



Ref: Advt No. - 3545 / dated 06/11/2025

REQUEST FOR PROPOSAL

“Public-Not for profit Partnerships” for Operation & Management of
“MEDICAL DISPENSARY AT BLOCK-K-of NLCIL HIRMA, R&R COLONY
AT- HIRMA VILLAGE ”, DIST- JHARSUGUDA, ODISHA .

DISCLAIMER

The information contained in this Request for Proposal (RFP) document or subsequently provided to bidder(s), whether verbally or in documentary form by or on behalf of the District Authority under Department of Health & Family Welfare, Govt. of Odisha, or any of their employees or advisors, is provided to bidder(s) on the terms and conditions set out in this RFP document. This RFP document is not an agreement and is not an offer or invitation by the District Authority or its representatives to any other party. The purpose of this RFP document is to provide interested parties with information to assist the formulation of their proposal and detailed Proposal. This RFP document does not purport to contain all the information each bidder may require. This RFP document may not be appropriate for all persons, and it is not possible for the Department, their employees or advisors to consider the investment objectives, financial situation and particular needs of each party who reads or uses this RFP document. Some bidders may have a better knowledge of the proposed Project than others. Each bidder should conduct its own investigations and analysis and should check the accuracy, reliability and completeness of the information in this RFP document and obtain independent advice from appropriate sources. District Authority / Department, its 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 the RFP document. District Authority / Department may in its absolute discretion, but without being under any obligation to do so, update, amend or supplement the information in this RFP document.



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Section 1: - NOTICE INVITING PROPOSAL

Detailed proposals are invited from eligible entities to select the agency for the Public-Not for profit Partnerships "RFP for Operation & Management of **"MEDICAL DISPENSARY AT BLOCK-K-of NLCIL HIRMA, R&R COLONY AT HIRMA VILLAGE", IN THE DISTRICT OF JHARSUGUDA, ODISHA"** .

Important timelines:

A. Date of advt. publication: - 07.11.2025 (The detailed RFP document downloadable from Website:

District website: - jharsuguda.odisha.gov.in)

B. PRE-BID MEETING: - Date- 15.11.2025 at- 11.30 A.M in the O/o Chamber of CDM & PHO, Jharsuguda.

C. Last date for submission of the Proposal & Address for Submission :- Date: 29.11.2025
Time: 5.00 PM, Address- O/O-CDM&PHO, Jharsuguda, DHH, Jharsuguda-768204.

• SECTION 2: SCHEDULE OF PROPOSAL SUBMISSION

A. The Bidders are requested to submit their application as per the details below:-

Address of the office/Department: O/O- CDM&PHO, DHH, At- Malimunda, PO- OSAP Lane, Dist- Jharsuguda-768204.

NB: Proposals should be submitted through **Speed Post/ Registered post only**. No other form of submission will be accepted. Proposal (s) submitted after the due date & time will not be accepted.

B. Opening of the Proposals:

Date: 02.12.2025, **Time:** - 11.00 AM

at- Office of the CDM&PHO , DHH, Jharsuguda.

(In case it is a holiday, the date of opening of the proposal will be the next working day)

SECTION 3: INSTRUCTION TO THE BIDDER

3.1 Scope of Proposal:

Interested bidders fulfilling the eligibility criteria **may apply for operation and management "MEDICAL DISPENSARY AT BLOCK-K-of NLCIL HIRMA, R&R COLONY AT- HIRMA VILLAGE ", DIST- JHARSUGUDA** . The following points are to be ensured while applying for the project.

- (a) Detailed description of the objectives, scope of services, deliverables and other requirements relating to "Operation and Management of the "**MEDICAL DISPENSARY AT BLOCK-K-of NLCIL HIRMA, R&R COLONY AT- HIRMA VILLAGE ", DIST- JHARSUGUDA** are specified in this RFP. The manner in which the Proposal is required to be submitted, accepted and evaluated is also explained in this RFP.
- (b) Proposals must be submitted through **Speed post/Registered post only** within the due date and time mentioned in this RFP. **Application submitted in any other form and received after the due date and time will not be accepted.**
- (c) The selection of the Agency shall be on the basis of an evaluation by the District Desk Appraisal Committee through the Selection Process specified in this RFP. Bidders shall be deemed to have understood and agreed that no explanation or justification for any aspect of the Selection Process will be given and that the CDM&PH Officer-cum-District Mission Director's, Jharsuguda decision is final without any right of appeal whatsoever.
- (d) **The bidder shall submit its Proposal in the form and manner as specified in this RFP. There shall not be any Financial Proposal to be submitted in the tender, as this is a fixed cost-based project. The cost of the project is Rs. 74,86,980/- per annum. This includes (1)HR Remuneration of clinical and ancillary manpower @Rs.64,06,980/ (2) Hiring and maintenance of Ambulance with Driver@Rs.7,20,000 and (3) Recurring costs like electricity, consumables for Cleaning and sanitation with transportation of Drugs and consumables from DHH, Jharsuguda/Other contingencies-@Rs.3,60,000/. The cost may be modified based on applicable labour laws from time to time & necessary approval from the funding organization, NLC India Ltd.**
- (e) Upon selection, the agency shall be required to enter into an Agreement with the CDM&PH Officer-cum-District Mission Director of Jharsuguda District for implementation of the project. The implementation of the "**MEDICAL DISPENSARY AT BLOCK-K- of NLCIL HIRMA, R&R COLONY AT- HIRMA VILLAGE ", DIST- JHARSUGUDA** will be guided by the terms and conditions of the agreement.

3.2 Eligibility Criteria:

The entities fulfilling the following criteria are eligible to apply:

1. It must be registered under Society Registration Act/Indian Trust Act/Company act.
2. If registered under Societies Registration Act, it must have the provision of health services, health care, primary healthcare, and any other health related services in its memorandum of association.
3. If it is a Trust, it must have been formed to provide health services, health care, primary health care or any other health related services.

