



**OFFICE OF THE BARIPADA MUNICIPALITY**

**BARIPADA, MAYURBHANJ- 757001**

**Tel : 06792-252703**

**Website : [www.baripadamunicipality.ine](http://www.baripadamunicipality.ine)-mail : [baripadam.hud@nic.in](mailto:baripadam.hud@nic.in)**

No. **545** /Date **03/02/26**

**DETAILED QUOTATION CALL NOTICE**

1. Name of the work : **Supply of Instruments, Medicines & Accessories for the re-initiation of ABC Programme to Baripada Municipality.**
2. Date of sale of bid document : From 10.30 AM dtd.**05.02.2026** up to 1.00 PM of **Dt.19.02.2026**
3. Last date of receipt of bid documents : Up to 1.00 P.M. of dt.**19.02.2026**.
4. Date of opening of bid documents : At 4.00 PM of dt.**20.02.2026**
5. Cost of bid document : Rs.3000.00  
(To be paid in shape of DD in favour of the Executive Officer, Baripada Municipality to be drawn at Baripada)
6. EMD to be deposited : Rs.10, 000.00  
(To be deposited in shape of Fixed Deposit Receipt duly pledged in favour of the Executive Officer, Baripada Municipality)

**Issued against DD No. -----dtd. -----of -----**

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Signature of the bidder

  
Executive Officer  
Baripada Municipality

**DETAILS OF INFORMATION / DOCUMENTS TO BE SUBMITTED**

|     |  |                                      |
|-----|--|--------------------------------------|
| 1.  | Name of bidding agency   |                                      |
| 2.  | Details of cost of bid documents (DD No / date / amount / drawing Bank etc.)   |                                      |
| 3.  | Details of Earnest Money Deposit (FD No / date / amount / drawing Bank etc.)   |                                      |
| 4.  | Name of Proprietor /Partner/ Director  |                                      |
| 5.  | Full Address of Registered Office  |                                      |
|     | (i) Telephone No/Mobile No   |                                      |
|     | (ii) E-Mail Address  |                                      |
| 6.  | Full address of Operating / Branch Office if any   |                                      |
|     | (i) Telephone No / Mobile No   |                                      |
|     | (ii) E-Mail Address  |                                      |
| 7.  | Name & telephone Number / Mobile No of Authorized officer / person to liaise with  |                                      |
| 8.  | License No of the Agency with name of the Authority  |                                      |
| 9.  | PAN No<br>(Attach attested copy)   |                                      |
| 10. | GSTIN / GST registration certificate<br>(Attach attested copy)   |                                      |
| 11. | Give details of the major similar contracts handled by the bidding Agency during the last three years in the following format (Attach attested copies work order/contract agreement etc.)<br>(If the space provided is insufficient, a separate sheet may be attached) |                                      |
|     | <b>Sl. No</b>  | <b>Name of client /address etc</b>   |
|     |  | <b>Amount of contract (Rs. Lacs)</b> |
|     |  | <b>Duration of contract</b>          |
|     |  | <b>From</b>                          |
|     |  | <b>To</b>                            |
|     | 1  |                                      |
|     | 2  |                                      |

Signature of the bidder

  
 Executive Officer  
 Baripada Municipality

|     |  |  |  |  |  |
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|     | 7  |  |  |  |  |
| 12. | Additional information, if any<br>(Attach separate sheet if space<br>provided is insufficient) |  |  |  |  |

Date:  
Place:

Signature of authorized person  
Name:  
Seal:

