

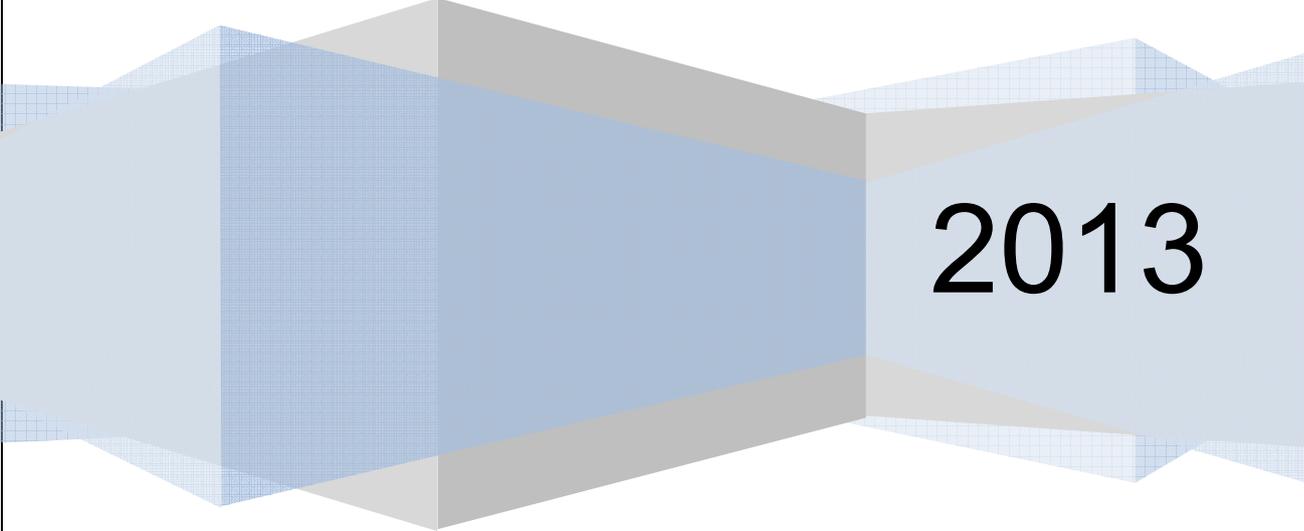
**REQUEST FOR PROPOSAL**  
**FOR**  
**“EMERGENCY RESPONSE SERVICES”**  
**popularly known as “108 Ambulance Service Project”**

|               |                                   |
|---------------|-----------------------------------|
| Version       | <b>Request for Proposal (RfP)</b> |
| Final Update: | 30.01.2013 (Final)                |

**Medical, Health and Family Welfare Department**  
**National Rural Health Mission**  
**Rajasthan State Health Society**  
**Government of Rajasthan**

Government of Rajasthan  
Medical, Health and Family Welfare Department,  
National Rural Health Mission (NRHM)  
Rajasthan State Health Society (RSHS)

DOCUMENT OF REQUEST FOR PROPOSAL FOR  
EMERGENCY RESPONSE SERVICES  
**(108 Ambulance Service Project)**



2013

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## **Disclaimer**

The information contained in this RfP document or subsequently provided to Applicant(s), by National Rural Health Mission, is provided to Applicant(s) on the terms and conditions set out in this RfP document and any other terms and conditions subject to which such information is provided. This RfP is based on material and information available in public domain.

This RfP document is not an agreement and is not an offer or invitation by the RSHS (NRHM) to the prospective bidder(s). The purpose of this RfP document is to provide interested parties with information to assist the formulation of their Application and detailed Proposal. This RfP document does not purport to contain all the information each Applicant may require. This RfP document may not be appropriate for all persons, and it is not possible for the RSHS (NRHM), their employees or advisors to consider the investment objectives, financial situation and particular needs of each party who reads or uses this RFP document. Certain applicants may have a better knowledge of the proposed Project than others. Each applicant 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. This RfP document has been prepared in a good faith and neither RSHS (NRHM), or its employees or advisors make no representation or warranty, express or implied, and shall incur no liability under any law, statute, rules or regulations as to the accuracy, reliability or completeness of the RfP document even if any loss or damage is caused by any act or omission on their part. RSHS (NRHM) may on its absolute discretion, but without being under any obligation to do so, update, amend or supplement the information in this RfP document.

### **E-Procurement:-**

1. Request for proposal for the “Emergency Response Services” popularly known as “108-Ambulance Service Project” is invited through e-tender system for selection of bidders.
2. The selection of Bidders shall be carried out through e-procurement process. Proposal/Bids are to be submitted online in electronic format on website <http://eproc.rajasthan.gov.in> as per RfP document.

3. All tender documents should essentially be signed digitally and submitted on <http://eproc.rajasthan.gov.in> in time as per checklist provided with the tender document. The checklist along with relevant page nos. should also be submitted with the tender.
4. Bidders who wish to participate in this RfP enquiry will have to register on <http://eproc.rajasthan.gov.in> (bidders registered on [eproc.rajasthan.gov.in](http://eproc.rajasthan.gov.in) earlier, need not to be registered again). To participate in online tenders, Bidders will have to procure Digital Signature Certificate as per requirement under Information Technology Act-2000 using which they can sign their electronic bids. Bidders can procure the same from any CCA approved certifying agency or they may contact e-Procurement Cell, Department of IT & C, Government of Rajasthan on the following address:-

**Address : e-Procurement Cell, RISL, Yojana Bhawan, Tilak Marg, C-Scheme, Jaipur, e-mail [eproc@rajasthan.gov.in](mailto:eproc@rajasthan.gov.in)**

## **Part- A1**

Government of Rajasthan  
Medical, Health and Family Welfare Department  
(National Rural Health Mission)

No.F.23(50)/NRHM)/ISC/Tender-2012/

dated

### **NOTICE INVITING PROPOSAL**

Government of Rajasthan through Department of Medical Health & Family Welfare (MH&FW) intends to operate a professionally managed "Emergency Response Services" popularly known as "108-Ambulance Service Project" for operationalization of existing fleet of 464 equipped Ambulances and further expansion by 227 additional equipped ambulances is proposed in the year 2013-14. For implementation of this project, Proposals are invited from eligible entities intending to participate in the bid process.

### **QUALIFICATION CRITERIA**

Proposals are invited in prescribed form from single entity/consortium of organizations who have experience in computer telephony integration with the ability to log calls with GPS (Global Positioning System) incorporated in GIS (Geographical Information System) with GSM/GPRS (Global System for Mobile Communication/General Packet Radio Service) integrated Ambulance monitoring and tracking system and software components to operate the hardware of the present project, having at least 2 (two) years experience in the operation of "Emergency Response Services" popularly known as "108 Ambulance Service Project" and running a minimum fleet of 150 ambulances supported by a control room, with a call centre set up by the entity. Such entities should produce documents projecting annual turnover/ gross receipts of Rs.10 (ten) Crores in each of the last 3 (three) financial years. Other details as mentioned in the RfP document.

### **SCOPE OF WORK**

Operationalization of an existing project with a fleet of 464 ambulances deployed strategically across the State of Rajasthan supported with a fully functional centralized call center situated at State Institute of Health & Family Welfare (SIHFW) building in Jhalana Dungari, Jaipur which is receiving more than 27000 calls per day and handling approx. 1800 emergencies on daily basis. Presently this project has approx. 2900 employees of the service provider including 2700 Pilots (Drivers) and Emergency

Management Technician (EMT). Scope of work also includes further expansion of the fleet up to 691 ambulances approximately, ensuring its strategic positioning across the State of Rajasthan. Number of Ambulances may increase/ decrease during the contract period. The scope of services may include procurement of assets, operation and maintenance of Ambulances, provision of medical and non medical consumables regularly and consistently, as specified in Annexure- 15 of this RfP and also associated activities in designated zones within the State of Rajasthan. The 'Request for Proposal' document can be downloaded from 30/01/2013 to 05/03/2013 upto 6pm from e-procurement portal [www.eproc.rajasthan.gov.in](http://www.eproc.rajasthan.gov.in) DIPR website: [www.dipronline.org](http://www.dipronline.org), and departments website: [www.rajswasthya.nic.in](http://www.rajswasthya.nic.in) .

**Mission Director, NRHM**

## Part- A2

### “Definitions”

**“Affiliate”** shall mean a Company that, directly or indirectly,

- i) controls, or
- ii) is controlled by, or
- ii) is under common control with, a Company developing a Project or a Member in a Consortium developing the Project and control means ownership by one Company of at least 26% (twenty six percent) of the voting rights of the other Company;

**“Agreement”** shall mean the Contract between the Department of Medical, Health and Family Welfare, Government of Rajasthan and the service provider in accordance with the provisions of this RfP.

**“Bid”** Bid shall mean the Technical Bid and Financial Bid submitted by the Bidder, in response to this RfP, in accordance with the terms and conditions hereof.

**“Bidder”** shall mean Bidding Company, Bidding Registered Society, Proprietorship firm, Partnership firm (Registered) or a Bidding Consortium submitting the Bid. Any reference to the Bidder includes Bidding Company / Registered Society, Proprietorship firm, Partnership firm (Registered), Bidding Consortium/ Consortium, Member of a Bidding Consortium including its successors, executors and permitted assigns and Lead Member of the Bidding Consortium jointly and severally, as the context may require”.

**“Bidding Company”** shall refer to such single company that has submitted the response in accordance with the provisions of this RfP.

**“Bidding Consortium” or “Consortium”** shall refer to a group of companies that has collectively submitted the response in accordance with the provisions of this RfP.

**“Chartered Accountant”** shall mean a person practicing in India or a firm whereof all the partners practicing in India as a Chartered Accountant(s) within the meaning of the Chartered Accountants Act, 1949.

**“Company”** shall mean a body incorporated in India under the Company’s Act, 1956.

**“Conflict of Interest”** A Bidder may be considered to be in a Conflict of Interest with one or more Bidders in the same bidding process under this RfP if they have a relationship with each other, directly or indirectly through a common company / entity, that puts them in a position to have access to information about or influence the Bid of another Bidder.

**“Department”** shall mean National Rural Health Mission (NRHM), Rajasthan State Health Society (RSHS), including Department of Medical Health and Family Welfare

**“Effective Date”** shall mean the date of signing of agreement by both the parties.;

**“Financial Closure or Financial Close”** shall mean the execution of all the Financing Agreements required for the “108- Ambulance Service Project” and fulfilment of conditions precedents and waiver, if any, of the conditions precedent for the initial draw down of funds for the “108- Ambulance Service Project”.

**“Financially Evaluated Company / Entity”** shall mean the company / entity which has been evaluated for the satisfaction of the financial requirement set forth herein in the RfP.

**“Force Majeure conditions”** means any event or circumstance which is beyond the reasonable direct or indirect control and without the fault or negligence of the bidder and which results in bidder’s inability, notwithstanding its reasonable best efforts, to perform its obligations in whole or in part and may include rebellion, mutiny, civil unrest, riot, strike, fire, explosion, flood, cyclone, lightening, earthquake, act of foreign enemy, war or other forces, theft, burglary, ionizing radiation or contamination, Government action, inaction or restrictions, accidents or an act of God or other similar causes.

**“Lead Member of the Bidding Consortium” or “Lead Member”**: There shall be only one Lead Member, having the shareholding of more than 50% in the Bidding Consortium and cannot be changed till 1 year of the commencement of the agreement/ effective date and thereafter with the prior approval of the Department/Government

**“Letter of Intent” or “LOI”** shall mean the letter to be issued by the Rajasthan State Health Society (RSHS), Department of Medical, Health and Family Welfare (NRHM) to the Successful Bidder(s) for Operation and Maintenance of ambulances under the “108-Ambulance service project”.

**“Limited Liability Partnership” or “LLP”** shall mean a Company governed by Limited Liability Partnership Act 2008;

**“Member in a Bidding Consortium” or “Member”** shall mean each Company in a Bidding Consortium.

**“Parent Company”** shall mean a company that holds at least twenty six percent (26%) of the paid - up equity capital directly or indirectly in the Bidding Company or in the Member of a Bidding Consortium, as the case may be.

**“Project Company”** shall mean the company incorporated by the bidder as per the Indian laws.

**“Proprietorship firm”** shall mean whose owner is an Individual

“Partnership firm” shall mean a firm registered with the Income Tax department and evidenced by a Partnership Deed.

“**Registered Society**” shall mean a Society registered under the Society Act as well as registered under the Income Tax Act, 1961.

“**RfP**” shall mean this Request for Proposal along with all formats and RfP Project Documents attached hereto and shall include any modifications, amendments alterations or clarifications thereto.

“**RfP Documents**” shall mean the documents to be entered into by the parties to the respective agreements in connection with the “108-Ambulance Service Project”.

“**Selected Bidder(s) or Successful Bidder(s)**” shall mean the Bidder(s) selected by the Department, pursuant to this RfP to set up the project and operate a professionally managed “Emergency Response Service” popularly known as “108-Ambulance Service Project” as per the terms of the RfP Project Documents, and to whom a Letter of Intent has been issued.