4. In case of company, it must be in Section 8 of Companies under the companies Act 2013 (erstwhile Section 25 Companies under Companies Act 1956) with provision of healthcare as one of the businesses in the memorandum of association.
5. One person Companies are not eligible to apply.
6. To be eligible to apply, the entity **must be in existence for at least 5 years as on 31st March, 2025**. Organizations established/registered after **31st March, 2020** are not eligible to apply.
7. The entity if registered under Societies Registration Act. 1860, must have a Unique ID no. through the portal NGO-DARPAN of NITI Aayog.
8. The entities must produce demonstrable and verifiable evidence of providing clinical, outreach and public health services for a period of *five* years.
9. The entities should have an annual turnover of at least Rs 50 lakhs per annum in the last three financial years (2021-22, 2022-23-, and 2023-24).
10. The entities must submit an undertaking for the willingness to sign the service level agreement towards the implementation of the project.
11. The entities should have meetings & minutes of the Executive Committee/ Governing body/any other body meeting based on bye-law/memorandum of the society/registration document of last three financial years as above.
12. Self certified willingness of an Allopathic doctor to work in the proposed dispensary for which the organization is applying for is mandatory along with the application form or else the application will be rejected.
13. The entity must enclose documents of having minimum of Rs. 20 lakhs as fixed assets in the name of the entity in terms of Land, building and other fixed assets. **(Only applicable for the entities registered as per section.2)**
14. The entity must not never have been "Blacklisted"/ Debarred from participating in any tendering process by any State Govt./Central Govt. Institutions. An affidavit to this effect is to be submitted.
15. The entity or any of its office bearers must not have been convicted/case pending against them in any court of law in India or abroad for any civil/criminal offences. An affidavit to this effect is to be submitted.
16. If based on any adverse report against the organization from the District/ NHM/ any Govt. Departments, the partnership of the organization has been discontinued or due to poor performance in implementation of any PPP projects under NHM is identified by the external evaluating agency, then the organization shall not be eligible to apply. **In case the services of the organization have been discontinued on the basis of the conduct of any financial irregularities, it will not be allowed to apply.**
17. Entity should have been registered under 12-A of Income Tax exemption.

3.3. Submission and Signing of Proposal:

The proposal shall be submitted in the following ways:

- i. The Proposal shall be typed or written legibly in English in indelible ink and shall be signed by the authorized representative of the entities.
- ii. Any interlineations, erasures or overwriting shall be valid only if the person or persons signing the Proposal have put his/their initials prior to submission of the same.

3.4. Packing, Sealing and Marking of Proposal:

The proposal and attached documents must be inserted in a single envelope, along with applicant's name and address in the left hand corner of the envelope and superscribed as **Proposal for "Operation & Management of "MEDICAL DISPENSARY AT BLOCK-K-of NLCIL HIRMA R&R COLONY AT HIRMA VILLAGE ", DIST- JHARSUGUDA.**

The application envelopes shall be addressed to the CDM & PH Officer cum District Mission Director as per the detailed address mentioned at the *Section - 2: Schedule of Proposal Submission*. If the outer envelope is not sealed and marked as mentioned above, then the O/o the CDM & PH Officer will assume no responsibility for the proposal's misplacement or premature opening. Telex, cable or facsimile proposals will be rejected.

3.5. Content of the Proposal:

The entity fulfilling the eligibility criteria may submit the information/documents as mentioned in the RFP along with a covering letter on its letterhead, indicating its interest in applying for the project. They need to submit a project proposal mentioning the strategy to operate and manage the Medical Dispensary with the Terms of Reference mentioned in this RFP.

3.6. EMD deposit:

EMD of Rs.1,00,000/- in the shape of a Demand Draft or Banker's Cheque in favour of **ZSS CSR, JHARSUGUDA**, is to be submitted along with the bid. Details of the Demand Draft or Banker's Cheque (DD/BC No., date, name of the Bank) should be mentioned in the bid.

The EMD will be refunded after the selection of the successful bidder. No interest will be paid on the EMD. **Bid proposals not accompanied by EMD will not be considered.** EMD of the bidder will be forfeited if it is discovered that the bidder has submitted false or forged or incorrect or misleading documents or information.



3.7. Sequence of Proposal submission:

The following sequence must be followed while submitting the proposal.

1. **Sequence of the Document to be submitted: -**
Covering letter for the project by the Entity in its letter head. To be submitted in **Form - T1**.
2. Name, Address, Registration details of the Agency. To be submitted in per **Form- T2 & attached relevant certificate**.
 - I. Copy of the Registration Certificate or equivalent certificate (**Document-1**)
 - II. Copy of the Memorandum of Association or equivalent document (**Document-2**)
3. Annual Financial Statements with audit report attached for the last 3 years: 2021-22, 2022-23, 2023-24 (**Document- 3**). To be submitted in **Form-T3**.
4. Annual Reports of the entity for the last three years i.e. 2021-22, 2022-23, 2023-24. In case run by the PSUs, annual reports of the PSUs. (**Document-4**). Organizations not preparing annual reports should provide legitimate reasons for not preparing the same. A document containing details of the activities undertaken by the Organization during the last three years.
 - I. (**To be submitted in Form - T4** and the relevant work order/contract copies of the same. (**Document-5**)
5. Names of the Office Bearers along with their addresses (in case of Trusts and Registered Societies) / Names of the key personnel along with their addresses for Other Organizations (**Document- 6**).
6. A certificate that the bidder has never been "blacklisted"/ debarred from participating in any tendering process by any State Government/central Government institutions. The bidder may provide details of circumstances of the' cases. (**Document- 7**) To be submitted in **Form - T5**.
7. Self-certified willingness of an Allopathic doctor to work in the proposed MEDICAL DISPENSARY for which the organization is applying for along with the application form. (**Document-8**). To be submitted in **Form - T6**.
8. An undertaking that the office bearer of the Organization has not been convicted/case pending in any court of law in India or abroad for any criminal offence. (**Document- 9**). To be submitted **Form - T7**.
9. An undertaking that the Organization is willing to sign the service level agreement. (**Document-10**). To be submitted in **Form - T8**.
10. Copy of the resolution of the competent authority in the Organization authorizing the signatory to respond to this invitation (**Document 11**).
11. A document containing the vision, mission and organizational structure of the Organization (**Document: 12**).

12. Copy of PAN card, **(Document: 13)**.

13. Copy of Bank Pass Book, **(Document: 14)**

13. A document containing the details, which inter alia must include the names, addresses and educational qualifications of key personnel employed by the Organization during the last three years including those employed at the time of submission of this bid **(Document:- 15)**.