*Signature of the bidder*

*Executive Officer*  
*Baripada Municipality*

## DECLARATION

1. I, \_\_\_\_\_ Son / Daughter / spouse of Shri / Smt \_\_\_\_\_ Proprietor/ Director/ authorized signatory of the Firm/agency, mentioned above, am competent to sign this declaration and execute this quotation document;
2. I have carefully read and understood all the terms and conditions of the quotation call notice and undertake to abide by them;
3. I/We am/are technically as well as financially sound enough to deliver the services to Baripada Municipality within the prescribed period.
4. I/We am/are well aware of the financial condition of Baripada Municipality and will have no objection for delay in payment.
5. I/We understand that in case of incomplete services rendered by me/us, extraneous conditions imposed by me/us, non-submission of required documents with bid documents, then my/our offer is liable for rejection.
6. In case of disobedience of instructions of the authorities, violation of any of the condition(s) stipulated in work order /Agreement, then my/our offer/agreement will be rejected/cancelled or rescinded and under such situation action as deemed fit will be taken against me/us with forfeiture of the E.M.D.
7. I/We undertake that I/We shall not claim any escalation of cost on account of increase in cost of materials, taxes, or on any account in connection with the supply till completion of the work.
8. I/We will have no objection in case of curtailment / enhancement of any or most of the items mentioned in the schedule of works and I/We will not be entitled for any financial compensation for such curtailment. In case, any other items not covered in the schedule of quantities, which is/are found essential by the Municipal authorities for supply as the case may be, then I/We undertake to supply the same at mutually settled rates without any subsidiary claims.
9. The information / documents furnished along with the above application are true and authentic to the best of my knowledge and belief. I / we, am / are well aware of the fact that furnishing of any false information / fabricated document would lead to rejection of my offer at any stage besides liabilities towards prosecution under appropriate laws.

Date:

Signature of authorized person

Place:

Full Name:

Seal:

*Signature of the bidder*

  
Executive Officer  
Baripada Municipality

**GENERAL INSTRUCTIONS FOR BIDDERS**

1. The sale of the bid document shall start from 10.30 AM of dt.**05.02.2026** and close on dt.**19.02.2026** at 1.00 PM during the office hour. Bids shall be received through Registered/speed post or can be delivered in the designated tender box during office hours up to 1.00 P.M. on Dated.**19.02.2026**. The Quotation document will also be available on the website of **Mayurbhanj District Website [www.mayurbhanj.odisha.gov.in](http://www.mayurbhanj.odisha.gov.in)** for downloading from **10.30 AM of dt.05.02.2026 to 1.00 PM of dt.19.02.2026**.
2. Bids shall be opened at **4.00 PM** on dated. **20.02.2026** in the office of the Executive Officer, Baripada Municipality in presence of the bidders who wish to attend. If the office happens to be closed on the date of opening of bids as specified, the bids will be opened on the next working day at the same time and venue.
3. The bid document can be purchased from the Municipal office against a non-refundable fee of **Rs.3000.00** towards cost of bid documents in shape of Demand draft issued from any Nationalized / scheduled Bank payable at Baripada in favour of the Executive Officer, Baripada Municipality. In case of down loaded documents the bidder shall have to deposit the bid document cost as mentioned above.
4. Bids must accompany with EMD of **Rs.10, 000.00** in shape of fixed deposit receipt issued by any Nationalized / scheduled Bank duly pledged in favor of "**The Executive Officer, Baripada Municipality**".
5. The bidder has to furnish attested true copy of the following documents along with the quotation failing which the quotation will be treated as non-responsive and liable for rejection. The original certificates are to be produced before opening of the quotation before the **Executive Officer, Baripada Municipality**, for verification otherwise his/her bid shall be declared as non-responsive and thus liable for rejection.
  - Registration certificate of the Firm from the appropriate authority;
  - Copy of OGST Registration No and certificate.
  - Copy of PAN card;
  - Certified document in support of details of the major similar contracts handled by the intending bidder during the last three years if any;
  - Clearance certificate from any other relevant regulatory body if any;
  - Any other documents considered relevant if any.
  - Copy of Undertaking of Non Blacklisting by any Govt Organization on Non Judicial stamp paper worth
6. The quotation complete in all respect shall be submitted to the Executive Officer, Baripada Municipality clearly super scribing on an envelope "**Quotation for Supply of Instruments, Medicines & Accessories for the** through Registered post/Speed post or can be delivered in the designated tender box kept in the office on or before **1.00 P.M. on Dated.19.02.2026**. Submission of the quotation by fax, email or other electronic means will not be accepted. It is the responsibility of interested party alone to ensure that its quotation is delivered at the prescribed address by the stated deadline. The Municipality shall not be held responsible for any delay in delivery or loss of the quotation document(s) during transit of any type.
7. No bid documents will be sold to the intending bidder beyond the date and time of sale mentioned in the quotation call notice.