“**Statutory Auditor**” shall mean the auditor appointed under the provisions of the Companies Act, 1956 or under the provisions of any other applicable governing law.

“**Ultimate Parent Company**” shall mean a Company which directly or indirectly owns at least twenty six percent (26%) paid up equity capital in the Bidding company or member of a consortium, (as the case may be) and/or in the financially evaluated Company and such bidding company or member company of a consortium (as the case may be) and / or the financially evaluated company shall be under the direct control or indirectly under the control of such company.

**Part- A3**  
**INFORMATION AND INSTRUCTIONS TO THE BIDDERS**

|   |  |
|---|--|
| <p>The name and objectives of the project</p> | <p>Name of the project: "Emergency Response Services" popularly known as "108- Ambulance Service Project" in The State of Rajasthan.</p> <p>The objectives of this project are:</p> <ul style="list-style-type: none"> <li>• To provide 24 x 7 Ambulance Services through 108 toll-free numbers across all districts in the state of Rajasthan.</li> <li>• Identify and respond to medical emergencies in the entire state of Rajasthan through an existing fleet of 464 Ambulances which may be scaled up to 691 Ambulances during the financial year 2013-14. Bidder may thus, take into account, a fleet of 691 Basic Life Support Ambulances (BLS) to be operated during the year 2013-14 fully equipped with Medical and non medical equipments as per Annexure 15 of this RfP.</li> <li>• Operate an exclusive 24 x 7 call centre for managing and coordinating the ambulance services.</li> <li>• Provide trained manpower and specified medical equipment and treatment that will stabilize the patients and then transport them to the nearest Government Hospital within the shortest reasonable possible time.</li> <li>• Ensure normal response time as given under the Clause Operational Parameter and Penalty.</li> </ul> |
| <p>Required Proposals</p>                     | <ol style="list-style-type: none"> <li>1. Technical Bid</li> <li>2. Financial Bid (BoQ)</li> </ol>   |
| <p>Pre-Bid conference</p>                     | <p>A pre-bid conference will be held to provide clarifications, if any, to the prospective bidders and also collate clarifications from bidders which would be responded to, if required, after due consideration and uploaded on the website.</p> <p>This conference will be held at:<br/>         Directorate Conference Hall,<br/>         Ground floor, Main Building,<br/>         Swasthya Bhawan, Tilak Marg,<br/>         Jaipur (Rajasthan) – 302005<br/>         Date: 11/02/2013 Time: 3:00pm</p>   |

|   |   |
|---|---|
| Language in which proposals should be submitted | English   |
| Single currency for price conversion            | Indian Rupee  |
| Bid Security (Earnest Money Deposit)            | Rs. 50,00,000 (Rupees Fifty Lacs only) in the form of Banker's Cheque/ Demand Draft in favour of "Rajasthan State Health society Jaipur".                           |
| Performance Security Deposit                    | Rs. 5,00,00,000/- (Rupees Five Crores only) in the form of Banker's Cheque/ Demand Draft/ Bank Guarantee( BG) in favour of "Rajasthan State Health Society Jaipur". |
| Agreement Period                                | 2 years. On mutual agreement, Extendable every 6 months maximum for a period of 2 years on same terms and conditions.   |
| Bid validity period                             | The Bid shall be valid for a period of not less than 180 days from the opening of Technical bid "Proposal Due Date".  |

**Information to prospective bidders regarding on line bidding:**

|  |   |
|--|---|
| 1  | <p>The tender documents can be downloaded from web site <a href="http://eproc.rajasthan.gov.in">http://eproc.rajasthan.gov.in</a>. Detail of this tender notification and pre-qualification criteria can also be seen in NIT exhibited on website <a href="http://www.dipronline.org">www.dipronline.org</a>. Tenders are to be submitted online in electronic format on website <a href="http://eproc.rajasthan.gov.in">http://eproc.rajasthan.gov.in</a></p>  |
| 2  | <ol style="list-style-type: none"><li>1. The tender documents can be downloaded from website <a href="http://eproc.rajasthan.gov.in">http://eproc.rajasthan.gov.in</a>. and cost of tender form downloaded from the website shall be deposited by the tenderer separately as applicable by way of D.D/ Bankers cheque by 1:00pm on 06.03.13</li><li>2. In addition to Tender Form Fees and EMD, RISL Processing Fees of Rs 1000/- has to be physically deposited by way of D.D. of a Scheduled bank in favor of M.D. RISL before opening of the Technical Bid (refer circular no 19/2011 dated 30-09-2011).</li><li>3. Annexure 1 and 4 have to be also submitted physically.</li></ol>   |
| 3  | Last date & time for downloading of tender document: 05.03.13 up to 6pm   |
| 4  | Last date and time of submission of online bids: 06.03.13 till 1pm  |
| 5  | Date and time of Opening of online bids: 06.03.13 at 3pm  |
| 6  | Physical submission of Tender Fee, Processing Fee & EMD at the Office of Tendering Authority: MD, NRHM, IIIrd floor, Main Building, Swasthya Bhawan, Tilak Marg, Jaipur (Rajasthan) – 302005 is essential before opening of the Technical Bid. In absence of the above fee, the e-bid will not be processed further and the bid shall be rejected (DD/ Bankers cheque of a Scheduled bank should be in the favour of RSHS)  |
| <b>Instruction to Bidders for online tendering (e-tendering)</b> |   |
| 1  | The bidders who are interested in bidding shall participate through e bidding system of <a href="http://eproc.rajasthan.gov.in">http://eproc.rajasthan.gov.in</a> .   |
| 2  | <p>Bidders who wish to participate in this tender will have to register on <a href="http://eproc.rajasthan.gov.in">http://eproc.rajasthan.gov.in</a>. (bidders registered on <a href="http://eproc.rajasthan.gov.in">http://eproc.rajasthan.gov.in</a>. before 30-09-2011 needs to registered again). To participate in online tenders. Bidders will have to procure Digital Signature Certificate (type II or type III) as per Information Technology Act-2000 using which they can sign their electronic bids. Bidders can procure the same from any CCA approved certifying agency I.e. TCS, safecrypt, Ncode etc. or they may contact e-Procurement Cell, Department of IT &amp; C, Government of Rajasthan for further assistance. Bidders who already have a valid Digital Certificate need not procure a new Digital Certificate.</p> <p>Contact No: 0141-4022688 (Help desk 10 am to 6 pm on all working days)<br/>e-mail: <a href="mailto:eproc@rajasthan.gov.in">eproc@rajasthan.gov.in</a><br/>Address : e-Procurement Cell. RISL, Yojana Bhawan, Tilak Marg, C-Scheme, Jaipur</p> |

|   |   |
|---|---|
| 3 | Bidder shall submit their offer on-line in Electronic formats both for technical and financial proposal, however D.D. for Tender Fees, Processing Fees and E.M.D. should be submitted manually in the office of Tendering Authority by 1:00pm on 06.03.13 and scanned copy of D.D. should also be uploaded along with the online bid. |
| 4 | Before electronically submitting the tenders, it should be ensured that all the tender papers including conditions of contract are digitally signed by the tenderer.  |
| 5 | Training for the bidders on the usage of e-Tendering System is also being arranged by RISL on regular basis. Bidders interested for training may contact e-Procurement Cell. RISL for booking the training slot.  |
| 6 | Bidders are also advised to refer "Bidders manual" available under "Downloads" section for further details about the e-tendering process  |

### IMPORTANT DATES

|   |  |
|---|--|
| Notice inviting tender published in newspapers                              | 29.01.13   |
| Download of RFP by prospective bidders                                      | Downloadable from 30.01.13 to 05.03.13 up to 6pm from DIPR website: <a href="http://www.dipronlie.org">www.dipronlie.org</a> , <a href="http://www.eproc.rajasthan.gov.in">www.eproc.rajasthan.gov.in</a> and departments website : <a href="http://www.rajswasthya.nic.in">www.rajswasthya.nic.in</a> |
| Pre-Bid Conference  | 11.02.13 at 3.00pm   |
| Cost of RfP document  | Rs. 10000/- by demand draft in favor of Rajasthan State Health Society, payable at Jaipur (Non refundable)   |
| Last date & time for submission of electronic Bid (the "Proposal Due Date") | Date: 06-03-13 till 01:00 PM   |
| Date, time and place of opening of Proposal and presentation                | a) For Technical Proposal (Part A):<br>On line Opening of tender: 06-03-13 at 3:00 PM<br>b) Financial Proposal (Part B): Will be announced on line after opening of Technical bid.   |
| Issue of Letter of Intent (LOI)   | Within 15 days of opening of Financial Bid   |
| Signing of management Agreement   | Within 30 days of acceptance of LOI  |

## QUALIFICATION REQUIREMENTS

The Bidder can be a Company (Bidding Company) or a Registered Society or Proprietorship firm or a Partnership firm (Registered) or a Consortium of Companies (Bidding Consortium) with one of the Companies acting as the Lead Member of the Bidding Consortium. Short listing of Bidder will be based on meeting the Qualification Requirements as specified below:-

### **Who are Eligible for Participation**

- (i) Companies incorporated under the Company's Act, 1956 are eligible on standalone basis or as a part of the bidding consortium.
- (ii) A foreign company can also participate on standalone basis or as a member of consortium at RfP stage. But before signing the agreement it will have to form an Indian Company registered under the Company Act, 1956.
- (iii) Successful Companies can also execute the project through a Special Purpose Vehicle (SPV).
- (iv) Societies registered under Societies Act as well as Income Tax Act, 1961.
- (iv) Proprietorship firm,
- (v) Partnership firm (Registered)

Note- Limited Liability Partnership (LLP) is not eligible for participation in this bid.

In case of **Consortium**, there should be a formal agreement between the members accepting severe and joint responsibility for implementing the project. Reference of the lead member and percentage of holding of each in the consortium should also be given.

- Further, in case of consortium, if the project is awarded, they shall incorporate Special Purpose Vehicle (SPV) to be registered under Companies Act 1956 for entering into an agreement with the government (Project authorities).
- The key personnel, as given by the bidder in the technical proposal should not change during the tenure of the contract, without prior approval of the Government.
- In case the applicant is a consortium of two or more companies the proposal shall be signed by the duly authorized signatory of the lead member and shall be legally binding on all the members of the Consortium for the execution and completion of the Project.
- The proposals shall contain the information about percentage holding of each member, consortium agreement, financial statements and other documents as required for each of the member of the Consortium.

- The bidder shall possess experience in computer telephony integration with the ability to log calls with Geographical information System with GPRS integrated Ambulance monitoring system and software components to operate the hardware of the present project.
- Bidder should have at least 2 (two) years of experience in the operation of Pre-Hospital “Emergency Response Services” popularly known as “108-Ambulance Service Project” with a minimum fleet of 150 equipped ambulances supported by a control room, with a call centre set up by the entity/bidder/applicant.
- Certificates from the organizations to whom services have been provided in past needs to be submitted along with the proposal.
- An affidavit to the effect that the bidder has not been blacklisted in the past by any of the State Governments across the country and that he will not form any coalition with any other bidder.
- Bidder should have ability to train the personnel to be employed for implementation of the project.

**Technical Capacity:**

The Bidder should have at least two years of experience of operating and maintaining a minimum fleet of 150 equipped ambulances supported by a centralized call centre of at least 60 seats set up by the Bidder.

**Financial Capacity:**

The Bidder should have net worth more than Rs 20 (twenty) crores and demonstrate annual turnover/ gross receipts in this segment of at least Rs.10 (ten) Crores in each of the last 3 (three) financial years.

**Note:** For the Qualification Requirements, if data is provided by the Bidder in foreign currency, equivalent rupees of Net Worth will be calculated using bills selling exchange rates (card rate) USD / INR of State Bank of India prevailing on the date of closing of the accounts for the respective financial year as certified by the Bidder’s banker.

For currency other than USD, Bidder shall convert such currency into USD as per the exchange rates certified by their banker prevailing on the relevant date and used for such conversion.

(If the exchange rate for any of the above dates is not available, the rate for the immediately available previous day shall be taken into account)

**Calculation of Net Worth :**

Net Worth

= Paid up Share capital (in case of companies) which includes:

1. Paid up Equity share capital; and
2. Fully, compulsorily and mandatorily convertible Preference Shares; and

### 3. Fully, compulsorily and mandatorily convertible Debentures

- Note: a) In case of Registered societies, the Corpus Fund and Capital Fund  
b) In case of Proprietorship firm / Partnership firm the Capital reflecting in the Audited Balance Sheet

Add: Free Reserves

(Including Share Premium provided it is realized in Cash or Cash equivalents but excluding Revaluation Reserve if any)

In case of Proprietorship firm / Partnership firm, the Credit balance of Reserve and Surplus or by whatever name called as appearing in the Balance Sheet

Subtract: Intangible Assets

Subtract: Miscellaneous Expenditures to the extent not written off and carry forward losses.

