in the technical bid).

The EMD shall be returned to unsuccessful bidders within a period of 4 weeks from the date of announcement of the successful bidder.

The EMD shall be forfeited if the bidder withdraws its proposal during the interval between the proposal due date and expiration of the proposal validity period or on in case of successful bidder, if does not execute the agreement.

1.6 Packing, Sealing and Marking of Proposal

(a) The Technical Proposal (Cover A) and Financial Proposal (Cover B) must be inserted in separate sealed envelopes, along with applicant's name and address in the left hand corner of the envelope and super scribed in the following manner.

- **Cover-A-** Technical Proposal for **"Develop a Mobile and Web based desktop Decision Support System for Community Health Officers of Mayurbhanj District"**.
- **Cover-B -** Financial Proposal for **"Develop a Mobile and Web based desktop Decision Support System for Community Health Officer of Mayurbhanj District"**.

(b) The two envelopes, i.e. envelope for Part-A, Part-B must be packed in a separate sealed outer cover and clearly **super scribed** with the following:

- Proposal for “Develop a Mobile and Web based desktop Decision Support System for Community Health Officer of Mayurbhanj District”.
 - The bidder’s Name & address shall be mentioned in the left hand corner of the outer envelope.
- (c) The inner and outer envelopes shall be **addressed to the Chief District Medical & Public Health Officer, Mayurbhanj.**

If the outer envelope is not sealed and marked as mentioned above, then the O/o the CDMO & PHO, Mayurbhanj will assume no responsibility for the tender’s misplacement or premature opening. Telex, cable or facsimile tenders will be rejected.

(d) Content of the Proposal

I. Cover A (Technical Proposal)

1. EMD of Rs. 30,000/- (Rupees Thirty Thousand) in the shape of a Demand Draft in favour of **ZSS NoN NRHM Funds A/c, Mayurbhanj.**
2. Bid document cost of Rs.1,500/- (Rupees One Thousand Five hundred) in the shape of a Demand Draft in favor of **ZSS NoN NRHM Funds A/c, Mayurbhanj.**
3. Form T1
4. Form T2
5. Photocopy of the Registration Certificate of the Agency
6. Photocopy of PAN
7. Photocopy of GST.
8. Photocopy of ISO certification
9. Form T3 (Turnover Certificate from the Chartered Accountant)
10. Photocopy of the audited Profit & Loss Statement in the last three financial years in support of the turnover certificate [2017-18, 2018-19 & 2019-20]
11. Relevant Experience Details in development of software at Govt. sector.
12. Photocopies of work orders / contracts executed in support of the information.
13. Form T4 - Power of Attorney authorizing the signatory for signing the proposal on behalf of the proposer/Bidder
14. Form T5 - Affidavit certifying that the Entity/Promoter(s)/Directors/Partner(s) of Entity are not blacklisted.
15. Form T6 - Letter of Declaration (Anti Collusion Certificate) mentioning that the bidder will not collude with the other bidders.
16. Any other details, the bidder like to include in the proposal.

II. Cover B (Financial Proposal)

1. The bidder must submit the Financial Proposal using Form specified in Form F1, F2 with proper signature and seal of the bidder.
2. In case of any discrepancy between figures and words in the financial proposal, the one described in words shall be taken into consideration.
3. The same person signing the RFP shall sign the financial part also.

1.7 Validity of Proposals

The Proposal shall remain valid for 180 days after the date of bid opening. Any Proposal, which is valid for a shorter period, shall be rejected as non-responsive.

1.8 Cost of Proposal

The bidder shall be responsible for all of the costs associated with the preparation of their Proposals and their participation in the Selection Process. The concerned district authority / institution will neither be responsible nor in any way liable for such costs, regardless of the conduct or outcome of the Selection Process.

1.9 Acknowledgement by the bidder

- (a) It shall be deemed that by submitting the Proposal, the bidder has: -
- (i) made a complete and careful examination of the RFP;
 - (ii) Received all relevant information requested from the District authority.
 - (iii) acknowledged and accepted the risk of inadequacy, error or mistake in the information provided in the RFP or furnished by or on behalf of the District authority/ institution relating to any of the matters stated in the RFP Document;
 - (iv) satisfied itself about all matters, things and information, necessary and required for submitting an informed Proposal and performance of all of its obligations there under;
 - (v) acknowledged that it does not have a Conflict of Interest; and
 - (vi) Agreed to be bound by the undertaking provided by it under and in terms hereof.
- (b) The district authority shall not be liable for any omission, mistake or error on the part of the bidder in respect of any of the above or on account of any matter or thing arising out of or concerning or relating to RFP or the Selection Process, including any error or mistake therein or in any information or data given by the district authority.