14. Descriptions of activities of the Organization in the primary health care/Health system in any parts of India emphasizing (a) geographical area (b) outputs (c) manpower dedicated to projects (d) outcome **(Document- 16)**.

15. A document containing the Information technology capacity of the Organization indicating capacities in terms of (a) hardware (b) application software (c) usage **(Document- 17)**.

16. Income Tax and Other Tax registration certificates: Registration under 12-A of Income tax act 1961. **(Document -18)**

17. N. B.- All the information, documents, filled in forms must be submitted with clear indication of the Page Numbers as per above. In case the document contains more than one page, it should be properly bound and identified with clear heading on the first page. All pages of above supporting documents and proposal must be signed by the Authorized signatory of the entity along with seal, failing which the application shall be rejected.

18. 3.8. Financial Bid:

19. No financial bid is required to be submitted as this is a fixed HR cost-based project.

3.9. Number of Proposals:

Interested bidders fulfilling the eligibility criteria may submit one proposal only.

3.10. Cost of Proposal:

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

3.11. 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 concerned District Authority 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 the Proposal and performance of all of its obligations there under;

(v) Agreed to be bound by the undertaking provided by it under and in terms hereof.

(b) The concerned 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 in any information or data given by the concerned District Authority.

3.12. 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. In case any of these Documents is in another language than English, 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.

3.13. Proposal Due Date:

RFP filled in all respect must reach O/o the CDM&PHO, Jharsuguda District at the address, time and date specified in the Section 1: **Notice inviting proposal, through Speed Post/ Regd. Post only**. If the last date for the submission of RFPs is declared as a holiday, the RFPs will be received up to the appointed time on the next working day.

3.14. RFP Opening and Process of Selection:

- (a) The concerned 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: Notice inviting proposal.
- (b) The bidder/their authorized representatives who will be present shall sign a register recording their attendance.
- (c) In the event of the specified RFP opening date being declared a holiday, the RFPs shall be opened at the appointed time and location on the next working day.
- (d) The District Committee will conduct the screening process of the valid proposals received within the due date and having EMD attached. The Committee will verify whether all the required documents as per the advertisement have been submitted along with each proposal. If at all, any deficiency in document submission is found out in any of the proposal, the same will be informed.
- (e) After conducting further process, the qualifying checklist and score sheet of the desk appraisal process along with the reasons of rejection, if any, will be hosted in the District Website inviting objection by giving 7 days' notice.
- (f) The bidder has to score a minimum of 50% of marks in the score sheet in order to be eligible to get the award. No field appraisal process will be conducted for selection.
- (g) The bidders who has scored 50% or above in the score sheet shall be called to the office of CDM&PH Officer of the Jharsuguda District for necessary verification of their original

documents that they have submitted along with their application. After due verification of the original documents, Merit list will be notified in the website.

- (h) For finalisation of tender the bidder who has scored the 'Highest Marks' in the scoresheet will be awarded with the work order.
- (i) The process will be approved in the designated District Committee. The final selection result will be notified after the due approval from this committee headed by Collector & DM, Jharsuguda & due approval from Appropriate Authority.

3.15. Post Selection Procedure:

- i. After approval of the Competent Authority, the selected agency will be informed in writing of its selection as the agency for Operation and management of the Medical Dispensary. This will be the letter of award which shall be issued by the CDM&PHO, Jharsuguda to the selected agency.
- ii. Within 15 days of the issue of the letter of award the selected agency will be required to inform the Chief District Medical & Public Health Officer cum District Mission Director, Jharsuguda in writing of its acceptance of the award, failing which, the award will be offered to the 2nd rank bidder.
- iii. On completion of these formalities, the CDM&PHO, Jharsuguda will inform the selected agency regarding date of signing of the Service Level Agreement.

SECTION 4: Terms of Reference for the Operation and Management of "Medical Dispensary AT BLOCK-K-of NLCIL HIRMA R&R COLONY AT HIRMA VILLAGE", DIST- JHARSUGUDA.

- 4.1. India has made rapid progress in the past few decades in the Public Health System as reflected in improvement in key parameters such as Infant, Child and Maternal Mortality Rates, Total Fertility Rate, and Crude Death Rates. There has been improvement in expanding access and coverage in much of the country. Keeping in view of this NLCIL has made a Medical dispensary for the population affected and rehabilitated at- Hirma, GP Hirma, Jharsuguda.
- 4.2. With a view to improve the quality of the primary health care in terms of clinical care and outreach services, NLCIL considered it desirable to hand over the function and responsibilities of operating and managing the selected Dispensary to a concessionaire who would be allowed to operate and manage such facilities in accordance with the terms and conditions laid down in this Services Level Agreement. District administration hopes that this would bring about considerable improvement in provision of competent clinical care and community outreach services including public health functions in this area.
- 4.3. Public Private Partnership in the Public health system is seen as a step towards strengthening the public health system and a measure towards facilitating and building the capacity of the state to manage such facilities by demonstrating models for comprehensive Primary Health Care.
- 4.4. The partnership will be initially for a period of *one year*. Subject to the agency scoring 70% or >in annual assessment after completion of one year of project, renewal of the partnership will be considered on the basis of the evaluation conducted by the concerned District Authority/Designated Committee.