*Signature of the bidder*

  
Executive Officer  
Baripada Municipality

8. No bidder will be permitted to furnish the quotation in their own manuscript papers. No letter should accompany the quotation.
9. All corrections made by the bidder including overwriting, additions, alterations, erasures, obliteration and other discrepancies should be properly attested by the authorized signatory.
10. All quotations received will remain valid for a period of **1 year** from the date of issue of supply order.
11. Every page of the Detailed Quotation Call Notice with required attachments should be signed by the bidder failing, which the quotation will be rejected.
12. The quotation containing extraneous conditions not covered by the quotation call notice are liable for rejection.
13. **The Municipality reserves the right of authority to accept any and reject any or all tenders received without assigning any reason what so ever. The Municipality also reserves the right to choose the offer of any specific firm for any model of any brand even if its rates are higher than the corresponding rates of any other brand and firm.**
14. The EMD will be retained in the case of successful bidder and will be dealt with as per terms and condition of O.P.W.D. Code. The EMD will be refunded to the unsuccessful bidders on application.
15. No part of the contract shall be sublet without written permission of the Executive Officer or transfer is made by power of attorney authorizing others to receive payment on the bidders' behalf.
16. All items as per schedule of works of this quotation should conform to the relevant ISI / manufactures specifications.
17. The successful quotationer has to facilitate the Municipality for pre-delivery inspection before delivery of the cabins.
18. **The requirement of item shown in the schedule of works are just tentative which may increase or decrease depending on actual requirement.**
19. The bidder should quote the rates both in figures and in words in the appropriate columns for the work items in the schedule of work appended to this notice. If there is a difference between the rate quoted in figures and in words the rate quoted in words shall be taken as correct.
20. The rate quoted should be inclusive of all taxes excluding GST (Amount of GST to be mentioned). No further claim in this regard will be acceptable to Baripada Municipality. Deduction of taxes during payment will be made as per rules.
21. **In case of any dispute, the decision of the Municipality is final and binding on the firm.**
22. **All disputes shall be under the jurisdiction of the court at Baripada.**
23. All documents furnished by the bidders are subject to verification from the issuing authority. In case, any manipulation is found during the process or in a later stage, the EMD shall be forfeited besides blacklisting the bidder.
24. **This detailed Quotation Call Notice along with the clauses, terms & conditions etc. mentioned herein shall form a part of the contract and agreement.**

*Signature of the bidder*

  
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Baripada Municipality

## TERMS AND CONDITIONS

1. The successful bidder is required to execute an Agreement on a non-judicial stamp paper worth Rs.10.00 to be supplied by him, with the Municipality within 7 days from the date of receipt of the letter of acceptance.
2. The successful bidder shall have to deliver the assignments within **20 days** from the date of issue of supply order.
3. The bidder shall not be allowed to transfer, assign, pledge or subcontract its rights and liabilities to any other agency or organization by whatever name be called without the prior written consent of the Baripada Municipality.
4. The bidder will be bound by the details furnished by it to the Baripada Municipality while submitting the bid or at subsequent stage. In case, any of such documents furnished by it, is found to be false at any stage, it would be deemed to be a breach of the terms& conditions of the tender making it liable for legal action.
5. If the bidder fails to deliver the work as per order within the prescribed time period, then penalty shall be imposed @0.5% of the contract price for each week of delay or part thereof subject to a maximum of 10% of the contract price.
6. Baripada Municipality shall have the right to add, modify /delete/ any condition to/ from the agreement as and when necessary for smooth management of the work.
7. The Authority reserves the right to withdraw or relax any of the terms and condition mentioned above so as to overcome the problem encountered at a later stage.
8. This quotation is not an offer and is issued with no commitment. Baripada Municipality reserves the right to amend or withdraw any of the terms and conditions contained in the quotation document at any stage. Baripada Municipality also reserves the right to reject any or all bids should it be so necessary at any stage, without giving any notice or assigning any reason. The decision of Baripada Municipality in this regard shall be final and binding on all.

*Signature of the bidder*

  
Executive Officer  
Baripada Municipality

**SCHEDULE OF WORK**

Name of the work: Supply of Instruments, Medicines & Accessories for the re-initiation of ABC Programme to Baripada Municipality.