1.10 Language

The Proposal with all accompanying documents (the "Documents") and all communications in relation to or concerning the Selection Process shall be in English language and strictly as per the forms provided in this RFP. No supporting document or printed literature shall be submitted with the Proposal unless specifically asked for and in case any of these Documents is in another language, it must be accompanied by an accurate translation of the relevant passages in English, in which case, for all purposes of interpretation of the Proposal, the translation in English shall prevail.

1.11 Proposal Due Date

RFP filled in all respect must reach O/o the CDM& PHO, Mayurbhanj at the address, time and date specified in the Section-1: Schedule of Proposal Submission, through Speed Post/ Regd. Post / Courier. If the specified date for the submission of RFPs is declared as a holiday, the RFPs will be received up to the stipulated time on the next working day.

1.12 RFP Opening

- (a) The district authority will open all Proposals, in the presence of bidders or their authorized representatives who choose to attend, at the location, date and time mentioned in the Section 1: Schedule of Proposal Submission
- (b) The bidder/their authorized representatives who will be present shall sign a register evidencing their attendance.
- (c) In the event of the specified RFP opening date being declared a holiday, the RFPs shall be opened at the stipulated time and location on the next working day.



SECTION 2 - TERMS OF REFERENCE

Background:

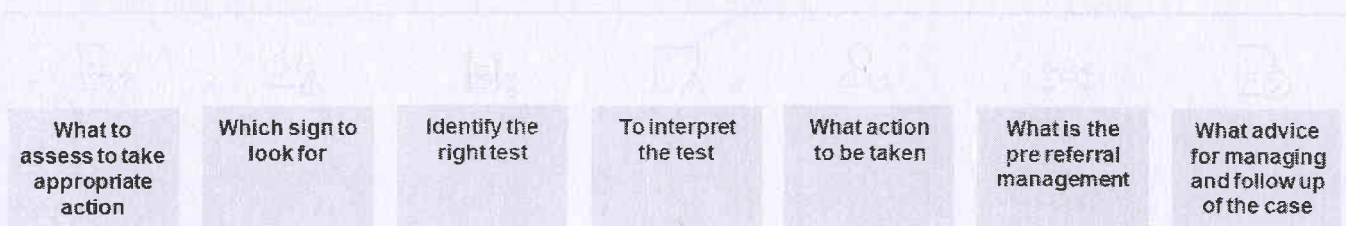
Govt of India launched "Ayushman Bharat" scheme to reach out last beneficiary of community through Comprehensive Primary Health Care. As a part of strategies, Health and Wellness Centres were equipped with new cadre of "Community Health Officers", who are serving as connecting bridge between community and health care facilities for secondary and tertiary level care. CHOs are "Entry gate" screening machinery for early identification of high-risk symptoms and timely referral to higher facility with pre referral treatment.

Majority of newly recruited CHOs are new in their role and carry minimal experience of public health with limited capacity in complex decision making, identification of High-risk infants those required urgent referral and pre referral management, that envision the need of Decision Support System that drives CHOs to probable severity classification of children presents with common symptoms. Govt of Odisha in collaboration with NIPI-CURE has planned to develop Decision Support System – an android-based tool that helps to classify severity of presenting symptoms of children at HWC level.

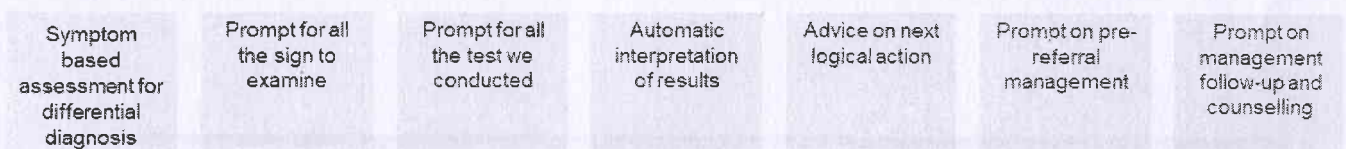
Decision Support System – A potential Solution and features:

Norway India Partnership Initiative (NIPI) is supporting the National Health Mission (NHM), Odisha to develop a "**client centric decision support system**" that will guide CHOs through the complex decision making process during patient management. The solution will be a user friendly, mobile/ tablet based application that will support each CHO at a HWC in effectively practicing evidence based care and managing clients by supporting their clinical decision making skills, especially the mothers and newborns attending the HWCs or outreach sessions for scheduled services.