Section 5. Principle of the Arrangement:

- 5.1 Both parties are committed to enhance the health and well-being of residents of the area covered by the facilities in this agreement by providing high quality service, innovation and development and to meet identified needs within the resources available to both the parties.
- 5.2 The agency agrees and undertakes to implement all National/States Health Programs/interventions including outreach activities.
- 5.3 The agency will, manage and maintain and ensure that the facilities are run in accordance with the Indian Public Health Standards (2012) and the list of the services to be provided attached at. Annexure A. In circumstances where IPHS standards cannot be met fully District Authority/ Committee shall decide on the relaxation of the standards but ensure that facilities are in a working condition through annual inspection.
- 5.4 The agency will establish a transparent and "open to public" grievance redressal system within the facility.
- 5.5 For certain administrative powers such as the issuance of Birth and Death Certificates (if any), CDM&PHO, Jharsuguda would nominate the Officer in Charge of the nearest Government managed facility as the issuing authority.
- 5.6 The agency will agree that the concession granted will not be treated as a business venture and will not be used to, make profits.
- 5.7 The Agency agrees that no money would be collected from the users of the facilities for any clinical consultation and service, diagnostic services or any other service provided in the facilities.
- 5.8 The agency will commit that no new building/extension to the existing will be undertaken without the prior written approval of Competent Authority/CDM&PHO Jharsuguda, Failure to adhere to this provision will lead to cancellation of the agreement forthwith and District Competent Authority/CDM&PHO, Jharsuguda will take over the facilities without any notice.
- 5.9 The agency commits that any land within the premises of the facilities will not be used in any manner without the prior written approval of CDM&PHO, Jharsuguda/Competent Authority. Failure to adhere to this provision will lead to cancellation of the agreement &competent authority/CDM&PHO, Jharsuguda will take over the facilities without any notice.
- 5.10 The agency agrees that by signing the Service Agreement, no right on the Property and assets of the facilities will be transferred to them now or at any future date. The agency will not claim any proprietary rights on land, buildings or any moveable or immoveable assets situated on the land pertaining to the facilities or in use in the facilities.



SECTION 6 : SERVICE DESCRIPTION AND RESPONSIBILITIES:

6.1 The services should include the comprehensive primary health care package encompassing all outreach, including behavioural change through health education and health promotion, clinical and public health services. The conditions listed for preventive, primitive or curative actions which are broadly categorized into the following groups:

- (i) Care in Pregnancy and Child-Birth. (The latter would be provided in specific facilities based on the district context).
- (ii) Neonatal and Infant Health Care Services and Nutrition.
- (iii) Childhood and Adolescent Health Care Services including immunization.
- (iv) Family planning, Contraceptive services and Other Reproductive Health Care services.
- (v) Management of Common Communicable Diseases and General outpatient care for acute simple illnesses and minor ailments
- (vi) Management of Communicable Diseases: National Health Programs.
- (vii) Screening and Management of Non-Communicable Diseases including promotion of healthy life style.
- (viii) Screening and Basic management of Mental Health ailments
- (ix) Care for Common Ophthalmic and ENT problems
- (x) Basic Dental Health Care
- (xi) Geriatric and Palliative Health Care Services
- (xii) Trauma Care (that can be managed at this level) and Emergency Medical services

6.2 List of Services to be provided at the Medical Dispensary level are given below which is an indicative list and not an exhaustive list

6.3 Human Resources to be required for operation and management of Medical Dispensary at- Hirma GP:

Followings are the Human Resources required to be positioned in the **Medical Dispensary at- Hirma GP** for operation and management.

Sl. No.	Categories of staff	No. of Post	Monthly Salary per staffs(Rs.)	Qualification
1	Medical Officer (Allopathic)	01	1,06,379/-	<ul style="list-style-type: none">• The candidate must have passed MBBS from an Institution recognized by National Medical Commission (NMC). The candidate must have valid registration from the Odisha Council of Medical Registration.• The candidate must have 02 years of post qualification experience.• Up to 65 years.
2	Ayush Medical Officer	01	45,589/-	<ul style="list-style-type: none">• The candidate must have passed Bachelor degree in Ayurvedic Medicine & Surgery (B.A.M.S.) / Bachelor in Homoeopathic Medicine and Surgery (B.H.M.S.) as the case may be, from a recognized University . S/he must have completed the Internship Training.

				<ul style="list-style-type: none"> • S/he must have valid registration from the Odisha State Council / Board of Ayurvedic / Homoeopathic Medicine. No provisional certificate is acceptable. • Age Limit: Minimum 21 years & Maximum 40 years.
3	Pharmacist	01	23,240/-	<ul style="list-style-type: none"> • The candidate must have passed +2 Science Examinations under Council of Higher Secondary Education, Odisha or equivalent and passed Diploma in Pharmacy from Govt. Medical College & Hospitals of the State / any other private institution duly approved by All India Council of Technical Education (AICTE) and examination conducted the Odisha Pharmacy Board. • Age Limit: Minimum 21 years & Maximum 65 years.
4	Staff Nurse	02	28,870/-	<ul style="list-style-type: none"> • The candidate must have passed +2 in any stream under council of higher secondary education, Odisha or equivalent with diploma in GNM course in Nursing / BSc Nursing from any Medical College / Hospital of the State / Any other Institution duly recognized and approved by Indian Nursing Council. • Age Limit: Minimum 21 years & Maximum 40 years.
5	Lab. Technician	01	23,240/-	<ul style="list-style-type: none"> • The candidate must have passed +2 Science Examinations under Council of Higher Secondary Education, Odisha or equivalent and passed DMLT from Govt. Medical College & Hospitals of the State / any other private institution recognized by Govt. of Odisha or All India Council of Technical Education (AICTE). • Age Limit: Minimum 21 years & Maximum 40 years.
6	Accountant cum Data Manager	01	33,634/-	<ul style="list-style-type: none"> • The Candidate must be a Graduate in Commerce with minimum 50% marks in aggregate and also must have passed PGDCA/DCA / Odisha state Certificate in Information Technology (OS-CIT) course of Odisha Knowledge Corporation Limited (minimum 6 month course duration) or any equivalent course from a recognized institute. • Upper age limit:-Up to 40 Years as on 01.03.2025.
7	Programme	01	45,499/-	<ul style="list-style-type: none"> • The candidate must have passed two years