(iii) For the purposes of meeting financial requirements, only unconsolidated audited annual accounts shall be used. However, audited consolidated annual accounts of the Bidder may be used for the purpose of financial requirements provided the Bidder has at least twenty six percent (26%) equity in each Company whose accounts are merged in the audited consolidated accounts and provided further that the financial capability of such companies (of which accounts are being merged in the consolidated accounts) shall not be reconsidered again for Net worth.

- (iv) **Existing Companies:** - The computation of Net Worth shall be based on unconsolidated audited annual accounts of the company. For the purpose of the computation of Net Worth, the last three financial years shall be considered. The Bidder would thus be required to submit annual audited accounts for the last three financial years (or if the period of existence of the Company is less than three years, then starting from the year of incorporation) , 2009-10 , 2010-11 and 2011-12 (or calendar year , 2009,2010 and 2011 or the accounting years as adopted by the Company and acceptable as per the laws of the respective Country) while indicating the year which should be considered for evaluation along with a Net Worth certificate from a Chartered Accountant to demonstrate the fulfilment of the criteria as on last day of the concerned Financial Year. . **Net Worth of Directors will not be considered for computation of Net Worth requirement in Financial evaluation.**

In case of existing Companies / Consortium, the Net Worth criteria can also be met as on day more than seven days prior to the last date of submission of response to RfP by the bidding Companies / Consortium. To demonstrate fulfilment of the criteria, the Bidder shall submit a certificate from a Chartered Accountant certifying the availability of Net Worth on the date more than seven days prior to submission in response to RfP. This should be submitted along with the Proposal including certified copy of Balance Sheet, Profit & Loss Account, Schedules and Cash Flow statement supported with the Bank Statements.

- (v) **Newly Incorporated Companies**:- For a newly incorporated Company/ Consortium relying solely on its own credentials, where the annual account has not been prepared, the Net Worth criteria should be met as on day more than seven days prior to the last date of submission of response to RfP by the bidding Companies / Consortium. To demonstrate fulfilment of the criteria, the Bidder shall submit a certificate from a Chartered Accountant certifying the availability of Net Worth on the date more than seven days prior to submission in response to RfP. This should be submitted along with the Proposal including certified copy of Balance Sheet, Profit & Loss Account, Schedules and Cash Flow statement supported with the Bank Statements.
- (vi) If the response to RfP is submitted by a Consortium, the financial requirement shall be met individually and collectively by all the Members in the Bidding Consortium in which case the financial requirement to be met by each Member of the Consortium shall be computed in proportion to the equity commitment made by each of them in the Project Company (Board resolutions for such commitment to be enclosed). For computation of Net Worth of members methodology as provided above shall be followed. Any Consortium, if selected, shall, for the purpose of operation and maintenance of ambulances equipped with man and machine, **incorporate a Project Company (SPV) with equity participation by the Members in line with consortium agreement before signing the agreement with RSHS (NRHM)** i.e. the Project Company incorporated shall have the same Shareholding Pattern as given at the time of RfP. This shall not change till the signing of agreement and the percentage of Controlling Shareholding (held by the Lead Member holding more than 50% of voting rights) shall not change from the RfP up to One Year after the commencement of agreement. However, in case of any change in the shareholding of the other shareholders (other than the Controlling Shareholder including Lead Member) after signing of agreement, the arrangement should not change the status of the Controlling Shareholder and of the lead member in the Project Company at least up to one year after the commencement of agreement. Further, such change in shareholding would be subject to continued fulfillment of the financial and technical criteria, by the project company.
- (vii) In case, any Company is selected for the Project, the company will have to meet the total Net Worth requirement by infusing the same in the Project Company and submit the required proof like bank statements and CA certificate for the same before entering into agreement.

Notes:

- (i) The Bidder may seek qualification on the basis of financial capability of its Parent and / or its Affiliate(s) for the purpose of meeting the Qualification Requirements.
- (ii) The Individual firms and Partnership firms shall have to submit a CA audited / CA certified Balance Sheet and other financial statements for evaluation purposes.
- (iii) Where the financially evaluated company is not the Bidding Company or a member of a bidding consortium, as the case may be, the Bidding company or a member shall continue to be an affiliate of the financially evaluated company till completion of the Project.
- (iv) It is further clarified that a Parent Company can be a foreign company and it can hold equity as permitted under the RBI/ FEMA guidelines in the bidding company. Once selected, the net worth has to be brought into the bidding company as per RfP before signing the Agreement.
- (v) The financial strength of the parent / ultimate parent/ an affiliate can be taken for calculation of net worth for qualifying at the time of submission of RfP, but before signing of Agreement the required net worth is required to be infused in the company registered in India, which will be known as "Project Company".
- (vi) In case the strength is drawn from parent / ultimate parent / affiliate, copy of Board resolution as per Annexure 3A authorizing to invest the committed equity for the project company / consortium is to be submitted with RfP along with an unqualified opinion from a legal counsel of such foreign entity stating that the Board resolution are in compliance with applicable laws of the countries' respective jurisdiction of the issuing company and the authorization granted therein are true and valid.
- (vii) Only Assets forming part of the Audited Balance sheet shall be considered for arriving at the Net worth of the entity. No intangible assets will be considered for arriving at the net worth.
- (viii) In case of land / any other asset, only the book value, as per the Audited Balance Sheet, will be considered.
- (ix) The value of land / any other assets will not be revalued for calculating net worth. Any reserve created due to this shall not be counted for calculating net worth.
- (x) No commitment letters from investment companies will be considered as part of net worth for qualifying requirement. Similarly any form of loan to company or securitized funding will not be part of the net worth.
- (xi) Guarantee / Bond submitted by foreign companies must be submitted through Banks having branches in India / correspondent Banks in India and such Bank Guarantee issued by foreign banks should be endorsed by the Indian Branch of such foreign Bank. In case of claim on Bank guarantee, same shall be paid by the Indian branches of such foreign Bank.

- (xii) In a foreign company in case of calendar year instead of financial year is used for compilation of accounts, then the same shall be used.
- (xiii) In a bidding consortium, each share holding company needs to satisfy the net worth requirement on a pro-rata equity commitment basis as per Annexure 13A.
- (xiv) CA Certified copies of all the Balance Sheets whether of Parent / Affiliate from where the financial strength is drawn has to be submitted along with RfP.
- (xv) The company having the maximum number of share (having voting rights) has to be a lead member having the shareholding of more than 50% in the Bidding Consortium.
- (xvi) Maximum 5 companies can join the consortium and any such member shall not have less than 10% share in the Consortium.
- (xvii) In case of Unlisted companies the infusion of Share premium shall be supported by self certified copy of Form 2 and ROC receipt of deposition of the same.
- (xviii) Foreign companies shall ensure compliance of RBI/FEMA guidelines for bringing investment / equity in India.
- (xix) Failure to comply with the aforesaid provisions shall make the bid liable for rejection at any stage.

**The bidder shall inform himself fully that:**

The bidder shall be deemed to have been satisfied himself as to the scope of the task as well as all the conditions and circumstances affecting implementing of the Project. Should he find any discrepancy in the RFP document including terms of reference, he should submit his issue/question in writing at least a week before the Pre-Bid Conference.

**Pre-Bid Conference**

All the prospective bidders: are invited to attend the Pre-Bid Conference to be held on 11.02.13 at 3:00pm Directorate Conference Hall, Ground floor, Main Building, Swasthya Bhawan, Tilak Marg, Jaipur (Rajasthan) – 302005

1. Issues relating to the project/RfP received in writing within the stipulated time as mentioned here above and other points raised during discussions in the conference will be scrutinized during the Pre- Bid conference. The Project Authority shall endeavor to clarify such issues during the discussions.
2. However, at any point of time prior to the date for submission of RFP, RSHS (NRHM) may, for any reason, whether at its own discretion or in response to the discussions/ clarifications, modify the RFP document by issuance of an addendum to be published on e-rocurement website [www.eproc.rajasthan.gov.in](http://www.eproc.rajasthan.gov.in). The addendum would also be placed on the DIPR website: [www.dipronlie.org](http://www.dipronlie.org), and departments website : [www.rajswashya.nic.in](http://www.rajswashya.nic.in). Such addendum will become an integral part of the RFP document.

## **Evaluation of the Proposals**

The proposals received online up to due date and time as mentioned in the NIT will only be considered for evaluation.

At the first instance Technical Part shall be opened and evaluated. Financial Part of only those bidders will be opened who are found substantially in order of the RFP stipulations. To facilitate evaluation, RSHS (NRHM) may, at its sole discretion, seek clarifications in writing from any bidder.

### **Method for submission of Proposals-**

(a) The proposal shall be submitted online in two parts -

(1) Part A – Technical Proposal as per RFP Annexure 17

(2) Part B – Financial Proposal as per the format set out in RFP Annexure 2 and Annexure 3

(b) The Proposal shall be digitally signed by the applicant/authorized representative of the applicant on each page. In case the applicant is a consortium of two or more companies the proposal shall be signed by the duly authorized signatory of the lead member and shall be legally binding on all the members of the Consortium.

The proposals shall contain the information required for each of the member of the Consortium.

(i) Power of Attorney for signing of bid: The bidder should submit a Power of Attorney as per the format in **Annexure-5**, authorizing the signatory of the bid to commit on behalf of the bidder.

(ii) Power of Attorney for Lead Members of Consortium: In case the bidder is a Consortium, the members thereof should furnish a Power of Attorney in favour of the Lead Member in the format in **Annexure-6**

## EVALUATION CRITERIA

### Content of the Proposal

#### **I. PART A (Technical Proposal)**

This part of the proposal i.e. Part A shall contain following documents

1. Duly filled up Application Form (as per **Annexure-1**).
2. Covering Letter cum Project Undertakings as per **Annexure-4**.
3. Earnest Money Deposit (EMD) of Rs. 50 Lacs (Rs. Fifty Lacs only) in form of a account payee DD/Pay order/Banker's Cheque of a Scheduled bank in favor of RSHS, Payable at Jaipur.
4. The Bidder is expected to provide details of its registration as per **Annexure-11** and furnish documents to support its claim.
5. A summary of relevant past experience should also be provided as per **Annexure-11**.
6. Details of all information related to past experience and background should describe the nature of work, name & address of client, date of award of assignment, size of the project etc. as per **Annexure-12**.
7. Power of Attorney authorizing the signatory for signing the proposal on behalf of the proposer/Bidder as per **Annexure-5**.
8. In case of consortium, original Power of attorney for signing of application by the lead member as per **Annexure-6**.
9. Letter of Exclusivity (in case of application by Consortium) as per **Annexure-8**.
10. Covering letter and brief profile of the bidder.
11. Proposed organizational structure and Curriculum Vitae (CV) of key personnel to be involved in the operation of the project
12. Bidders should have at least two years experience of running the software and to manage and operate the hardware of the existing project. The software installed in the project by the service provider would become the property of the Government of Rajasthan.
13. Detailed strategy for performance monitoring and evaluation, quality assurance and internal control for successful and efficient implementation of the Emergency Response Services.
14. Affidavit certifying that Entity/promoters/Directors/members of an entity are not blacklisted as per annexure 10A.
15. Affidavit of Declaration (Anti Collusion Certificate) mentioning that the applicant/consortium will not collude with the other applicants as per **Annexure-10B**
16. Certificates of relevant experience issued by government or any other organizations by a competent authority.
17. Technical Proposal of all the Applicants will be evaluated based on appropriate marking system. To qualify the bidder should obtain minimum of 70 marks for opening of the financial bid. The categories for marking and their respective weightage are as under:

| SNo | CRITERIA   | Max. Marks | Marks Obtd. |
|-----|--|------------|-------------|
| 1   | <b>EXPERIENCE OF THE FIRM</b><br>1. No. of years in operation of Emergency Medical Ambulance Service.<br>2. Experience in handling similar projects with government.<br>3. Experience in Computer Telephony Integration with the ability to log calls with GPS (Global Positioning System) incorporated in GIS (Geographical Information System) with GSM/GPRS (Global System for Mobile Communication/General Packet Radio Service) integrated Ambulance monitoring and tracking system | 40         |             |
| 2   | <b>EXPERIENCE OF KEY PERSONNEL</b><br>1. Qualifications<br>2. Relevant Experience  | 30         |             |
| 3   | <b>APPROACH AND METHODOLOGY</b><br>1. Project Implementation Plan<br>2. Innovations and Understanding<br>3. Indicators, methods and procedure proposed for performance evaluation and monitoring   | 20         |             |
| 4   | <b>TECHNICAL PRESENTATION</b><br>(BEFORE THE DEPARTMENT EVALUATION COMMITTEE)  | 10         |             |
|     | <b>TOTAL</b>   | <b>100</b> |             |

**Note:** -An undertaking (annexure 1A) shall be submitted that the bidder has read all the contents of the RfP and all subsequent amendments to this RfP and agrees to them in toto.