The application will allow CHOs to capture patient vitals and other relevant data in real time in the system. The integrated clinical rules in form of algorithms within the application will generate relevant alerts and notifications to guide CHOs for appropriate and prompt clinical actions while managing routine as well as complicated cases.



Decision Support System: Essential Criteria



✓

Decision Support System Application module and features

- CHO curriculum is the universe for contents
- System will drive users to severity classification of presenting symptoms and suggest pre referral treatment with dose calculation
- Logics are applied in a way to identify more severe /life threatening condition on priority
- Minimum inputs for optimum outcome
- Logics for Severity classification are made sensitive enough for "NOT TO MISS ANY REFERRAL OPPORTUNITY"
- Child health symptoms flow are based on IMNCI guidelines and contextualized as per state inputs and need
- Maternal health symptoms flow are based on maternal health guideline and contextualized as per state inputs

Major tasks to be accomplished

A. Development of mobile application for CHO

The decision support system for client management chiefly consists of the following:

1. Routine Case Management

The proposed solution will guide CHOs in effective management of routine cases attending a HWC routinely. The solution, configured with pre-set algorithms which take into account the clinical data captured on the smart device will generate real time suggestions to guide clinical management, as per applicable protocols, of cases in form of alerts. Availability and access of this decision support system in real time will aid the CHO in identifying and managing cases with improved efficiency and lead to better outcomes.

Once a client or patient comes to a HWC with a set of clinical symptoms, first the CHO will enter the pertinent information (data) into the solution. Based on initial parameters entered into the system, the application will guide CHO to further conduct additional relevant assessments, if required, in order to conclusively suggest the most appropriate course of action for that particular client or patient. Once all data related to various assessments suggested by the proposed solution are entered into the system, the application will automatically classify a particular case into **four broad categories** i.e. 1) No action required 2) further investigate and treat 3) refer to higher facility and 4) counsel and follow-up. Based on action suggested by the application (No action, Investigate, Refer, Follow-up), the CHO will follow the further course of patient management pathway (figure 3). Throughout the patient management pathway, the application will provide necessary reminders and ensure that care is being provided in accordance to applicable clinical protocols and national guidelines.