	Coordinator			<p>course in any of the following subjects with minimum 55% marks in aggregate from a recognized University / Institution.</p> <p>-Master Degree in Social Work / Health Management / Health Administration.</p> <p>-Master Degree in Business Administration or it's equivalent course, such as ; Post Graduate Diploma in Business Administration or Post Graduate Diploma in Business Management or Post Graduate Diploma in Management.</p> <ul style="list-style-type: none"> • The Candidate also must have passed PGDCA/DCA / Odisha State Certificate in Information Technology (OS-CIT) course of Odisha Knowledge Corporation Limited (minimum 06 months course duration) or any equivalent courses from a recognized institute. • Upper age limit:-Up to 40 Years as on 01.03.2025.
8	Yoga Teacher (Part time as per NHM norm)	01	10,000/-	<p>Option-1: PG Diploma in Yoga & MA in Human Conscious & Yogic Science / MA in Yoga & Naturopathy / MA in Yogic Science/ Certificate Course in Yoga from a recognized institution or university.</p> <p>Option-2: If candidate with above qualification is not available then candidates form the local area, who had passed at least higher secondary level / +2 (from any stream) and are physically and mentally fit and undergone 140 hours of yoga curriculum training in an institutional setting.</p> <p>The candidates should be aged between 21 and 50 years as on 01.03.2025 for the above 2 options.</p> <p>Deliverables: - Minimum 10 Persons to participate in each Yoga session.</p> <p>Allowances: - Rs.600/- per session (90 Minutes) including conveyance.</p> <p>S/he can be engaged to work at MEDICAL DISPENSARY-HWCs/ AAM-SC.</p>
9	Support Staff (Attendant & cum Dresser -1 & Cleaning Staff-02)	03	18,075/-	<ul style="list-style-type: none"> • Age- 21 to 40 years. • 10th Pass(Attendant) • 07th Pass (Cleaning Staff) • Age- 21-40 years.
10	Security	01	18,075/-	<ul style="list-style-type: none"> • Age- 21 to 40 years ,10th Pass
11	Night Watch Man	01	18,075/-	<ul style="list-style-type: none"> • Age- 21 to 40 years • 10th Pass

The Staff so engaged by the Agency shall be exclusively on the pay roll of the Agency and shall under no circumstances this staff will ever have any claim, whatsoever for engagement with the Government/Competent District Authority. The Agency shall be solely

responsible for the performance and conduct of the staff notwithstanding the source of hiring such staff. The Agency shall be fully responsible for adhering to provisions of various laws applicable on them including labour laws. In case the Agency fails to comply with the provisions of applicable laws and thereby any financial or other liability arises on the Government /Competent District Authority by Court orders or otherwise, the Agency shall be fully responsible to compensate/ indemnify to the Government for such liabilities. For realization of such damages, Government/Competent District Authority may even resort to the provisions of any Act, which is in force or other laws as applicable on the occurrence of such situations.

SECTION -7: Terms & Conditions:

7.1 The Selected Agency will have to open a separate Saving Bank Account for this Grant-in - Aid in any Nationalized Bank. The account will be opened in the name of the project, which shall be operated jointly by at least two office bearers authorized by & for the purpose by the management committee of the Agency.

7.2 The selected Agency has to submit the monthly progress report on the functioning Medical Dispensary to Block MO I/C / DMO (MS) Cum Supdt., DHH Jharsuguda, CDM&PHO at district level and NHM/DPMU in HMIS Format.

7.3 The amount of grant should be utilized only for the purpose for which it is sanctioned and the unspent balance of the grants shall be refunded after the close of the financial year.

7.4 The Agency will submit quarterly statement of expenditure and progress report to the district with a copy to DPMU, NHM Jharsuguda. At the end of the project year, the Agency shall furnish annual report of the project along with the audited reports.

7.5. Period of Partnership:- The duration of the project will be initially for *one year*. However, the project may be extended subject to the fund provision approved by NLCIL and satisfactory performance of the Agency in Medical Dispensary operation and management.

7.6. Award of Contract and Agreement:

On evaluation of proposals and decision thereon, the selected agency shall have to execute an agreement with the District Authority/CDM&PHO, Jharsuguda within 15 days from the date of acceptance of their bid is communicated to them. This Request for Proposal along with documents and information provided by the bidder shall be deemed to be integral part of the agreement. Before execution of the agreement, the bidder shall have to deposit, Performance Security Deposit as per norm.

7.7. Commencement of Service:

The selected agency shall commence the service within **15 days** from the date of signing of the Agreement. If the agency fails to commence the service as specified herein, the District Authority may, unless it consents to the extension of time thereof, may cancel the agreement and forfeit the Performance Security.

7.8. Performance Security:

The selected agency on acceptance must provide the District Authority a **Bank Guarantee for Rs.1,00,000/- (Rupees One Lakh only) from** a Nationalized Bank

valid for a period of minimum one year as performance security of the project which will have to be extended for a further period based on the period of extension.

7.9 Payment:

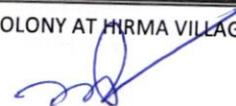
- Financial assistance for the project will have 03 components, namely "Clinical & Ancillary Medical Services HR C o s t "; Hiring & Maintenance of Ambulance Services with Driver to be stationed at the Medical Dispensary, Recurring costs like electricity and other expenditures related to cleaning & maintenance of the dispensary, including transportation of Drugs & consumables etc from DHH, Jharsuguda at Malimunda area.
- All other costs except the above, like procurement of Drugs & consumables, provisioning of basic equipment & instruments as per gap assessment etc will be managed & supplied by CDM&PHO's office with the help of DPMU NHM.
- The HR costs, Ambulance related costs, and Recurring & Maintenance costs as above will be paid to the agency in Three instalments i.e. 30%, 35% and 35% / Annum. The first instalment will be paid after signing of the agreement and submission of the performance security. Subsequent instalments will be paid after submission of 75% SOE of the previous instalment. It is worth noting that the HR cost is subject to change for certain positions in accordance with applicable Labor laws from time to time. In this regard, after submission of salary statements of staff and SOE, UCs; the differential amount will be reimbursed.
- The annual budget of the project may be revised in the future, subjected to the terms & Conditions enlisted with NLCIL and CDM&PHO, Jharsuguda, in this regard.
- Competent District authority/CDM&PHO, Jharsuguda may introduce a penalty clause on non-achievement of the major deliverables.

7.10: Performance Monitoring and Standard of Services:

- The performance of the Agency will be monitored largely on the basis of output-based indicators like OPD Footfall and delivering Primary Health Care services to the population targeted in the area.
- The indicators of health service delivery expected from the Agency are of the minimum standard. The Agency would be encouraged to serve as a role model and to provide services at a much higher standard.
- An annual monitoring by a team of experts including a mix of technical specialists (Dist. Administration, CDM&PHO/NHM/NLC Representatives) shall be undertaken to review the working of the facilities.
- District shall use other mechanisms such as Health Management Information System (HMIS), and external monitoring process to assess performance on key indicators.
- A half yearly review meeting will be held and attended by appropriate levels of officials of the District Health Dept. & NLCIL w i t h t h e selected agency to review the performance, the anticipated outcome as per the agreement and future service developments and changes. It will address local issues and problems as are normally expected from such a committee.