### III. PART B (Financial Proposal)

1. Documents/ Certificates/ evidence of fulfilling the eligibility criteria including audited financial statements for the last 3 (three) years i.e 2009-10, 2010-11 & 2011-12
2. The Bidder should submit details of financial capability for the last three (3) financial years as per **Annexure-13**. The Qualification Bid should be accompanied with the Audited Annual Reports including all financial statements of the Bidder. In case of a Consortium, Audited Annual Reports of all the Members of Consortium should be submitted.
3. In case of any discrepancy between figures and words in the financial proposal, the one described in words shall be adopted.
4. The Bidder shall be paid on per ambulance per month basis exclusive of all taxes. **(Annexure 3)**.

#### **Number of Proposals**

A bidder is eligible to submit only one bid for the project. A bidder company bidding individually or as a member of a Consortium shall not be entitled to submit another bid either individually or as a member of any Consortium, as the case may be.

### **Bid Validity period**

The Proposal shall remain valid for 180 days after the date of opening of Technical bid. Any Proposal, which is valid for a shorter period, shall be rejected as non-responsive. However the same can be extended with the mutual consent and acceptance of the bidder.

### **Cost of Proposal**

The Applicants shall be responsible for all of the costs associated with the preparation of their RfP and their participation in the Selection Process. Department will neither be responsible nor in any way be liable for such costs, regardless of the conduct or outcome of the Selection Process.

### **Acknowledgement by Applicant**

- a) It shall be deemed that by submitting the Proposal, the Applicant has: -
- (i) Made a complete and careful examination of the RFP;
  - (ii) Received all relevant information requested from Department.
  - (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 Department or relating to any of the matters stated in the RFP Document.
  - (iv) Satisfies himself/herself about all the 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 any Conflict of Interest; and
  - (vi) Agreed to be bound by the undertaking provided under and in terms hereof.
- b) The Department shall not be liable for any omission, mistake or error on the part of the Applicant 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 Department.

### **Language**

The Proposal with all accompanying documents (the “**Documents**”) and all Communication in relation to or concerning the Selection Process shall be in English language and strictly on the forms provided in this RFP.

### **Proposal Due Date**

Last date & time for submission of electronic Bid (the “Proposal Due Date”): Date: 06-03-13 till 01:00 PM

### **Pre-Bid Conference**

(a) Pre-Bid Conference of the Applicants shall be convened at Directorate Conference Hall, Ground floor, Main Building, Swasthya Bhawan, Tilak Marg, Jaipur (Rajasthan) – 302005–on 11.02.13 at 3pm

(b) During the course of Pre-Bid Conference, the Applicants will be free to seek clarifications and make suggestions for consideration of Department. The Department shall endeavor to provide clarifications and such further information as it may, in its sole discretion, consider appropriate for facilitating a fair, transparent and competitive Selection Process.

### **PROPOSAL/BID Opening**

Online opening of technical Bids: 06.03.13 at 3pm

### **Modification/withdrawal of the proposal**

Modification/substitution / withdrawal by the bidder in the proposal is permitted before 1pm on 06.03.13.

### **The bidders should note the following:**

- 1) That the incomplete proposals in any respect or those that are not consistent with the requirements as specified in this Request for Proposal Document or those that do not contain the Covering Letter or any other documents as per the specified formats may be considered non-responsive and liable for rejection.
- 2) Strict adherence to formats, wherever specified, is required.
- 3) All communication and information should be provided in writing and in English language.
- 4) All communication and information provided should be legible. The financial proposals given in figures should be mentioned in words also.
- 5) No change in/or supplementary information shall be accepted once the proposal is submitted. However, the RSHS (NRHM) reserves the right to seek additional information and/or clarification from the Bidders, if found necessary, during the course of evaluation of the proposal. Non submission, incomplete submission or delayed submission of such additional information or clarifications sought by RSHS (NRHM) may be a ground for rejecting the proposals.
- 6) The Proposals shall be evaluated as per the criteria specified in this RfP Document. However, within the broad framework of the evaluation parameters as stated in the RfP, RSHS (NRHM) reserves the right to make modifications to the stated evaluation criteria, which would be uniformly applied to all the Bidders.
- 7) The Bidder should designate one person ("Contact Person" and "Authorized Representative and Signatory") authorized to represent the Bidder in its dealings with RSHS (NRHM). This designated person should hold the Power of Attorney and be authorized to perform all tasks including but not limited to providing information, responding to enquiries. The Covering Letter submitted by the Bidder shall be signed by the Authorized Signatory and shall bear the stamp of the firm/consortium.
- 8) Department/GoR/RSHS (NRHM) reserves the right to reject any or all of the Proposal without assigning any reason whatsoever.
- 9) Mere submission of information does not entitle the Bidder to meet an eligibility criterion. RSHS (NRHM) reserve the right to vet and verify any or all information submitted by the Bidder as well as right to reject.

10) If any claim made or information provided by the Bidder in the Proposal or any information provided by the Bidder in response to any subsequent query by Department of Health and Family Welfare, is found to be incorrect or is a material misrepresentation of facts, then the Proposal will be liable for rejection and EMD shall be forfeited. Mere clerical errors or bona fide mistakes may be treated as an exception at the sole discretion of RSHS (NRHM) if adequately satisfied.

11) The Bidder shall be responsible for all the costs associated with the preparation of the Proposal and any subsequent costs incurred as a part of the Bidding Process. RSHS (NRHM) shall not be responsible in any way for such costs, regardless of the conduct or outcome of this process.

12) In every specific case, where the Bidder is constrained by statute/law from fulfilling any specific provision of this document, the Bidder is encouraged to contact Mission Director, NRHM, Rajasthan.

13) The RSHS (NRHM) may, in exceptional circumstances and at its sole discretion, revise the time schedule (extension in time) by issuance of addenda. Communication of such extension to the persons who purchased the RFP document shall be made by National Rural Health Mission.

#### **Financing of the Project:**

Financing of the project shall be on reimbursement basis in accordance with the provision of the agreement. Claims or reimbursements for operational expenditure shall be payable by the respective District Health Societies on monthly basis on submission of duly completed statement of claim by the service provider.

#### **Investment and Ownership:**

All movable and immovable assets created in the project will be the property of RSHS (NRHM), Government of Rajasthan. The assets will have to be handed over to the Government at the end of the contract period in well maintained/ working condition/ satisfactory "Operational status".

**Part- A4**  
**TERMS OF REFERENCE**

**1. Project Profile-**

The scheme was formulated by Medical & Health Department with financing from RSHS (NRHM) & State Plan. Presently 464 ambulances are running across the State under the scheme. Additional 227 Ambulances are expected to be added during the financial year 2013-14. Bidder may thus, take into account, a fleet of 691 ambulances to be operated during the year 2013-14. Centralized Call Centre is presently operational in SIHFW building at Jhalana Dungri, Jaipur and approximately 145 CO/DOs are working in this call center.

**2. Objectives & Goals of the Project**

- To provide comprehensive Emergency Response Services to the people of Rajasthan.
- Improve the access to medical & health care, police and fire services, particularly attending the emergency situations relating to pregnant women, neonates, parents of neonates, infant and children in situations of serious ill-health and all other emergencies in the general population; and thereby assist the State to achieve the critical Millennium Development Goals in the Health sector, i.e. reduction of Infant Mortality Rate, and Maternal Mortality Ratio, and in general reduce the vulnerability of the people by providing access to Emergency Response Services.
- The services to be coordinated through an existing 24x7 Call Centre with a common toll free call number 108 and GPS networking with the Ambulances.
- Computer telephony integration with the ability to log calls with GPS (Global Positioning System) incorporated in GIS (Geographical Information System) with GSM/GPRS (Global System for Mobile Communication/General Packet Radio Service) integrated Ambulance monitoring and tracking system, call management, performance monitoring and reporting. The movement of every ambulance should be able to be tracked through GPRS for every trip of the Ambulance.
- Taking over of presently fully operational 108 Ambulance project along with all assets and centralized Call Center based at SIHFW, Jaipur.
- Bidders are expected to bring their own software to manage and operate the hardware of the existing project, which shall ultimately be surrendered to the Government at the end of the contract with transfer of license to use by the Government.
- Existing Manpower including Pilot, EMT, Co/DOs working in the implementation of the Project shall be given priority as far as possible.

**3. Expected Outcomes (Scope)**

- To provide 24x7 pre-hospital emergency transportation care (Ambulance) services across the State within Permissible Response Time of Urban- 20 min, Rural- 30 min and Desert (Bikaner, Barmer & Jaisalmer other than urban areas)- 40 min of the call being received in the Call Centre.

- The bidder to ensure that no discontinuation/interruption in the services occurs and no call is left unattended even while taking over / handing over of the existing project responsibilities.
- The bidder would ensure uninterrupted functioning of the call center 24x7 and overall Emergency Response Services provided by the project.
- Operationalize/ Manage/ Maintain existing as well as Ambulances which may be included in the fleet.
- Training and Deployment of adequate qualified personnel as per requirement of the project in Head Office, field staff, Call center employees, Emergency Management Technicians, Drivers and other required staff for running the Project efficiently as per Annexure 16
- Operate and manage further scaling up of the project.

#### **4. Procurement**

1. The Government may procure and provide additional Ambulances as and when needed. In the near future 227 Ambulances are in the process of procurement.
2. Non-consumable items shall become assets of the project which will have to be handed over to the Government on termination/completion of the project. Proper records of such assets will be maintained in the project accounts by the bidder.
3. Medical/non medical consumables to be made available in the Ambulances at all times as per **Annexure-15**. There shall invariably be a conspicuous inscription on all such consumables as "Government supply Not for Sale".
4. IEC activities of the project shall be undertaken by Director (IEC), Medical & Health Department.

#### **5. Responsibility of the service provider**

- 1) Operation and management of the Emergency Response Services in the State of Rajasthan.
- 2) Provide technological, leadership, administrative and managerial support in open and transparent manner to produce mutually agreed outcomes.
- 3) (a) Performance of the activities and carrying out its obligations with all due diligence, efficiency and economy in accordance with the generally accepted professional techniques and practices.  
(b) Observance of sound management practices, employing appropriate advanced technology and safe methods

(c) In respect of any matter relating to the agreement, always act as faithful partner to the Government and shall all times support and safeguard the Government's legitimate interests in any dealing with the contracts, sub-contracts and third parties.

4) Shall not accept for his own benefit any commission, discount or similar payment in connection with the activities pursuant to discharge of his obligations under the agreement, and shall use his best efforts to ensure that his personnel and agents, either of them similarly shall not receive any such additional remuneration.

5) Bidder is required to observe the highest standard of ethics and shall not use 'corrupt/fraudulent practice'. For the purpose of this provision, 'corrupt practice' means offering, giving, receiving or soliciting anything of value to influence the action of a public official in implementation of the project and 'fraudulent practice' means misrepresentation of facts in order to influence implementation process of the project in detriment of the Government.

6) Recruit, train and position qualified and suitable personnel for implementation of the project at various levels. The staff so engaged/recruited/appointed shall be exclusively on the pay rolls of the bidder and shall under no circumstances this staff will ever have any claim, whatsoever for appointment with the Government. Bidder shall not assign or sublet his contract or any substantial part thereof to any agency.

7) The bidder shall be fully responsible for adhering to the provisions of various laws applicable on them including **Labour laws and Minimum Wages Act** . In case the bidder fails to comply with the provisions of applicable laws and thereby any financial or other liability arises on the Government by Court orders or otherwise, the bidder shall be fully responsible to

compensate/indemnify to the Government for such liabilities. For realization of such damages, Government may even resort to the provisions of Public Debt Recovery Act or other laws as applicable on the occurrence of such situations.

8) The Bidder shall be required to maintain consumption register of medical and non-medical consumable items in each Ambulance in the prescribed format duly approved by the department/ Government.

9) Assist the Government when required in accreditation of hospitals in the State and such other matters from time to time.

10) Conduct training programs for paramedics, doctors and other academic activities (workshops/seminars ) as required for governmental doctors and others on the request of the Government (Government to bear expenses on such workshops/ seminars ).

11) Strive for continuous improvement in management of Emergency Response Services and shall ensure proper and timely monitoring of the services.

12) Strict adherence to the stipulated time schedules for various activities.

13) Operation and Maintenance of fully equipped all Ambulances as per the vehicle manufacturers maintenance schedules throughout the life of the agreement to prevent any structural or functional deterioration of the assets handed over to the bidder according to the guidelines laid down by the Government.

14) Ensuring 24x7 services at the Call Centre.

**15) To maintain 99.99 per cent up time of the complete integrated IT based system along with real-time tracking otherwise penalty will be imposed.**

16) Ensuring proper and timely monitoring of the services.

17) Recruit and train human resource required for existing as well as the anticipated expansion of the project. Training norms/ courses for EMTs/ Pilots/technical personnel shall be duly approved by the Government.

18) To maintain records and submit various reports and information within the stipulated timeframe as desired by the Mission Director, National Rural Health Mission as well as District wise reports to respective GoR/RSHS/District Health Society.