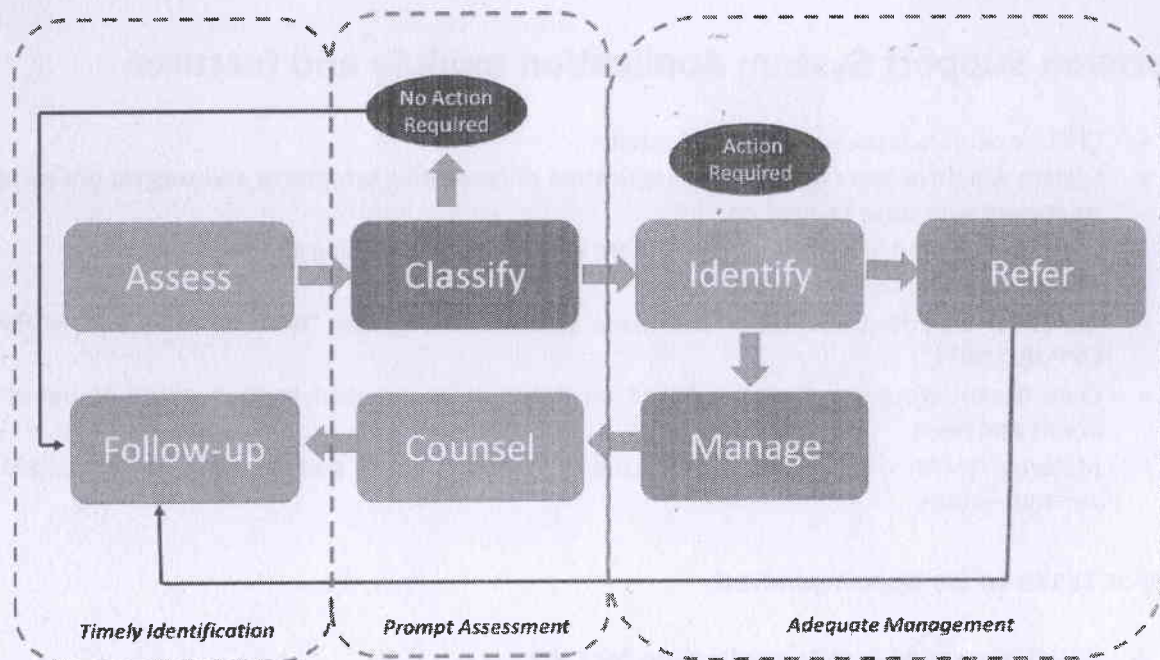


Fig3- Decision Support System: Suggested Patient Management Pathway

2. Identification & Management of High Risk Cases

The proposed solution will enable early identification, management and timely referral of high risk cases, in particular the mothers and infants, to higher health facilities. Based on inputs (patient vitals entered into the application) the application through inbuilt clinical rules in form of algorithms will generate relevant alerts (at risk, warning signs) and notifications (when to refer, how and where to refer) to guide CHOs for prompt actions while managing for complications.

3. Mentorship Support to CHOs

Virtual Mentorship will be a key feature of the proposed application by which **24x7 specialist-supports** from a tertiary care facility can be provided to CHO posted at peripheral HWCs, when required, by interaction with a specialist through voice call and sharing of patient information. This will enable continuity of care in case of complications and thereby avoid delay in initiating correct treatment at HWCs. This feature will provide an opportunity for appropriate utilization of human resources, and appropriate initial management of cases at remote facility.

4. Establish Referral linkages

The proposed intervention will help in improving existing referral linkages between HWCs and tertiary health facilities of the catchment geography. The application will allow early identification as well as prompt referral of high risk cases to higher facilities thus minimizing

the probability of second delay (delay in transport), a most prominent cause of deaths in resource constrained settings.

As soon as vitals of a high risk cases entered by CHO, The system will automatically send necessary alert and notifications to ambulance as well as linked tertiary facility along with the vitals of the patients. This will help higher facilities to get ready well in advance for receiving the high risk case.

B. Integration with ANMOL/ RCH portal –

1. Application would be integrated with central RCH portal. All the masters including Health Provider and Location master would be downloaded from RCH portal. Replica of RCH portal for State would be created at central portal. Beneficiary data would be in in-sync with RCH portal. Development agency will ensure followings points to ensure RCH integration with RCH portal

2.

- Development Agency will ensure that all the masters are in-sync with RCH portal in real time.
- RCH related data would be populating in app from State portal. No data loss between DSS app to State RCH Server.
- All the communication between RCH to State server would be secure and encrypted. Development agency will integrate any changes made by RCH portal Application should be integrate with RCH portal so that Child and Maternal health data can be populate in both application.

C. Dashboard and Reports –

A centralized monitoring mechanism would be required to track and monitor the performance and the spread of DSS app implementation across districts within a state. Following are the key features of Dashboard

- To track KPIs, metrics, and other key data points relevant to a department or specific process.
- Dashboards may be developed with data visualizations, dashboards simplify complex data sets to provide users with at a glance awareness of current performance.
- Dashboard view based on the type of user, Role based view of dashboards for MOs, District level, State level and Central administrators.

PROGRAM DASHBOARD

To monitor the key performance indicators related to following aspects

- Beneficiaries' registration
- Health provider registration
- Tracking of Beneficiaries
- Family planning
- Maternal health
- Child Health
- Immunization
- Referral cases

SUPPORTIVE DASHBOARD

Dashboard is graphical visualization of beneficiary's records and help to analyse the real time data on various indicators. Dashboard screen may have following sections

- Key Indicator Navigation
- Data Filters
- Data Entry
- Monthly Trend Graph
- Parameters of Indicator

INTERACTIVE DASHBOARD

- Interactive dashboard data management tool that tracks, analyses, monitors, and visually displays key metrics while allowing users to interact with data, enabling them to make well informed, data-driven, and healthy programmatic decisions.

Below are the features of interactive dashboard as follows:

- Real time data feeds
- Easy visualization with drag and drop editing
- Custom alert options
- User wise dynamic data views
- Display filter values
- Multiple sharing options
- Print compatible
- Responsive dashboard

Admin Dashboard

Admin can create user for dashboard and create users for mobile app. Admin can also manage location and provider master.