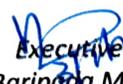
| SL NO | Name of the Medicine/Instrument/Consumables | Packing/Unit | Required Quantity in Nos | Name of the manufacturing Company | Offered Rate excluding GST | Total Amount |
|-------|---|--------------|--------------------------|-----------------------------------|----------------------------|--------------|
| 1     | Inj. Xylazine                               | 30 ml/Vial   | 40                       |                                   |                            |              |
| 2     | Inj. Ketamine                               | 5 ml/vial    | 300                      |                                   |                            |              |
| 3     | Inj. Atropine Sulphate                      | 1 ml/ampoule | 1000                     |                                   |                            |              |
| 4     | Inj. Meloxicam                              | 100 ml       | 20                       |                                   |                            |              |
| 5     | Inj. Strepto-penicillin (DICRYSTACIN-S)     | 2.5 g/Vial   | 500                      |                                   |                            |              |
| 6     | Inj. Tranexamic Acid                        | 20 ml        | 50                       |                                   |                            |              |
| 7     | Inj. Raksharab (ARV Vaccine)                | 10 ml/ vial  | 70                       |                                   |                            |              |
| 8     | Inj. Ivermectin-NEOMEC                      | 100 ml/Vial  | 10                       |                                   |                            |              |
| 9     | Distill Water                               | 10 ml        | 250                      |                                   |                            |              |
| 10    | Mupirocin Ointment                          | 5GM          | 750                      |                                   |                            |              |
| 11    | Non-absorbable Nylon suture 2-0             | 12'S         | 2                        |                                   |                            |              |
| 12    | Catgut No.1-0                               | 12 packs/Box | 30                       |                                   |                            |              |
| 13    | Vicryl No.1 synthetic absorbable suture     | 12 packs/Box | 60                       |                                   |                            |              |
| 14    | Vicryl No.2 synthetic absorbable suture     | 12 packs/Box | 60                       |                                   |                            |              |
| 15    | Surgical Spirit Bottle                      | 400 ml       | 50                       |                                   |                            |              |

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|    |   |               |     |  |  |  |
|----|---|---------------|-----|--|--|--|
| 16 | Chlorhexidine surgical Hand Scrub (4%)                    | 500ML         | 20  |  |  |  |
| 17 | Disposable Surgical Rubber Gloves – Sterile (Size - 7")   | 50 pairs/pkt  | 20  |  |  |  |
| 18 | Disposable Surgical Rubber Gloves – Sterile (Size - 6.5") | 50 pairs/pkt  | 5   |  |  |  |
| 19 | Disposable Nitrile gloves – Non-sterile (Size – M)        | 100 pairs/pkt | 10  |  |  |  |
| 20 | Disposable Nitrile gloves – Non-sterile (Size – L)        | 100 pairs/pkt | 5   |  |  |  |
| 21 | Scalp vein (butterfly needle) sets (No. 22 G)             | 50 pcs/Box    | 20  |  |  |  |
| 22 | Disposable Intravenous Infusion set (with needle)         | 25 sets/ Pack | 40  |  |  |  |
| 23 | Surgical Face Mask (with ties) Free size (3-ply)          | 100 pcs/Box   | 2   |  |  |  |
| 24 | Disposable Bouffant Cap                                   | 100 pcs/pkt   | 2   |  |  |  |
| 25 | Sterile Surgical Blade No. 10                             | 100 pcs/pkt   | 10  |  |  |  |
| 26 | Sterile Surgical Blade No. 15                             | 100 pcs/pkt   | 5   |  |  |  |
| 27 | Scalpel Handle No. 3                                      |               | 1   |  |  |  |
| 28 | Scalpel Handle No. 10                                     |               | 1   |  |  |  |
| 29 | Dressing Tray   |               | 2   |  |  |  |
| 30 | NS IV Fluid   | 500 ml        | 250 |  |  |  |
| 31 | DNS IV Fluid  | 500 ml        | 250 |  |  |  |
| 32 | RL IV Fluid   | 500 ml        | 500 |  |  |  |
| 33 | Absorbent Cotton Roll                                     | 500g/Roll     | 30  |  |  |  |