7.11: ARBITRATION:

- If the agency fails to resolve their dispute or difference by such



mutual consultations within thirty days of commencement of consultations, then either the District Competent Authority or the Agency may give notice to the other party of its intention to commence arbitration, as hereinafter provided. The applicable arbitration procedure will be as per the Arbitration and Conciliation Act 1996 of India. In that event, the dispute or difference shall be referred to the sole arbitration of an officer as the arbitrator to be appointed by the Government.

- If the arbitrator to whom the matter is initially referred is transferred or vacates his office or is unable to act for any reason, he / she shall be replaced by another person appointed by the Government to act as Arbitrator.
- Services under this agreement shall, notwithstanding the existence of any such dispute or difference, continue during arbitration proceedings and no payment due or payable by the Government shall be withheld on account of such proceedings unless such payments are the direct subject of the arbitration.
- Unless such payments are the direct subject of the arbitration.
- Venue of Arbitration: The venue of arbitration shall be the place from where the agreement has been issued.

7.12. BREACH:

If either Party breaches the Conditions Contract or these Terms and Conditions and fails to remedy such breach within 30 days of written notice from any other Party calling for the breach to be remedied, then the non-breaching Party shall be entitled, without prejudice to any other rights that it may have in law, whether under the Contract or otherwise, to cancel the Contract without notice or to claim immediate specific performance of all the defaulting parties.

7.13. PENALTY:

If the agency fails to provide services as stipulated in the agreement, the States Government shall be entitled to fix penalty which would be deducted from the dues payable to the agency. However, in case there is no amount is due for payment to the agency, the penalty shall be recovered from them.

7.14. Force Majeure:

No penalty or damages shall be claimed in respect of any failure to provide service, which the agency can prove to be directly due to a war, sanctions, strikes fire, flood or tempest or Force Majeure, which could not be foreseen or overcome by the agency or to any act or omission on the part of persons acting in any capacity on behalf of agency provided that the agency shall at the earliest bring the same to the notice of the State Government.

7.15. TERMINATION:

- Either party may terminate this agreement by giving not less than one month notice in writing to the other. This notice shall include reasons as to why the agreement is proposed to be terminated.
- The District Competent Authority may terminate the agreement, or terminate the provision of any part of the Services, by written notice to the Agency with immediate effect if the Agency is in default of any obligation under the agreement, where the default is capable of remedy but the Agency has not

remedied the default to the satisfaction of the District Authorities within 30 days of at least two written advice after service of written notice specifying the default activities / act/omission requiring it to be remedied; or

- the default is not capable of remedy; or
- the default is a fundamental breach of the agreement
- If the District Competent authority terminates the agreement and then makes other arrangements for the provision of the Services, it shall be entitled to recover from the Agency any loss that had to be incurred due to such sudden termination of agreement.
- Both the parties agree that no further payment would be made to the Agency, even if due till settlement of anticipated loss as a result of premature termination of the agreement.
- The District Competent Authority reserves the right to terminate the agreement without assigning any reason if services of the Agency create serious adverse publicity in media and prima facie evidence emerges showing negligence of the Agency.
- At the time of termination, the Agency agrees to hand over all moveable and immovable assets to the authorized representative of the District Competent Authority /CDM&PHO on a mutually agreed date on "as is where is" basis.
- The Agency agrees that no asset will be moved out of the premises or destroyed other than consumables used during the normal course of operation of the facilities, at any time during the period from the effective date to the date of termination without the prior written approval of the District Competent Authority /CDM&PHO
- The concessionaire agrees that the date of handing over will not be more than 15 calendar days from the date of termination.

7.16. Indemnity:

- By this agreement, the agency indemnifies the District Competent Authority/CDM&PHO, Jharsuguda against damages of any kind or for any mishap/injury/accident caused to any personnel/property of the facilities.
- The agency agrees that all liabilities, legal or monetary, arising in any eventuality shall be borne by the Agency.

7.17. Redressal of grievances:

The grievance related to the "Operation and management of Medical Dispensary" is to be redressed at the level of CDM&PHO Office, Jharsuguda.

7.18. Jurisdiction of Court:

Legal proceedings if any shall be subject to the concerned District jurisdiction only.

7.19. Compliance with existing laws:

The Agency agrees to abide by all laws of the land as will be applicable for operation and maintenance of the facility.

7.20. Right to Accept and Reject any Proposal:

The District Authority reserves the right to accept or reject any proposal at any time without any liability or any obligation for such rejection or annulment and without assigning any reason.

SECTION 8 - Evaluation of the proposals.

8.1 Evaluation of Technical Proposals:

In the first stage, the proposal will be evaluated based on the agency's fulfilment of the **eligibility criteria**. Only those bidders who qualify as per the eligibility criteria, their bid considered for the next stage of evaluation i.e Award of Marks. The bidder has to score **at least 50 or above** in order to be considered for the preparation of the merit list for the Medical Dispensary

SCORING SHEET FOR THE ASSESSMENT OF THE BIDDER FOR MANAGEMENT OF MEDICAL DISPENSARY AT BLOCK-K-of NLCIL HIRMA R&R COLONY

Name of the Organization :

Head Office :

Applied District : Jharsuguda

Registration & Establishment (20 marks)

1. Years of Existence of entities registered in Society Registration Act/ Indian Trust Act/ Indian Religious and Charitable Act (5-10 yrs – 3 marks, > 10 yrs-5 marks).

Means of Verifications : Registration Certificate.

Maximum Marks : 05

Marks Obtained : _____

2. Registered under 80G (if Yes – 2 mark, if No – 0 marks).

Means of Verifications : 80G Regd. Certificate

Maximum Marks : 02

Marks Obtained : _____

3. Working Experience in the Health sector in the applied district (completion of minimum one year in project implementation) No experience-0 Marks, 01 to 03 Year experience-5 marks, 03 to 05 year experience- 10 marks).