Below are the features of Admin Dashboard

- Create user for web and mobile app
- Manage location masters
- Manage user access

Government wishes to engage with an experienced agency to deliver the system as specified:

- Fully functional (Tested, debugged) application based on agreed upon System Requirement Specifications.
- Full documentation including database schemas, flowcharts etc.
- Transfer of application source code
- Well indexed user manual
- Post-delivery software maintenance and user support
- Hand holding and training support to the team after the pilot phase

Duration of the Services and Expertise Required:

The total period for developing this app should be maximum of 3 months.

- An agency should be having of experiencing of developing cross platform supported mobile apps.
- The company or must be having at-least 3 years' experience in the same sector.
- They must have experience working with any of State or Central Govt. departments in the country.
- An agency must have an effective and impressive skill of communication to explain technology in layman language.
- They must be knowing how to acquire legal license from the respective department.
- A company should be time bound and dedicated enough to complete the assignment with committed timelines.
- Must have developed citizen centric apps.
- Experience to integrate with ANMOL or similar application should be added advantages.

SECTION 3 - TERMS & CONDITIONS

3.1 Award of Contract

On evaluation of technical and financial parts of RFP and decision thereon, the selected bidder shall have to execute a contract with the District Authority / Institution within 15 days from the date of acceptance of their bid is communicated to them. The terms and condition, terms of reference of this RFP along with documents and information provided by the selected bidder shall be deemed to be an integral part of the contract.

3.2 Allotment of Districts / Institutions:

If any L1 bidder of the institution decline the work order in the circumstances mentioned above, in such case the district authority has to negotiate with L2 (L3, L4.. and so on in the that order) bidder to agree to the L1 price and to finalize the bidder & issue work order.

3.3 Payment & Price Validity

- 20% of the total payment could be made in advance upon signing the agreement.
- 30% of the total payment could be made after first version of app and review
- 30% of the rest of payment would be made after final application
- 20% rest of payment would be made after the report and invoice.

SECTION 4 - CRITERIA FOR EVALUATION

4.1 Evaluation of Technical Proposals

4.2 Evaluation of proposals shall be made at the district level by the CDM & PHO, Mayurbhanj.

In the first stage, the Technical Proposal will be evaluated on the basis of bidder's fulfillment of **eligibility criteria**. Only those bidders whose Technical Proposals becomes **responsive** based on the eligibility criteria, shall qualify for further detail technical evaluation for presentation and awards of marks based on the following Criteria :

Sl.	Evaluation Parameters	Total Mark	Criteria for award of Mark
1	Working Experience		
1.1	Experience in development of Software. (As per Registration Certificate).	10	<ul style="list-style-type: none"> ● ≥ 3 Years ≤ 5 years : 5 Marks ● >5 Years : 10 Marks ● Or otherwise 0
1.2	Experience of similar assignments in Govt. Sector. (evaluation to be made as per work order or Completion certificate from the user)	20	<ul style="list-style-type: none"> ● ≥ 1 Nos. ≤ 3 Nos : 10 Marks ● > 3 Nos : 20 Marks ● Or otherwise 0
2	Total Average Annual turnover (Rs.) (In last 3 financial years 2017-18, 2018-19 & 2019-20)	15	<ul style="list-style-type: none"> ● ≥ 1 Crores. up to 3 Crores. : 5 marks ● >3 Crores up to 5 Crores : 10marks ● >5 Crores : 15 marks
3	Work Plan Presentation	15	<ul style="list-style-type: none"> ● Presentation of the work plan in consonance with the tender document and guidelines, not more than 15-20 min. <p>Total Marks : 15</p>
	Total	60	

Financial proposal shall be opened after the technical evaluation is completed and **only those bidders** who score **at least 36 marks or more** in technical evaluation shall qualify for **financial bid opening**. In the financial bid, the bidder with the **lowest price** shall be awarded the contract.

4.2 Evaluation of Financial Proposal

The **total price (exclusive of GST)** as per price format F2 shall be considered for price evaluation. However, in case two bidders quote the same lowest price, then the agency with the **highest mark** in the technical bid shall be awarded the contract. However, if their technical mark also becomes equal, then in that case, the bidder having the higher annual average turnover shall be awarded the contract.