19) The bidder shall be subjected to periodical System and financial Audit by a Chartered Accountant as appointed by NHRM/RSHS/GoR

**Infrastructure:** The company is required to maintain the building and other infrastructure throughout the life of the agreement to prevent the structural and functional deterioration that can impede the service delivery as years pass by. The company shall also ensure that the ownership of government of Rajasthan in assets created out of government fund is protected.

**Operation and Maintenance:** During the "Agreement" Period, the Service Provider shall operate and maintain the Project Facilities in accordance with this "Agreement", comply with the provisions of this "Agreement", Applicable Laws and Applicable Permits, and conform to Good Industry Practice. The obligations of the Service Provider hereunder shall include:

(a) Providing round-the-clock response to medical emergencies as per the Performance Standards / SOP defined and forming part of the "Agreement" during normal operating conditions;

(b) Carrying out periodic preventive maintenance of the Project Facilities;

(c) Undertaking routine maintenance to ensure uninterrupted operation of the Project Facilities;

(d) Undertaking major maintenance such as ambulance repairs (as per vehicle manufacturers recommended maintenance schedules) and refurbishment of IT Infrastructure and other equipments;

(e) Operation and maintenance of all communication, control and administrative systems necessary for the efficient operation of the Project Facilities;

(f) The Service Provider shall maintain, in conformity with Good Industry Practice, all ambulances, equipment, software, building and furniture forming part of the Project Facilities.

The Service Provider shall not ground any Ambulance for undertaking maintenance/service or repair works except with the prior written approval of the Department. Such approval shall be sought by the Service Provider through a written request to be made at least 7 (seven) days before the proposed grounding of a particular Ambulance and shall be accompanied by necessary particulars thereof, such as the exact time period/time-slot required for grounding/serving of a particular Ambulance.

**Statutory Compliance:** the Agency is responsible for the compliance of the statutory requirement under any law in respect of any asset and operation. The agency shall be held responsible in case of any penalty, loss or other legal consequences arising out of non-compliance.

**Monitoring & Evaluation:** Develop and implement a full proof monitoring and evaluation system to ensure efficiency in capacity utilization. Key indicators need to be put in place for looking at equity of access, quality of care, volume of utilization and wasteful consumption.

**Standard Operating procedures :** RSHS (NRHM) has prepared the Standard Operating Procedure, to run the “Emergency Response Services” popularly known as “108 Ambulance Service Project.

This SOP shall be binding on the bidder, non compliance of which will lead to deduction in the reimbursement of the operating expenses made to the company as defined under clause 10 Operational Parameter and Penalty Clauses. The RSHS (NRHM) reserves the right to terminate the contract in case of persistence of grave defaults in compliance of the SOP at the discretion of the RSHS (NRHM).

#### **6. Responsibility of National Rural Health Mission /RSHS/ Government of Rajasthan**

- 1) National Rural Health Mission /GOR shall provide appropriate assistance where required so as to benefit maximum people of Rajasthan.
- 2) Timely settlement of claims at the agreed terms in accordance with the provisions of the agreement. Claims shall be presented to District Health Societies and payment shall be made by the respective District Health Societies.
- 3) To provide space for stationing of the Ambulances at strategically located places across the State.
- 4) To lay down guidelines and finalize standard operating procedures within 3 months of signing of Agreement with the service provider for operation of the Ambulances services.
- 5) To conduct regular monitoring and evaluation of the project activities based on quantifiable indicators and reports received from the service provider.
- 6) Prescribe various formats for reporting progress of the project. Service Provider may submit its own reporting formats which can be used after due approval by the Government/RSHS
- 7) Commencement and duration of agreement will be for 2 years from the date of signing the agreement. The duration may be extended by 6 months maximum up to 2 years with mutual consent of both parties.

#### **7. Earnest Money Deposit & Security Deposit**

- (a) The bidder shall deposit Bid Security/Earnest Money Deposit (EMD) amounting to Rs 50 Lacs in the form of Banker’s Cheque/ Demand Draft of a Scheduled bank in favor of RSHS, Jaipur. Payable at Jaipur.
- (b) In the absence of the EMD, technical proposal of the bidder shall be rejected.

(c) The EMD shall be kept valid through the proposal validity period and would be required to be extended if so required by the department.

(d) The EMD shall be returned to unsuccessful bidders within a period of eight (8) weeks from the date of execution of the agreement with the successful bidder without any interest or claim whatsoever.

(e) The EMD shall be forfeited, without any right of claim of the bidder, if the bidder withdraws its proposal during the interval between the proposal due date and expiration of the proposal validity period of the "Emergency Response Services" popularly known as "108 Ambulance Service Project" in Rajasthan- Request for Proposal

(f) The bidder whose proposal is accepted and Award issued shall have to deposit Performance Security of an amount of Rs. 5.00 Crores along with signing of the agreement. Amount of EMD can be adjusted into the security deposit. Security deposit is for due performance of the agreement. Non submission of Performance security within the specified time shall also lead to forfeiture of the EMD.

(g) In case performance security is deposited in form of Bank guarantee (BG) of a Scheduled bank, then the same should be valid for 30 months from the date of signing of the Agreement.

**The Government in the following circumstances can forfeit the Security Deposit;**

(i) When any terms or conditions of the agreement are infringed or not complied with.

(ii) When the service provider fails in providing the services satisfactorily.

Notice will be given to the bidder/service provider with reasonable time before the earnest money / security deposit is forfeited.

**8. Financing of the Project:**

Financing of the project shall be on reimbursement basis in accordance with the provisions of the agreement. Claims/reimbursements are envisaged on monthly basis on submission of statements of claims by the service provider.

**9. Investment and ownership**

All moveable and immovable assets created in the project will be the property of RSHS (NRHM), Government of Rajasthan. Account of such assets shall be maintained properly. The assets will have to be handed over to the Government on completion/termination of the agreement in proper working condition.

In case of Ambulances, they have to be handed over in operative and road worthy condition along with the tools provided by RSHS (NRHM) in good condition; normal wear and tear is permissible. In case the Ambulance is found non road worthy then the ambulance will be repaired at the risk and cost of the Service provider.

## **10. Operational Parameter and Penalty Clauses**

1. **TRIP:** Trip refers to picking up patients / injured persons from point of location and dropping them at the nearest Government hospital and returning back (from Base location and back to base location). Calculation of "TRIP" will be done on the basis of distance travelled by the Ambulance as below:

| <b>No. of Km (s) travelled per vehicle</b> | <b>Trip count</b>              |
|--|--------------------------------|
| 1-5 Km                                     | 0.2 trip                       |
| 6-15 Km                                    | 0.5 trip                       |
| 16 Km to 30 Km                             | 0.5 +0.1 trip for every 3 Kms. |
| 31 Km to 70 Km                             | 1+0.1 trip for every 4 Kms     |
| 71 Km and 120 Km                           | 2+0.1 trip for every 5 Kms.    |
| 121 Km and above                           | 3+0.1 trip for every 6 Kms     |

For example if a vehicle runs for 28 km then the number of trips shall be calculated as follows:-

| <b>No. of Km (s) travelled per vehicle</b> | <b>Trip count</b>        |
|--|--------------------------|
| For the first 15 Kms                       | 0.5 trips                |
| And, for the remaining 13 Kms              | 0.1 trip for every 3 Kms |

Therefore, total number of trips will be  $\{0.5+ (0.1 \times 13/3\text{km})\}$ , which is equal to  $\{+0.5+(0.1 \times 4(\text{being rounded off to next decimal thus } 4.333 \text{ becomes } 5))\}$ .

The count of total trip in this case shall be = 1 trip.

2. **TRIP (Event calls):** In case of the ambulance is being used for events like religious fairs and festivals, police / army recruitments and if the ambulance is stationed at a particular place for one shift i.e. 12 hours then credit of 2 trips is admissible and in case the ambulance has been stationed round the clock i.e. Two shifts, then credit of 4 trips is admissible. In case the ambulance is used only for one shift and for the remaining time it is used for other emergency duties, then the credit would be given for its emergency operations which are again subject to maximum 5 trips. These two cannot be claimed simultaneously. It has to be either one shift or the actual emergency services which is maximum 5
3. trips (whichever is higher).
4. **Un availed trips:** If percentage of un availed trips to availed trips is more than 10%, then trip count of such trips in excess of 10% of the un availed trips will be made on the basis of 50 per cent of the criterion described in point 1 above.
5. **Definition of Average:** The average of 5 trips/Ambulance/ day will be calculated over a period of 1 month for each District.

- (a) The Agency (Service Provider) shall ensure that an average of 4 trips/day/Ambulance is achieved in the first 3 months of operation after fully taking over of the project (this is not applicable on subsequent launching of any new Ambulances in the fleet ); after which performance level of 5 Trips/Day/Ambulance is achieved. Other than this no call or emergency should be left unattended even after expected levels of minimum trips is achieved. In case this level of service is not achieved, then a proportionate deduction towards non-running of the vehicle shall be made from the claims which shall be 40 per cent of the bid price per ambulance. If the number of trip exceeds the specified limit of 5 trips per day calculated on monthly basis, in that case additional proportionate payment of 40%, of bid amount, towards running of the vehicle shall be paid.
- (b) In case of other defaults in services necessary action under terms of the agreement will be initiated in addition to imposition of penalty considering seriousness of the default. The fault shall be determined with reference to the outputs as mentioned at **Part A3 clause3** above and the penalty will be determined by a committee consisting of Principal Health Secretary, Medical & Health, Mission Director, National Rural Health Mission, Director (PH) & Project Director (NRHM).
- (c) The amount of penalty shall be recovered from the claims submitted by the service provider. In the absence of any claim, it can be recovered from security deposit also.
- (d) The Ambulances shall have minimum usable life as per GF&AR guidelines (government norms) whichever is later. No ambulances shall be due for replacement before the stated period from date of induction.
- (e) Service provider to ensure Comprehensive Insurance of the Ambulances for whole of the contract period.

| SNo | Description of Penalty   | Amount of penalty to be imposed  |  |
|-----|--|--|--|
| 1.  | Permissible Response Time :<br>Urban- 20 min<br>Rural- 30 min<br>Desert (Bikaner, Barmer & Jaisalmer other than urban areas)- 40 min | If the delay in Permissible Response Time exceeds 150 minutes cumulatively/ Ambulance/month then a penalty of 0.1% of the monthly "Bid Price" will be deducted for delay of every 10 minutes thereafter. |  |
| 2.  | Ambulance remains non operative over and above the maintenance schedule.   | 40% of the monthly bid price will be proportionately deducted for the number of days the Ambulance remains under maintenance over and above the "maintenance schedule" described below.                  |  |
| 3.  | Off road without permission from concerned authority   | Payment will be deducted of the monthly bid price/ Ambulance/ day proportionately for the number of days the ambulance has remained off road.  |  |
| 4.  | Any shortfall/ default found on inspection by RSHS (NRHM)/   | 1.Poor General cleanliness/ Ambulance body   | Penalty of Rs 500/- 1 <sup>st</sup> time for |

|    |   |  |   |
|----|---|--|---|
|    | authorized District representatives.  | <p>maintenance</p> <p>2. Hygienic storage of Medical/ non medical consumables</p> <p>3. Non availability of Medical/ non medical consumables as per the enclosed list at Annexure 15</p> <p>4. Non functioning of any Equipments</p> <p>5. Proper updated maintenance of log book, stock register, PCR record, vehicle maintenance record as prescribed by NRHM</p> <p>6. Non functioning of Air-conditioning of Ambulance</p> | every shortfall/default and subsequently Rs 1000/- / Ambulance (Individually for every shortfall/default) |
| 5. | Ambulances are not operational due to strike by Ambulance staff / management, non-payments, short of funds or any unacceptable reasons.   | Proportionate Deductions of the bid price will be made for the non operative period of the Ambulance along with additional penalty of 5% of the bid price/ Ambulance/ day.   |   |
| 6. | Submission of information desired by NRHM, GoR in stipulated time frame.  | Penalty of Rs 1000/- will be imposed for every default.  |   |
| 7. | If any GPS unit is frequently non-functional then replacement of such GPS units should be ensured within 2 days or else penalty will be imposed at the rate of Rs 1000/- per day per GPS unit from 1 <sup>st</sup> day onwards. |  |   |

**Maintenance Schedule:**

| S. No.              | Nature of complaint and nature of repair (to be verified and certified by the CMHO) | Tentative Up time Period |
|---------------------|---|--------------------------|
| <b>MINOR REPAIR</b> |   |                          |
| 1                   | Tyre Puncture   | No up time               |
| 2                   | Tyre Replacement (4 + 1)  | 4-6 Hours                |
| 3                   | Washing and Greasing  | 4 Hours                  |
| 4                   | Leaf Spring Failures  | 8 hours                  |
| 5                   | Complete suspension   | 2 Days                   |
| 6                   | Brake problem and repair  | 1 Day                    |

|                               |  |   |
|-------------------------------|--|---|
| 7                             | Engine and Gearbox Minor repair job                  | 1 Day   |
| 8                             | Engine overhauling                                   | 7 Days  |
| 9                             | Self Starter failures                                | 1 Day   |
| 10                            | Clutch Repair Job                                    | 1 Day   |
| <b>PREVENTIVE MAINTENANCE</b> |  |   |
| 11                            | Schedule Service                                     | 2 Days  |
| <b>MAJOR REPAIR</b>           |  |   |
| 12                            | Minor accident                                       | 1week   |
| 13                            | Major accidents                                      | 1 Month/ as per inspection report submitted by CM&HO office.  |
| 14                            | Refurbishment Minor                                  | 7 days  |
| 15                            | Refurbishment Major                                  | 1 Month (after permission). In case of new ambulance after 2 years.   |
| 16                            | Poor Parts availability in case of Tata Winger model | In case of non availability of parts, SERVICE PROVIDER will inform RSHS (NRHM) and it will be verified by concerning authority of RSHS (NRHM) who will verify the facts and accordingly time will be granted. |

If the vehicle remains off road for more than 2 days for Maintenance schedule as mentioned above then Supporting documents from the competent authority concerned CM&HO office will be required along with the monthly bills submitted by the Service Provider for payments.