Means of Verifications : MOU/Sanction Order/Agreement Copies

Maximum Marks : 10

Marks Obtained : _____

4. Governance system (Meeting & Minutes of the Executive Committee/ Governing Body Meeting based on bye-law & memorandum of the society in the last financial year): (Less than 50% meeting – 0 marks, 50% - 75% meeting 1 mark, > 75% meeting – 3 marks).

Means of Verifications : Proceeding/Meeting Register copies of GB&EB

Maximum Marks : 03

Marks Obtained : _____

Field Level Experience (45 Marks)

1. Years of experience in implementing projects in the Health sector out of Pvt Sector/CSR funding/. (1-3 yrs = 3 marks, > 3yrs = 5 marks)

Means of Verifications : MOU/Sanction order/Agreement

Maximum Marks : 05

Marks Obtained : _____

2. Years of Experience in implementing projects in the Health sector with the support of Govt. (1-3 yrs = 3 marks, > 3 yrs = 5 marks).

Means of Verifications : MOU/Sanction order/Agreement

Maximum Marks : 05
Marks Obtained : _____

3. Years of experience in managing Hospitals/MEDICAL DISPENSARIES/Medical Dispensaries/Mobile Health Units, conducting village-level OPDs) etc funded out of DMF/CSR units in partnership mode. (1-3 yrs= 5 marks, 3 to 5 yrs = 7 marks,> 5 years = 10 marks).

Means of Verifications : MOU/Sanction order/Agreement

Maximum Marks : 10

Marks Obtained: _____

4. Multistate experience in managing health Institutions. (Less than 1 yrs = 0 marks, 1 yrs or above – 5 marks, 3 yrs or above-10 marks).

Means of Verifications : MOU/Sanction order/Agreement

Maximum Marks : 10

Marks Obtained : _____

5. Experience in managing a network of Hospitals/Medical dispensaries (02 numbers minimum) of a similar kind, having core Clinical staff (MO,MBBS, SNs, Pharmacists, and ANMs, etc :

Period 1 to 3 years = 3 marks

Period > 3 to 5 years = 5 marks

Period > 5 years = 7 marks

1. Means of Verifications : MOU/Sanction order/Agreement

2. Maximum Marks : 07

3. Marks Obtained : _____

6. Own patient referral transport service (1-3 years = 3 marks, 3 to 5 years -4 marks & >5 years = 8 marks).

Means of Verifications : MOU/Sanction Order/Agreement/Log book

Maximum Marks : 08

Marks Obtained : _____

Financial Strength (20 Marks)

1. Financial turnover (minimum 30 lakhs as per last audit report - > 30-35 lakhs = 4 marks, > 35-40 lakhs = 6 marks, > 40-50 lakhs = 8 marks & > 50 lakhs = 10 marks).

Means of Verifications : Audit report of the last financial year

Maximum Marks : 10

Marks Obtained : _____

2. Proper maintenance of books of accounts (Assessed through verification) Y/N: Y = 4 Marks & N = 0 marks.

Means of Verifications : Record/Register verification

Maximum Marks : 04

Marks Obtained : _____

3. Fixed assets in the name of the organization (minimum Rs. 15-20 lakhs assets = 4 marks, > 20 lakhs assets = 6 marks).

Means of Verifications : Balance sheet & fixed Asset Register

Maximum Marks : 06

Marks Obtained : _____

Staffing: Other Strength (10 marks):

Agencies having a core staff of any optimum number of Medical Officers (Allopathy) and other staff like Ayush MOs, Staff nurses, Pharmacist & LT in position for more than 3 years as Project staff in the payroll of the organization (document to be verified).

1 to 03 numbers of MO MBBS in agency's Pay roll- 02 Marks

4 to 6 numbers of MO MBBS in agency's Pay roll- 04 Marks

More than 07 numbers of MO MBBS in agency's Pay roll- 5 Marks

Ayush MO and Paramedics in agency's Pay roll-

05 to 10 Paramedics(including Ayush MO)-02 marks.

11 to 20 Paramedics(including Ayush MO)-04 marks.

20 and More Paramedics(including Ayush MO)-05 Marks

All five categories of staff must have engaged for at least more 1 years of period.

Means of Verifications : Acquaintance and HR Documents

Maximum Marks : 10

Marks Obtained : _____

Sustainability Strength: (5 marks)

If the Organization continues to manage any one Health Sector project sustainably for more than 3 years (3 years – 3 marks, 04 years – 4 marks, 5 years and more – 5 marks).

Means of Verifications : MOU/Sanction Agreement of any Health related project and its continuity in years.

Maximum Marks : 05

Marks Obtained : _____

Total Marks : 100

Secured Marks: _____

Signature of the Assessment Team:

Name	Designation	Signature

N.B: The proposals will be qualified if it scores at least 50 marks or more in technical evaluation.

Section 9: RFP Formats for Submission of Proposal



Check List for Proposal Submission
(Attach the checklist along with the Proposal)

Sl. No.	Particulars	Whether Submitted or Not (Yes/No)	Page No.
1	Covering letter for the project by the Entity in its letter head -As per Form - T1		
2	Name, Address, Registration details of the Agency - As per form T2 & Attach relevant certificate		
3	Copy of the Registration Certificate or equivalent certificate (Document 1)		
4	Copy of the Memorandum of Association or equivalent document (Document 2)		
5	Annual Financial Statements duly audited with audit report attached for the last 3 years: 2021-22, 2022-23 & 2023-24 (Document 3). Submit filled Form-T3		
6	Annual Reports of the entity for the last three years; 2021-22, 2022-23 & 2023-24 / In case run by the PSUs, annual reports of the PSUs (Documents 4). Organizations not preparing annual reports should provide legitimate reasons for not preparing the same. A document containing details of the activities undertaken by the Organization during the last Three years.		
7	The relevant work order/contract copies of the same. (Document-5) (To be submitted in Form - T4		
8	Names of the Office Bearers along with their addresses (in case of Trusts and Registered Societies) / Names of the key personnel along with their addresses for Other Organizations (Document- 6)		
9	A certificate that the bidder has never been "blacklisted"/ debarred from participating in any tendering process by any State Government/central Government institutions. The bidder may provide details of circumstances of the' cases. (Document- 7) Submit filled Form - T5.		
10	Self certified willingness of an Allopathic doctor to work in the proposed MEDICAL DISPENSARY for which the organization is applying for along with the application form. (Document-8). Submit filled Form - T6.		