RFP FORMATS

To develop a Mobile and Web based desktop Decision Support system for
Community Health Officer of Mayurbhanj District

TECHNICAL PROPOSAL



Check List (Technical Proposal)

Please check whether following have been enclosed in the respective cover namely, Technical Proposal: *(please arrange the documents serially in the following order & do the page numbering of the entire bid document and mention the page no. in the column "page No" against the particulars in the check list as mentioned below for ease of scrutiny)*

Sl.	Particulars	Whether Submitted (Yes / No)	Page No.
1	EMD (DD of Rs. 30,000/-)		
2	Bid document Cost (DD of Rs. 1,500/-)		
3	Form T1		
4	Form T2		
5	Copy of the company/Agency Registration certificate		
6	Copy of the GST registration certificate		
7	Copy of PAN		
8	Photocopy of ISO certification		
9	Form T3		
10	Photocopies of the audited P/L account of each year highlighting the turnover in support of that		
11	Copies of Work Order/Contract certificates from the clients in support of development of software executed in support of the information.		
12	Form T4		
13	Form T5		
14	Form T6		
15	Any other relevant documents		

FORM - T 1*(to be furnished in the technical proposal)***TECHNICAL TENDER SUBMISSION FORM***(On the letterhead of the agency)*

To

The Chief District Medical &
Public Health Officer, Mayurbhanj.

Re. : RFP Reference no. _____ dated _____

*(pl. mention the RFP reference no. against the concerned district / institution from the table at Section 1-
Schedule of Proposal submission)*

Dear Sir / Madam,

We, the undersigned, offer to provide/develop a Mobile and Web based desktop Decision Support system for Community Health Officer of Mayurbhanj District. We are hereby submitting our Proposal, which includes this Technical Proposal and a Commercial Proposal sealed under a separate envelope.

We hereby declare our Confirmation of acceptance of the Conditions of Contract mentioned in the RFP document under reference cited above.

We hereby declare that all the information and statements made in this Proposal are true and accept that any of our misrepresentations contained in it may lead to our disqualification.

Our proposal shall be binding upon us for a period of 180 days from the date of bid opening, subject to the modifications resulting from Contract negotiations you may subsequently carry out with us to accept our bid. If we are assigned the work during the period of validity of the Proposal, we undertake to carry out the same as per the terms and conditions of this tender document.

I hereby declare that my company has, not been debarred / black listed by any Government/ Semi Government organizations. I further certify that I am the competent authority in my company authorized to make this declaration.

We understand you are not bound to accept any Proposal you receive.

Yours sincerely,

Authorized Signatory *[In full and initials]*: _____

Name and Title of Signatory: _____

Name of Agency: _____

Address: _____

(Organization Seal)

FORM – T2*(to be furnished in the technical proposal)***PROFILE OF THE AGENCY**

Name of the Agency	
Office Address	
Status of the Agency (Whether registered under Company / Firm / Proprietorship)	
Name of the Chief Executive and authorized signatory	
Telephone Nos.: Landline	
Mobile	
Fax	
Email id (Official email id for correspondence if any)	
Date of Establishment	(furnish copy of the Registration Certificate of the Agency)
GST Registration No.	(furnish copy of the GST Registration of the Agency)
Bank Details of the Bidder: The bidders have to furnish the Bank Details as mentioned below for return of EMD /Payment for services if any (if selected)	a. Name of the Bank : b. Name of the Account & Full address of the Branch concerned c. Account no. of the bidder : d. IFS Code of the Bank :

Authorized Signatory/Signature *[In full and initials]*: _____

Name and Title of Signatory: _____

(Organization Seal)



FORM T3*(to be furnished in the technical proposal)***ANNUAL AVERAGE TURN OVER STATEMENT***(To be furnished in the letter head of the Chartered Accountant)*

The Annual Turnover of M/s _____
for the last 3 financial years are given below and certified that the statement is true and correct.

Sl.	Financial Year	Turnover in Rs.
1	2017-18	
2	2018-19	
3	2019-20	
Average Annual Turnover in Rs.		

*Provisional audited statement shall not be considered.

Date:

Signature of Chartered Accountant

Place:

(Name in Capital)

Seal

Membership No.

Note:

- 1) To be issued in the **letter head** of the Chartered Accountant with membership No.
- 2) Also attach photocopies of the audited P/L account of **each year highlighting the turnover** in support of that.