Information should be given to the competent authority concerned CM&HO for the period for which the Ambulance remains off road/ non operative as per the maintenance schedule mentioned above, no penalty will be imposed but that particular Ambulance will not be included in the monthly averaging of Ambulances in that particular District.

#### **11. Software Requirements :**

1. To maintain the various information of Emergency Response Services (ERS) and Global Positioning System (GPS) should be fully computerized (with online login facility from DM&HS) and Comprehensive Data will be provided through online reports to DM&HS.
2. It should be efficient, scalable and transparent to assist the stake-holders of RSHS (NRHM) (at state/districts) for the better monitoring, management, planning and decision-making to ensure the effective delivery of ERS and real-time tracking of ambulances.
3. It should generate various required auto generated reports (online/offline/graphical/charts) which are downloadable/ exportable without manual intervention.
4. Conduct security audit of complete ERS system from hackers/ viruses/ malwares/ spywares with timely renewal of the security services (within 3 months) otherwise penalty will be imposed.

5. Application software, database structures, database, application user-interfaces, user guidelines, flow-charts, training manuals and other information should be provided to RSHS (NRHM) which will be the property of RSHS (NRHM). (within 1 month)
6. The administrative rights to amend/modify/change the application software, database structures should be under the control of NRHM.
7. The deployment of complete application software and database at the SIHFW, Jaipur with proper provision of Disaster Recovery (DR).
8. Change request mechanism including User Acceptance Test (UAT) for the timely incorporation of any new report (in MIS) so as to avoid frequent changes in the software.
9. Include provision of Query By form in the software for the generation of any kind of dynamic reports (downloadable/ exportable).
10. Appropriate user-rights for generating reports and viewing the information should be provided to the department to generate information from the system on real-time basis with quality, completeness and relevancy of information in the various reports.
11. GIS mapping of ambulances with proper color-coding (i.e. Moving: GREEN, Stopped-On road: RED, Stopped-Off road: BLACK) and information (i.e. vehicle registration no., driver name, vehicle contact no., speed, status, reason for Off-road etc)
12. Various MIS reports (detailed/summary) should be generated through GPS.
13. Mechanism to auto-email the auto-generated daily and monthly reports to NRHM. daily and monthly reports (**annexure 14**) should be auto-generated without manual intervention
14. Submission of monthly backup of database by 3rd of every month to the NRHM and the support to restore the backup and view/search information.
15. Regular AMC of hardware/ software/ security / communication channels for the smooth operations of the ERS and GPS.
16. Hand-over of complete operational system at the end of the project period/ termination/ discontinuation services.
17. Ensure adequate number of call queues so that calls do not remain unattended or dropped without entering into the software at the level of telephone exchange or show lines busy. Report should be submitted to NRHM.
18. GPS device should have capacity to store approximately 2000 records during "No Network Connection" situation and GPS History Tracking is an in-built feature of the software. Minimum period given for History Tracking of GPS data should be at least 60 days.
19. Dynamic reporting should be incorporated in the software, so that queries can be generated on various fields like call date, chief complaint type, unattended calls, off-road vehicles.
20. Software general requirements:

| S.No. | Description   |
|-------|---|
| 1.    | Virtual PBX Integration   |
| 2.    | Supporting Multi-user environment                                 |
| 3.    | Ability to use common call input screen for Medial, Police & Fire |
| 4.    | Ability to automatically check for duplicate calls                |

|     |  |
|-----|--|
| 5.  | Caller Archived Maintained (whenever same caller call then its information automatically display on screen)  |
| 6.  | Inbound/Outbound Calling   |
| 7.  | Automatic generation of custom caller IDs and trip IDs   |
| 8.  | Full-featured Advanced Call Distribution (ACD)   |
| 9.  | Adequate number of call queues   |
| 10. | Ability to forward information, Call return, Call out (VOIP/PSTN)  |
| 11. | Conference bridges   |
| 12. | Ability to view queues; calls & agents status  |
| 13. | Time based, real-time statistics   |
| 14. | One-click call monitoring  |
| 15. | Customizable fields, functionality   |
| 16. | Powerful/Customizable reporting with graphical representation  |
| 17. | Real-time queue and agent data reports   |
| 18. | Data Import/Export facility  |
| 19. | Compatibility to log calls with GPS (Global Positioning System) incorporated in GIS (Geographical Information System) with GSM/GPRS (Global System for Mobile Communication/General Packet Radio Service) integrated Ambulance monitoring and tracking system. |
| 20. | AVLT integration under MDA application Computer added Trai protocol equivalent to AMCDS for communication.   |
| 21. | Agent application medical Protocol for physician application   |
| 22. | Business continuity plan compliant [so that services should not hamper]  |
| 23. | Single record for an event [end to end], integrated with audio and data.   |
| 24. | Medical dispatch agent application integrated with SMS.  |
| 25. | Patient care record  |
| 26. | Fleet management system integrated with medical dispatch agent application   |
| 27. | Single application to administer all users of the ERS system.  |

## **12. Performance Standards and Standard Operating Procedures**

### **1. Performance Standards for Ambulances**

(a) The ambulance has to reach the site of requirement within the response time of receiving such calls at the Emergency Response Center in 80% of the cases. It is clarified that non-response to hoax calls, repeat calls, crank calls or calls that did not provide an address for the Patient will not be taken into account while determining adherence to Response Time standards by the Operator. Response Time standards shall apply to all emergency ambulance requests requiring a response as determined by the Emergency Response Center (ERC) using call screening and dispatch protocols approved by the Department and only such calls shall be used for the purposes of determining response time compliance calculations.

(b) Any delay in adhering to the Response Time and Patient Transport Times standards shall be recorded and reported by the Operator to Department and proportionate deductions shall be effected from the monthly bills.

**(c) Response Time calculations shall be calculated as:**

(i) Time of Call Received- shall be defined as the time at which the ERC has received a call through telephone or any other source (fire service, police).

(ii) Time of Arrival on Scene – shall mean the time at which an ambulance crew (the pilot) notifies the ERC that the ambulance has reached the point to the Patient.

(iii) Response Times for Urban, Rural and Desert areas respectively, are as given below:

Urban - 20 min

Rural - 30 min

Desert (Bikaner, Barmer & Jaisalmer other than Urban areas) - 40 min

(iv) In case of multiple response i.e. more than one vehicle arriving at the scene, the response time shall be recorded for the first vehicle arriving on scene.

(v) Response time standards may be suspended in case of a multi casualty incident or disaster in case Department calls on the vehicles to aid.

2. Standard Operating Procedures – incorporating all the provisions relating to the operations and maintenance of Emergency Management Services shall be provided to the service provider at the time of agreement which shall be binding on the bidder.

**13. Monitoring & Evaluation**

- a) The performance will be reviewed monthly by Mission Director, National Rural Health Mission and quarterly by Principal Secretary, Medical & Health Department.
- b) The District Chief Medical & Health Officers will oversee the activity within their respective districts in District Health Societies meetings.
- c) The services and records of the service shall be subject to inspection by designated officer(s) of Medical & Health Department.
- d) Evaluation of performance shall be undertaken by National Rural Health Mission.

**14. Saving Clauses**

In the absence of any specific provision in the agreement on any issue the guidelines issued/to be issued by the Mission Director, NRHM, Government of Rajasthan shall be applicable.

### **15. Force Majeure:**

(a) 108-Ambulance Services as being emergency response services, the Operator shall not be allowed to suspend or discontinue Emergency Medical Services during occurrences of emergencies or Force Majeure Events. Provided, in such circumstances of emergencies and Force Majeure Event, if the Performance Standards are not complied with because of any damage caused to Ambulance vehicles or any of the Project Facilities or non availability of staff, or inability to provide services in accordance with the Performance Standards as a direct consequence of such Force Majeure Events or circumstances then no penalties applicable for the relevant default in Performance Standards would be applied to such particular defaults. Provided further, unless the Force Majeure event is of such nature that it completely prevents the operation of Ambulances, a suspension of or failure to provide Emergency Services on the occurrence of a Force Majeure event will be an Event of Default and Department may terminate this Agreement without any termination payment being made in respect thereof.

(b) Department agrees to reimburse the cost of repair or replacement of any Ambulance or equipment in respect thereof that is damaged as a direct consequence of a Force Majeure Event, to the extent that such cost was not covered by the relevant insurance policies that were obtained by the Operator.

(c) On the occurrence of any Force Majeure Events or implementation of any disaster management operations or law and order emergencies, Department may give instructions to the Operator including requiring deployment of certain number of Ambulances in specific locations, in such circumstances, the Operator shall comply with such instructions and will be excused from adherence to relevant performance standards.

(d) The failure of a party to fulfill any of its obligations under the agreement shall not be considered to be a default in so far as such inability arises from an event of force majeure, provided that the party affected by such an event:-

- Has taken all reasonable precautions, due care and reasonable alternative measures in order to carry out the terms and conditions of the agreement, and
- Has informed the other party as soon as possible about the occurrence of such an event.

### **16. Termination /Suspension of Agreement**

(a) The Government may, by a notice in writing suspend the agreement if the service provider fails to perform any of his obligations including carrying out the services, provided that such notice of suspension--

(i) Shall specify the nature of failure, and

(ii) Shall request remedy of such failure within a period not exceeding 15 days after the receipt of such notice.

(b) The Government after giving 30 days clear notice in writing expressing the intention of termination by stating the ground/grounds on the happening of any of the events (i) to (iv), may terminate the agreement after giving reasonable opportunity of being heard to the service provider.

(i) If the service provider do not remedy a failure in the performance of his obligations within 15 days of receipt of notice or within such further period as the Government have subsequently approve in writing.

(ii) If the service provider becomes insolvent or bankrupt.

(iii) If, as a result of other than force majeure conditions, service provider is unable to perform a material portion of the services for a period of not less than 60 days: or

(iv) If, in the judgment of the Government, the service provider is engaged in corrupt or fraudulent practices in competing for or in implementation of the project.

(c) In the event of premature termination of the contract by the Government on the instances other than non-fulfillment/ non-performance of the contractual obligation by the agency, the balance remaining un-paid amount on account of capital expenditure as on the day of termination shall be released within six months from the date of such termination.

### **17.Modifications**

Modifications in terms of reference including scope of the services can only be made by written consent of both parties. However, basic conditions of the agreement shall not be modified.

### **18.Settlement of Disputes:**

If any dispute with regard to the interpretation, difference or objection whatsoever arises in connection with or arises out of the agreement, or the meaning of any part thereof, or on the rights, duties or liabilities of any party, the same shall be referred for decision to the committee and the same shall be settled within 6 months of the acceptance of the dispute. The committee for the same shall consist of the following-

- 1) Chief Secretary, Government of Rajasthan
- 2) Principal Secretary, Medical Health & Family Welfare.
- 3) Principal Secretary, Finance Department.
- 4) Principal Secretary, Law Department.

In case of Dispute, 50% of the disputed claim raised shall be released and 50% shall be with held till the settlement of the same. If the dispute is not settled within 60 days then 25% will be further released.

### **19. Right to Accept and Reject any Proposal**

Government 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.

## **20.Award of Contract and Agreement**

On evaluation of technical and financial parts of proposal and decision thereon, the selected bidder shall have to execute an agreement with the Government within 15 days from the date of acceptance of the bid is communicated to him. 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 (Rs. 5,00,00,000/- (Rupees Five Crores only) as mentioned in the proposal above.

## **21.Jurisdiction of Court**

Legal proceedings if any shall be subject to Jaipur (Rajasthan) jurisdiction only.