11	An undertaking that the office bearer of the Organization has not been convicted by any court of law in India or abroad for any criminal offence. (Document- 9). Submit filled Form – T7.		
12	An undertaking that the Organization is willing to sign the service level agreement. (Document 10). Submit filled Form – T8.		
13	Copy of the resolution of the competent authority in the Organization authorizing the signatory to respond to this invitation (Document 11).		
14	A document containing the vision, mission and organizational structure of the Organization (Document 12)		
15	Copy of PAN card, (Document: 13)		
16	Copy of Bank Pass Book, (Document: 14)		
17	A document containing the details, which inter alia must include the names, addresses and educational qualifications of key personnel employed by the Organization during the last five years including those employed at the time of submission of this bid (Document 15).		
18	Descriptions of activities of the Organization in the primary health care system in any parts of India emphasizing (a) geographical area (b) outputs (c) manpower dedicated to projects (d) outcome (Document 16).		
19	A document containing the Information Technology capacity of the Organization indicating capacities in terms of (a) hardware (b) application software (c) usage (Document 17).		
20	Income Tax and Other Tax registration certificates: Registration under 12-A of Income tax act 1961. (Document 18).		



21	EMD (DD of Rs.1, 00,000/-)	Yes/No	
22	Form T1	Yes/No	
23	Form T2	Yes/No	
24	Copy of the company/Agency Registration certificate	Yes/No	
25	Copy of PAN	Yes/No	
26	Form T3	Yes/No	
27	Photocopies of the audited P/L account of each year highlighting the turnover in support of that)	Yes/No	
28	Form T4	Yes/No	
29	Copies of Work Order/Contract certificates from the clients in support of similar works executed in support of the information provided in Form T4	Yes/No	
30	Form T5	Yes/No	
31	Form T6	Yes/No	
32	Form T7	Yes/No	
33	Form T8	Yes/N	



FORM - T1
(Covering
Letter)

(To be furnished in the proposal)

PROPOSAL SUBMISSION FORM

(On the letterhead of the agency)

To

The Chief District Medical & Public Health Officer,
lharsuguda.

Re.: RFP Reference no. _____ dated _____

Sub: Submission of the proposal for "Operation and Management of Medical Dispensary at Block-K of NLCIL, Hirma, R&R Colony(Name of the Medical Dispensary applied for).....District under NHM.

Dear Sir,

We, the undersigned, offer to provide the services for the "Operation and Management of Primary Health Center"(Name of the Medical Dispensary applied for).....(District). We are hereby submitting our Proposal in a sealed 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.

We understand that 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: _____

(Seal of the entity)



FORM - T2

(To be furnished in the proposal)

PROFILE OF THE AGENCY

Name of the Agency	
Headquarter Office Address	
Status of the Agency (Whether Registered under Company / Society /Trust/Medical College/Hospital under Public Sector or Govt. companies & Institutions	
Name of the Chief Executive and Authorized Signatory	
Telephone Nos.: Landline Mobile	
Fax	
Email id	
Date of Establishment	
Income Tax No. (PAN)	
Branch office/s in Odisha (with location details)	

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

Name and Title of Signatory: _____

(Seal of the entity)



FORM T3

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. No	Financial Year	Turnover in Lakh (Rs.)
1	2021-22	
2	2022-23	
3	2023-24	
Average Annual Turnover of last three years (Rs. In Lakhs)		

Date:

Signature of Chartered Accountant
(Name in Capital)

Place:

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 proposal)

Details of the experience during last three years
(Attach separate sheets if the space provided is not sufficient)

Name of the Assignment	Name/Address of the Organisation with whom the Contract Signed	Date of Award of Assignment	Date of Completion of Assignment	Duration of the Contract	Value of the Assignment (In Rs.)	Key Assignments accomplished as per Contract

Note- Please mention the experience related to managing hospitals, providing comprehensive primary health care, multi state experience in managing hospital, managing network of Hospitals, having own patient referral transport services along with other health related experiences. Please furnish the relevant Work Order/ Contract copies of the works executed in support of the information mentioned above.

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

Name and Title of Signatory: _____

(Seal of the entity)



FORM T5

(To be furnished in the proposal)

Format for Affidavit certifying that Entities are not blacklisted (On a Stamp Paper of relevant value)

Affidavit

This is to certify and confirm that (The name of the agency with address of the registered office) our organization / 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 the Project/s, either individually or as member of a Consortium as on the_____ (Date of Signing of 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, 2025.

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

(Seal of the entity)



FORM T6

(To be furnished in the proposal)

Format for Willingness /Consent Letter of the Doctor

I, Dr. (Name and address of the Doctor) hereby give my consent to the Secretary/ Executive Director_____ (name of the entity with address) to extend my service as Allopathic doctor, Medical Officer in charge of _____ (name of the MEDICAL DISPENSARY)_____ (name of the District) if the project is considered for sanction by NHM, Odisha.

This is for favour of your information and necessary action.

Undertaking

I, Dr. _____ At _____, Po _____, Dist _____, Odisha bearing Registration No _____ undertake that, I shall provide my documentary proof of Certificates & Registration Certificates as and when required.

Dated thisDay of, 2025.

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

Name and Title of Signatory: _____

(Seal of the entity)



FORM T7

(To be furnished in the proposal)

Format for Undertaking of the Agency

I, Ms/Mr. (The name of the agency with address of the registered office) does hereby declare and affirm that none of the office bearer of this organization has not been convicted by any court of law in India or abroad for any criminal offence. I undertake to abide by the decision of the Government. I also declare all information/facts/figures provided by me are true.

This is for favour of your information and necessary action.

Dated thisDay of, 2018.

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

Name and Title of Signatory: _____

(Seal of the entity)



FORM T8

(To be furnished in the proposal)

Format for WILLINGNESS/CONSENT LETTER.

I, Mr/Ms (The name of the agency with address of the registered office) herewith giving my consent to sign the agreement abiding by all norms.

This is for favour of your information and necessary action.

Dated thisDay of, 2018.

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

Name and Title of Signatory: _____

(Seal of the entity)