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|    |   |              |     |  |  |  |
|----|---|--------------|-----|--|--|--|
| 34 | Absorbent cotton Gauge Roll<br>(90cm width* 18mtr length) | 1 Roll       | 20  |  |  |  |
| 35 | Povidone Iodine Solution -5%                              | 500ML        | 80  |  |  |  |
| 36 | Chlorhexidine gluconate &<br>Cetrimide solution           | 1 ltr        | 30  |  |  |  |
| 37 | Dispovan Syringe 2 ml                                     | 100 pcs/Box  | 30  |  |  |  |
| 38 | Dispovan Syringe 5 ml                                     | 100 pcs/Box  | 25  |  |  |  |
| 39 | Dispovan Syringe 10 ml                                    | 50 pcs/Box   | 10  |  |  |  |
| 40 | Straight shaving Razor                                    |              | 2   |  |  |  |
| 41 | Shaving Blade   |              | 100 |  |  |  |
| 42 | Surgical Clipper for dogs /<br>Trimmer                    |              | 1   |  |  |  |
| 43 | Reusable OT surgical Drape<br>for male dog (Green)        |              | 2   |  |  |  |
| 44 | Reusable OT surgical Drape<br>for female dog (Blue)       |              | 2   |  |  |  |
| 45 | Reusable OT surgical gown for<br>doctors                  |              | 2   |  |  |  |
| 46 | OT scrub suit for attendants                              |              | 4   |  |  |  |
| 47 | Disposable shoe cover                                     | 50 pairs/pkt | 5   |  |  |  |
| 48 | Slipper No.6, 7, 8 (Use inside<br>OT)                     |              | 6   |  |  |  |
| 49 | Hot water sterilizer power<br>cord                        |              | 2   |  |  |  |
| 50 | R.O. Water Purifier                                       |              | 1   |  |  |  |
| 51 | Wall Clock  |              | 2   |  |  |  |
| 52 | Torch Light   |              | 1   |  |  |  |
| 53 | Agrospray Bottle  |              | 6   |  |  |  |

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|    |  |              |   |    |  |  |  |
|----|--|--------------|---|----|--|--|--|
| 54 | Plastic Muzzle for dog (Large, Medium & small Size ) |              | 3 | 1  |  |  |  |
| 55 | Dog catching net                                     | KG           |   | 5  |  |  |  |
| 56 | Dog Catcher pole wire WITH ROPE 9'                   |              |   | 24 |  |  |  |
| 57 | Steel Bowls for feeding dogs                         |              |   | 60 |  |  |  |
| 58 | Large size ladle ( Dhaba Chatu)                      |              |   | 1  |  |  |  |
| 59 | Electro cauterization Machine                        |              |   | 1  |  |  |  |
| 60 | UV light in OT                                       |              |   | 1  |  |  |  |
| 61 | Weighing Machine FOR ANIMAL                          |              |   | 1  |  |  |  |
| 62 | Tap with elbow activated handle (Washing sink)       |              |   | 1  |  |  |  |
| 63 | Formaldehyde solution 37%                            | 5 ltr/Barrel |   | 2  |  |  |  |
| 64 | Autoclave indicator Tape (1/2 inch * 60 yards)       |              |   | 5  |  |  |  |
| 65 | Micropore paper Tape (1 inch * 10 yards)             | 12 pcs/Box   |   | 10 |  |  |  |
|    | <b>Requirement for Emergency Medicine Kit</b>        |              |   |    |  |  |  |
| 1  | Digital Thermometer                                  |              |   | 2  |  |  |  |
| 2  | Inj. Adrenaline                                      | 1 ml ampoule |   | 1  |  |  |  |
| 3  | Yohimbine (Xylazine reversal agent)                  | 10 ml        |   | 1  |  |  |  |
| 4  | Inj. Dexamethasone                                   | 5ml Ampoule  |   | 10 |  |  |  |
| 5  | Inj. Diphenhydramine maleate                         | 30 ml Vial   |   | 1  |  |  |  |

Signature of the bidder

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|   |                                       |           |   |  |  |  |
|---|---------------------------------------|-----------|---|--|--|--|
| 6 | Inj. Chlorpheniramine maleate<br>ZEET | 30ml vial | 1 |  |  |  |
| 7 | Disposable Syringes (20ml)            |           | 2 |  |  |  |
| 8 | Stethoscope                           | PCS       | 1 |  |  |  |

No. of over writing-----

No. of correction-----

No. of cutting-----

Signature \_\_\_\_\_

Name \_\_\_\_\_

Designation \_\_\_\_\_

Date \_\_\_\_\_

Signature of the bidder ~

  
Executive Officer  
Baripada Municipality