# ANNEXURES

### ANNEXURE 1: APPLICATION FORMAT

| APPLICATION FORMAT |  |   |
|--------------------|--|---|
| 1                  | Proposal submitted for the project   | Proposal submitted for the project: "Emergency Response Services" popularly known as "108 Ambulance Service Project" in Rajasthan"        |
| 2                  | Name and postal address of the organization submitting Proposal. PAN, Service Tax and Sales Tax registration numbers with self certified copy  |   |
|                    | Telephone No. with STD Code  |   |
|                    | Fax Number   |   |
|                    | E-mail address, if any   |   |
|                    | Reference of registration/incorporation of the organization.   |   |
|                    | Name and address of the Chief Executive (with telephone Nos.)  |   |
| 3                  | Proposal addressed to:   | Mission Director, NRHM,<br>3 <sup>rd</sup> Floor, Swasthya Bhawan,<br>Tilak Marg, Jaipur-302005 (Rajasthan).                              |
| 4                  | Reference of the Notice for invitation of proposals  | No.....dt.....  |
| 5                  | Reference of deposit of document Charges   | 1. Receipt/DD No.....dt.....<br>For Rs.....<br>2. Receipt/DD No.....dt.....<br>For Rs.....<br>3. Receipt/DD No.....dt.....<br>For Rs..... |
| 6                  | Authority for signing and submitting the document (Power of Attorney, Resolution of the organization )   |   |
| 7                  | Documents enclosed in support of the Request-<br>1) .....<br>2) .....<br>3) .....<br>4) .....<br>5) .....<br>Total pages.....<br>Name and signature of the authorized signatory<br>Seal of the organization<br>Date: |   |

### ANNEXURE 1A: FORMAT for UNDERTAKING

1. I/We declare that we have read and understood and that we accept all clauses, conditions and any addendum thereof, and descriptions of the RfP document without any change, reservations and conditions.
2. I/We have carefully examined and conform to all the parts of the RfP documents and have obtained all the requisite information affecting this proposal and am/are aware of all conditions and difficulties likely to affect the execution of the agreement.
3. I/We hereby propose to implement the project as described in the RFP document in conformity with the conditions of agreement and the technical aspects as indicated in this RfP.

Place:

( )

Date:

Signature of authorized signatory  
Designation and Official seal

**Note- The bidders are not required to submit a signed copy of RfP document along with his Proposal**

**ANNEXURE 2: ACKNOWLEDGEMENT & FINANCIAL PROPOSAL**

**FINANCIAL PROPOSAL (BoQ)**

**To**  
**The .....**  
**Department of Health & Family Welfare**  
**Government of Rajasthan**

**Sub: - Request for Proposal for “Emergency Response Services” popularly known as “108 Ambulance Service Project” in Rajasthan**

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 agreement, I/We hereby propose to implement the project as described in the RFP document in conformity with the conditions of agreement, 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 any addendum thereof, and descriptions of the RfP document without any change, reservations and conditions.
3. If our proposal is accepted, we undertake to deposit security deposit of Rs 5.00 Crores before 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 or the extended bid 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 Government of Rajasthan.
6. We submit the Schedule of Rate as appended herewith.

Yours faithfully  
Signature of the authorized signatory

Encl: Schedule of Rate



**ANNEXURE 3A(i) : Board Resolutions**

M/s \_\_\_\_\_ (To be submitted by each consortium member and Parent company)

**COPY OF BOARD MEETING HELD ON ----- AT -----**

The Board, after discussion, at the duly convened Meeting on ....., with the consent of all the Directors present and in compliance of the provisions of the Companies Act, 1956, passed the following Resolution:

RESOLVED THAT approval of the Board be and is hereby accorded to participate in consortium with M/s \_\_\_\_\_ Limited and M/s \_\_\_\_\_ Limited for the “108-Ambulance Service Project” and Mr / Ms \_\_\_\_\_, be and is hereby authorized to execute the Consortium Agreement.

FURTHER RESOLVED THAT pursuant to the provisions of the Companies Act, 1956 and as permitted under the Memorandum and Articles of Association of the Company, approval of the Board, be and is hereby accorded to invest to the extent of \_\_\_%(insert the % equity commitment as specified in the Consortium Agreement), as required, of the requisite qualifying Net worth, as equity shares, in the Special Purpose vehicle, in compliance of the Bid condition, as member of the consortium formed for the “Emergency Response Services” popularly known as “108-Ambulance Service Project” in The State of Rajasthan.

FURTHER RESOLVED THAT approval of the Board be and is hereby accorded to contribute such additional amount over and above the percentage limit (specified for the Lead Member in the Consortium Agreement), obligatory on the part of the Consortium pursuant to the terms and conditions contained in the Consortium Agreement dated executed by the Consortium as per the provisions of the Invitation to Bid, to the extent becoming emergent and necessary towards the equity share in the Project Company in execution and completion of the Project.

*[To be passed by the Lead Member of the Bidding Consortium]*

FURTHER RESOLVED THAT approval of the Board be and is hereby accorded to the Special Purpose Vehicle created for the “108- Ambulance Service Project” in Rajasthan as well as to the other Consortium Member(s) to use our financial capability for meeting the Qualification Requirements for the “108- Ambulance Service Project” and confirm that all the equity investment obligations of the SPV as well as of the Consortium Member(s), shall be deemed to be our equity investment obligations and in the event of any default the same shall be met by us.

[To be passed by the entity(s) whose financial credentials have been used]

(Director)

Certified true copy by Company Secretary

(Signature, Name and stamp of Company Secretary)

Notes:

1. This certified true copy should be submitted on the letterhead of the Company, signed by the Company Secretary.
2. The contents of the format may be suitably re-worded indicating the identity of the entity passing the resolution.

**ANNEXURE 3A (ii): Board Resolutions**

***Board resolution for using the financial credentials of parent/ultimate parent/affiliate.***

M/s \_\_\_\_\_

**(Insert name of the company whose financial credentials are used)**

**COPY OF BOARD MEETING HELD ON ----- AT -----**

The Board, after discussion, at the duly convened Meeting on ....., with the consent of all the Directors present and in compliance of the provisions of the Companies Act, 1956, passed the following Resolution:

RESOLVED THAT pursuant to the provisions of the Companies Act, 1956 and as permitted under the Memorandum and Articles of Association of the company, approval of the Board, be and is hereby accorded to M/s \_\_\_\_\_ (Name of the Bidding company/Consortium Member (s)) to use our financial capability for meeting the Qualification requirements for the "Emergency Response Services" popularly known as "108- Ambulance Service Project" in The State of Rajasthan and confirm that all the equity investment obligations of M/s \_\_\_\_\_ (Name of Bidding Company/ Consortium members (s)), shall be deemed to be our equity investment obligations and in the event of any default the same shall be met by us.

(Directors)

Certified true copy

(Signature, Name and stamp of Company Secretary)

Notes:

- 1) This certified true copy should be submitted on the letterhead of the Company, signed by the Company Secretary.
- 2) The contents of the format may be suitably re-worded indicating the identity of the entity passing the resolution.

**ANNEXURE 4: FORMAT FOR COVERING LETTER**

**Format for Covering Letter**

*[On the Letter head of the Applicant (in case of Single Applicant) or Lead Member (in case of a Consortium)]*

Date:

**To  
The Mission Director  
National Rural Health Mission  
Government of Rajasthan  
Jaipur**

Re: "Emergency Response Services" popularly known as "108 Ambulance Service Project" for Rajasthan State.

Madam / Sir,

Being duly authorized to represent and act on behalf of.....  
(Hereinafter referred to as "the Applicant"), and having reviewed and fully understood all of the requirements and information provided in this RfP, the undersigned hereby apply for the qualification for Emergency Medical Services for Rajasthan. We are enclosing our Application with EMD amount of Rs. \_\_\_\_\_ in the form of Demand Draft and two copies of Proposal (Part A, Part B and Part C) with the details as per the requirements of this RFP. We confirm that our proposal is valid for a period of Six months from \_\_\_\_\_ (Application Due Date).

Yours faithfully,

\_\_\_\_\_  
(Signature of Authorized Signatory)  
(NAME, TITLE AND ADDRESS)

**ANNEXURE- 5: POWER OF ATTORNEY**

**Format for Power of Attorney for Signing of Application**

*(On a Stamp Paper of relevant value)*

**Power of Attorney**

Know all men by these presents, We M/s.....(name and address of the registered office) do hereby constitute, appoint and authorize Mr / Ms.....(name and residential address and PAN), duly approved by the Board of Directors in their meeting held on\_\_\_\_\_ (Copy of board resolution enclosed), who is presently employed with us and holding the position of .....as 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 "Emergency Response Services" popularly known as "108 Ambulance Service Project" in Rajasthan including signing and submission of all documents and providing information / responses to the Department of Health & Family Welfare, GoR, representing us in all matters before Deptt. Of MH&FW, GoR, and generally dealing with Deptt. Of MH&FW, GoR 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 \_\_\_\_\_ 200\_

For \_\_\_\_\_

(Name, Designation and Address)

Accepted

\_\_\_\_\_(Signature)

(Name, Title and Address of the Attorney)

Date : \_\_\_\_\_

**Note:**

- i. 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 executants (s) and when it is so required the same should be under common seal affixed in accordance with the required procedure.*
- ii. In case an authorized Director of the Applicant signs the Application, a certified copy of the appropriate resolution/ document conveying such authority may be enclosed in lieu of the Power of Attorney.*
- iii. In case the Application is executed outside India, the Applicant has to get necessary authorization from the Consulate of India. The Applicant shall be required to pay the necessary registration fees at the office of Inspector General of Stamps.*

**ANNEXURE- 6: POWER OF ATTORNEY FOR LEAD MEMBER**  
**Format for Power of Attorney for Lead Member of Consortium**

*(On a Stamp Paper of relevant value)*

**Power of Attorney**

Whereas the Department of Health and Family Welfare, Government of Rajasthan (GoR), has invited applications from interested parties for Expansion of "Emergency Response Services" popularly known as "108 Ambulance Service Project".

Whereas, the members of the Consortium are interested in bidding for the Project and implementing the Project in accordance with the terms and conditions of the Request for Proposal (RFP) Document and other connected documents in respect of the Project, and

Whereas, it is necessary under the RFP Document for the members of the Consortium to designate the Lead Member with all necessary power and authority to do for and on behalf of the Consortium, all acts, deeds and things as may be necessary in connection with the Consortium's bid for the Project who, acting jointly, would have all necessary power and authority to do all acts, deeds and things on behalf of the Consortium, as may be necessary in connection with the Consortium's bid for the Project.

NOW THIS POWER OF ATTORNEY WITNESSETH THAT;

We, M/s. \_\_\_\_\_ (M/s \_\_\_\_\_ (Member (s)) (the respective names and addresses of the registered office) having formed a bidding consortium named \_\_\_\_\_ (insert name of the consortium) (hereinafter called as consortium), vide the consortium agreement dated \_\_\_\_\_ (copy enclosed) as approved by the Board of Directors of each member and having mutually agreed to appoint M/s \_\_\_\_\_ as the lead member of the said consortium, as our duly constituted lawful attorney hereinafter called the lead to do on behalf of the Consortium, all or any of the lawful acts, deeds or things as necessary or incidental to the Consortium's bid for the Project, including submission of application/proposal, participating in conferences, responding to queries, submission of information/ documents and generally to represent the Consortium in all its dealings with the Department, any other Government Organization or any person, in connection with the Project until culmination of the process of bidding and thereafter in the event of the Consortium being selected as successful bidder, this Power of Attorney shall remain valid and binding and irrevocable till the Agreement period as is entered into with Department of Health and Family Welfare, Government of Rajasthan (GoR) and the Consortium.

We hereby agree to ratify all acts, deeds and things lawfully done by Lead Member, 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/Consortium and shall be binding till the Agreement period on all members individually and collectively.

Dated this the \_\_\_\_\_ day of 20\_\_  
(Executants)

**Note:** *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 executants (s) and the same should be under common seal affixed in accordance with the required procedure.*

## ANNEXURE- 7: AGREEMENT

### AGREEMENT

1. An agreement made this.....day of.....between..... (Hereinafter called "the approved service provider", which expression shall where the context so admits, be deemed to include his heirs, successors, executors, Parent and affiliate companies and administrators) of the one part and the Governor of the State of Rajasthan (hereinafter called "the Government " which expression shall where the context so admits, be deemed to include his successors in office and assigns) of the other part.
2. Whereas the selected and approved service provider has agreed with the Government to implement the "Emergency Response Services" popularly known as "108 Ambulance Service Project" (hereinafter referred to as "Project") in the State of Rajasthan in the manner set forth in the terms of the Request for Proposal (RfP) and Schedule of Rate appended herewith.
3. And whereas the selected and approved service provider has deposited a sum of Rs.....(Rupees.....) only in the form of ..... as security for satisfactory performance of the Project.
4. Now these present witnesses:
5. In consideration of the payment to be made by the Government through Mission Director, National Rural Health Mission, Rajasthan at the rate set forth in the Schedule hereto appended, the approved service provider will duly and satisfactorily implement the project in the manner set forth in the terms of the RfP.
6. The terms of the RfP appended to this agreement will be deemed to be taken as integral part of this agreement and are binding on the parties executing this agreement.
7. Following letters/correspondence undertaken between the parties shall also form part of this agreement-

|                    |                           |
|--------------------|---------------------------|
| Govt. of Rajasthan | Approved service provider |
|                    |                           |

8. (a) The Government do hereby agree that if the approved service provider shall duly implement the project in the manner aforesaid, observe and keep the said terms and conditions, the Government will, through Mission Director, National Rural Health Mission, Rajasthan, pay or cause to be paid to the approved service provider at the time and in the manner set forth in the said terms.  
(b) The mode of payment will be as specified below-
  - Financing of the project shall be on reimbursement basis.
  - Claims/reimbursements are envisaged on monthly basis
  - Payments to be released on submission of monthly statements of claims by the service provider and after their approval by the appropriate authority.
9. Termination /Suspension of Agreement

10. The Government may, by a notice in writing suspend the agreement if the service provider fails to perform any of his obligations including carrying out the services, provided that such notice of suspension –

11. Shall specify the nature of failure, and

(1) Shall request remedy of such failure within a period not exceeding 15 days after the receipt of such notice.