Form T4*(to be furnished in the technical proposal)***Format for Power of Attorney for Signing of Proposal***(On a Stamp Paper of relevant value)***Power of Attorney**

Know all persons by these presents, We.....(name and address of the registered office) do hereby constitute, appoint and authorize Mr/ Ms..... (name and residential address) who is presently employed with us and holding the position ofas 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 To develop a Mobile and Web based desktop Decision Support system for Community Health Officer of Mayurbhanj District including signing and submission of all documents and providing information / responses to the District / Institution Authority, representing us in all matters before District / Institution authority and generally dealing with District / Institution authority 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 _____ 2021

For _____

(Name, Designation and Address)

Accepted

(Signature)

(Name, Title and Address of the Attorney)

Date : _____

Note:

- i. To be executed by the Chief of the Agency.
- ii. 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.
- iii. In case an authorized Director of the agency signs the proposal, a certified copy of the appropriate resolution/ document conveying such authority may be enclosed in lieu of the Power of Attorney.

FORM T5*(to be furnished in the technical proposal)*

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

Affidavit

I, M/s. (the name of the agency with address of the registered office) hereby certify and confirm that we or any of our promoter(s) / Director(s) are not barred by Department of Health & FW, Govt. of Odisha/ or any other entity of GoO or blacklisted by any State Government or Central Government / Department / Organization in India from participating in Tenders as on the _____ (Date of Signing of this proposal).

We further confirm that we are aware that, our proposal 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 thisDay of, 2021

Authorized Signatory/Signature [*In full and initials*]: _____

Name and Title of Signatory: _____

(Organization Seal)

FORM T 6*(to be furnished in the technical proposal)***Anti Collusion Certificate**

We hereby certify and confirm that in the preparation and submission of our Proposal for To develop a Mobile and Web based desktop Decision Support system for Community Health Officer of Mayurbhanj District at health institutions under this RFP Reference No. _____, 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 _____, 2021

Authorized Signatory/Signature [*In full and initials*]: _____

Name and Title of Signatory: _____

(Organization Seal)

FORMATS

To develop a Mobile and Web based desktop Decision Support system for Community Health Officer of Mayurbhanj District

FINANCIAL PROPOSAL

Check List (Financial Proposal)

Please check whether the following Forms have been enclosed in the respective cover, namely **Cover B: Financial Proposal**

(Please arrange the documents serially in the following order)

1. Form F1 Yes/No

2. Form F2 Yes/No



FORM F-1

(To be submitted with Financial Proposal)


To
The Chief District Medical & PHO, Mayurbhanj.

Re. : RFP Reference no. _____ dated _____
(pl. mention the RFP reference no. against the concerned district / institution from the table at Section 1-
Schedule of Proposal submission)

**Sub: Request for Proposal for To develop a Mobile and Web based desktop Decision Support system
for Community Health Officer of Mayurbhanj District**

Sir,

1. Having carefully examined all the parts of the RFP documents and having obtained all the requisite information affecting this proposal and being aware of all conditions and difficulties likely to affect the execution of the contract, I/We hereby propose to offer the services as described in the RFP document in conformity with the conditions of contract, technical aspects and the sums indicated in this financial proposal.
2. I/We declare that we have read and understood and that we accept all clauses, conditions, and descriptions of the RFP document without any change, reservations and conditions.
3. If our proposal is accepted, we undertake to deposit the performance security deposit at the time of execution of the formal agreement
4. I/We agree to abide by this proposal/bid for a period of 180 days from the date of its opening and also undertake not to withdraw and to make any modifications unless asked for by you and that the proposal may be accepted at any time before the expiry of the validity period.
5. Unless and until the formal agreement is signed, this offer together with your written acceptance thereof shall constitute a binding contract between me/us and the District Authority.
6. We submit the Schedule of Prices as appended herewith.

Encl: Schedule of Prices (Form F2 )

Yours sincerely,

Authorized Signatory [In full and initials]: _____

Name and Title of Signatory: _____

Name of Agency: _____

Address: _____

(Organization Seal)

FORM F-2
(To be submitted with Financial Proposal)

PRICE SCHEDULE

Particulars	Amount	GST as applicable with %	Total Cost (max. upto two decimal places)
	a	b	a+b
<ul style="list-style-type: none"> • Cost of Development • Trouble-shooting, support and maintenance during implementation 			

Authorized Signatory [*In full and initials*]: _____

Name and Title of Signatory: _____

Name of Agency: _____

Address: _____

(Organization Seal)