(2) The Government after giving 30 days clear notice in writing expressing the intention of termination by stating the ground/grounds on the happening of any of the events (a) to (d) as enumerated below, may terminate the agreement after giving reasonable opportunity of being heard to the service provider.

(a) If the service provider does not remedy a failure in the performance of his obligations within 15 days of receipt of notice or within such further period as the Government have subsequently approved in writing.

(b) If the service provider becomes insolvent or bankrupt.

(c) If, as a result of other than *force majeure conditions*, service provider is unable to perform a material portion of the services for a period of not less than 60 days.

(d) If, in the judgment of the Government, the service provider is engaged in corrupt or fraudulent practices in competing for or in implementation of the project.

(3) In the event of premature termination of the contract by the Government on the instances, other than non-fulfillment/ non-performance of the contractual obligation by the agency, the balance remaining un-paid amount as on the day of termination shall be released within six months from the date of such termination.

12. In case of any default in providing the services, necessary action under the terms of this agreement may be initiated by the Government in addition to imposition of penalty / liquidated damages / difference of loss of additional cost for new contract.

13. All disputes arising out of this agreement and all questions relating to the interpretation of this agreement shall be decided by the committee as specified in RfP document.

In witness whereof the parties hereto have set their hands on the .....day of.....2013.

Legal proceedings if any shall be subject to Jaipur (Rajasthan) jurisdiction only.

Signature of the approved service provider,

Date:

Witness No.1.

Witness No.2.

For and on behalf of  
The Governor or Rajasthan

Principal Secretary,  
Medical & Health  
Signature & Designation

Date:

1. Witness

2. Witness

**ANNEXURE- 8: LETTER OF EXCLUSIVITY**

**Letter of Exclusivity**

I, we, \_\_\_\_\_, hereby declare that we are/ will not associate with any other firm/entity/consortium submitting a separate application for the Project under consideration.

Dated this the \_\_\_\_\_ day of \_\_\_\_\_ 20....

For \_\_\_\_\_  
(Name, Designation and Address of the  
Chief Executive Officer of the applicant)  
(Lead organization in case of consortium)  
Accepted

\_\_\_\_\_(Signature)  
(Name, Title and Address of the Applicant/s)  
Date : \_\_\_\_\_

*Note:  
To be executed separately by all the Members in case of Consortium.*

## ANNEXURE- 9: FORMAT FOR JOINT BIDDING AGREEMENT

### (Format for Consortium Agreement)

(To be on non-judicial stamp paper of appropriate value as per Stamp Act relevant to place of execution)

THIS Consortium Agreement executed on this \_\_\_\_\_ day of \_\_\_\_\_ Two thousand \_\_\_\_\_ Eleven between M/s [insert name of Lead Member] \_\_\_\_\_ a Company incorporated under the laws of \_\_\_\_\_ and having its Registered Office at \_\_\_\_\_ (hereinafter called the "**Member-1**", which expression shall include its successors, executors and permitted assigns) and M/s \_\_\_\_\_ a Company incorporated under the laws of \_\_\_\_\_ and having its Registered Office at \_\_\_\_\_ (hereinafter called the "**Member-2**", which expression shall include its successors, executors and permitted assigns), M/s \_\_\_\_\_ a Company incorporated under the laws of \_\_\_\_\_ and having its Registered Office at \_\_\_\_\_ (hereinafter called the "**Member-n**", which expression shall include its successors, executors and permitted assigns), [The Bidding Consortium should list the details and percentage shareholding separately of all the Consortium Members] for the purpose of submitting response to RfP, and execution of "Agreement" (in case of award), against RfP dated \_\_\_\_\_ issued by NHRM, Government of Rajasthan through Department of Medical Health & Family Welfare (MH&FW), and having its Registered Office at Swasthya Bhawan, Jaipur.

WHEREAS, each Member individually shall be referred to as the "**Member**" and all of the Members shall be collectively referred to as the "**Members**" in this Agreement.

WHEREAS the RSHS (NRHM) intends to operate a professionally managed "Emergency Response Services" popularly known as "108-Ambulance Service Project" for operationalization of existing fleet of 464 equipped Ambulances and further expansion by 227 additional equipped ambulances proposed to be deployed by \_\_\_\_\_, 2013 as per the directives of Department of Medical Health & Family Welfare.

WHEREAS, the RSHS (NRHM) had invited response to RfP vide its Request for Proposal (RfP) dated \_\_\_\_\_.

WHEREAS the RfP stipulates that in case response to RfP is being submitted by a Bidding Consortium, the Members of the Consortium will have to submit a legally enforceable Consortium Agreement in a format specified by RSHS (NRHM) wherein the Consortium Members have to commit equity investment of a specific percentage for the Project.

### **NOW THEREFORE, THIS AGREEMENT WITNESSTH AS UNDER:**

In consideration of the above premises and agreements all the Members in this Bidding Consortium do hereby mutually agree as follows:

1. We, the Members of the Consortium and Members to the Agreement do hereby unequivocally agree that Member-1 (M/s \_\_\_\_\_), shall act as the Lead Member as defined in the RfP for self and agent for and on behalf of Member-2, ----, Member-n.
2. The Lead Member is hereby authorized by the Members of the Consortium and Members to the Agreement to bind the Consortium and receive instructions for and on their behalf.

3. Notwithstanding anything contrary contained in this Agreement, the Lead Member shall always be liable for the equity investment obligations of all the Consortium Members i.e. for both its own liability as well as the liability of other Members.
4. The Lead Member shall be liable and responsible for ensuring the individual and collective commitment of each of the Members of the Consortium in discharging all of their respective equity obligations. Each Member further undertakes to be individually liable for the performance of its part of the obligations without in any way limiting the scope of collective liability envisaged in this Agreement.
5. Subject to the terms of this Agreement, the share of each Member of the Consortium in the issued equity share capital of the project Company is/shall be in the following proportion:

| Name     | Percentage |
|----------|------------|
| Member 1 | ---        |
| Member 2 | ---        |
| Member n | ---        |
| Total    | 100%       |

We acknowledge that after execution of the “Agreement”, the controlling shareholding (more than 50% of the voting rights) in the Project Company developing the Project shall be maintained till the completion of the same.

6. The Lead Member, on behalf of the Consortium, shall *inter alia* undertake full responsibility for mobilizing debt resources for the Project, and ensuring that the Project achieves proper Financial Closure.
7. In case of any breach of any equity investment commitment by any of the Consortium Members, the Lead Member shall be liable for the consequences there of for which the Lead member agrees thereto.
8. Except as specified in the Agreement, it is agreed that sharing of responsibilities as aforesaid and equity investment obligations thereto shall not in any way be a limitation of responsibility of the Lead Member under these presents.
9. It is further specifically agreed that the financial liability for equity contribution of the Lead Member shall not be limited in any way so as to restrict or limit its liabilities. The Lead Member shall be liable irrespective of its scope of work or financial commitments.
10. This Agreement shall be construed and interpreted in accordance with the Laws of India and Courts at Jaipur alone shall have the exclusive jurisdiction in all matters relating thereto and arising there-under.
11. It is hereby further agreed that in case of being selected as the Successful Bidder, the Members do hereby agree that they shall furnish the Performance Guarantee in favour of Rajasthan State Health Society in terms of this RfP.
12. It is further expressly agreed that this consortium agreement shall be irrevocable and shall form an integral part of the “Agreement” between Department of Medical, Health and Family Welfare, Government of Rajasthan and the bidder consortium and shall remain valid until the expiration or early termination of the same.

13. The Lead Member is authorized and shall be fully responsible for the accuracy and veracity of the representations and information submitted by the Members respectively from time to time in the response to the RfP Bid.
14. It is hereby expressly understood between the Members that no Member at any given point of time, may assign or delegate its rights, duties or obligations under the "Agreement" except with prior written consent of Department of Medical, Health and Family Welfare.
15. This Agreement
  - (a) has been duly executed and delivered on behalf of each Member hereto and constitutes the legal, valid, binding and enforceable obligation of each such Member;
  - (b) sets forth the entire understanding of the Members hereto with respect to the subject matter hereof; and

I may not be amended or modified except in writing signed by each of the Members and with prior written consent of NHRM.
16. All the terms used in capitals in this Agreement but not defined herein shall have the meaning as per the RfP & Agreement.

IN WITNESS WHEREOF, the Members have, through their authorized representatives, executed these present on the Day, Month and Year first mentioned above.

For M/s-----[Member 1]

(signature, Name & Designation of the person authorized vide Board Resolution Dated [●])

Witnesses:

Signature-----

Signature -----

Name:

Name:

Address:

Address:

For M/s-----[Member 2]

(signature, Name & Designation of the person authorized vide Board Resolution Dated [●])

Witnesses:

Signature -----

Signature -----

Name:

Name:

Address:

Address:

For M/s-----[Member n]

(signature, Name & Designation of the person authorized vide Board Resolution Dated [●])

Witnesses:

Signature -----

Signature -----

Name:

Name:

Address:

Address:

Signature and stamp of Notary of the place of execution

**ANNEXURE- 10A: FORMAT FOR AFFIDAVIT**

**Format for Affidavit Certifying that Entity/ Promoter(s) /Director(s)/Members of Entity are not Blacklisted (On a Stamp Paper of relevant value)**

**Affidavit**

I, M/s. .... (Sole Applicant / Lead Member / Member/Affiliate), (the names and addresses 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 Rajasthan/ or any other entity of GoR or blacklisted by any state government or central government / department / organization in India from participating in Project/s, either individually or as member of a Consortium as on the \_\_\_\_\_ (Date of Signing of Application).

We further confirm that we are aware that, our Application 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 and the amounts paid till date shall stand forfeited without further intimation.

Dated this .....Day of ....., 20.....

Name of the Applicant

.....

Signature of the Authorized Person

.....

Name of the Authorized Person

Note:

*To be executed separately by all the Members in case of Consortium.*

**ANNEXURE- 10B: ANTI COLLUSION CERTIFICATE**

**Anti Collusion Certificate**

We hereby certify and confirm that in the preparation and submission of our Proposal for “Emergency Response Services” popularly known as “108 Ambulance Service Project” in Rajasthan against the RFP issued by Department of Health & Family Welfare, Government of Rajasthan, 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 \_\_\_\_\_, 20\_\_\_\_

For \_\_\_\_\_

(Name)

Authorized Signatory

## ANNEXURE-11: INFORMATION REGARDING PAST EXPERIENCE OF THE BIDDER

### Details of Bidder

*Note: Details to be provided for the Bidder/ Lead Member / each Member of Consortium (in case of Consortium)*

| <b>Details of Organization:</b>   |        |        |
|---|--------|--------|
| Name of the organization  |        |        |
| Type of Legal entity  |        |        |
| Year of Incorporation/Registration/Commencement   |        |        |
| Name of the Authority/Jurisdiction/Law under which the Legal entity is incorporated or registered.  |        |        |
| Statute Legislation under which the Legal entity is incorporated/registered   |        |        |
| Registration Number: (Under the Company Act, Income Tax Act, Service Tax and Sales Tax Act)   |        | Note 1 |
| Registered Address  |        |        |
| Correspondence Address and Head Office address  |        |        |
| Does the Memorandum of Association/Articles of Association permit the organization to carry out the business of emergency medical transport services? |        | Note 2 |
| Number of years of operation in Ambulance service   |        |        |
| <b>Relevant Qualification Details Years wise and State Wise</b>   |        | Note 3 |
| <b>1. State wise</b>  |        |        |
| Name of the State / Province where ambulances services are/were operational   |        |        |
| Years of experience in ambulance operations in the that/those State(s)  |        |        |
| Current areas of operation – specify (Names of the Districts)   |        |        |
|   | Year 1 | Year 2 |
| Number of ambulances operated   |        | Note 4 |
| Number of ambulances owned  |        |        |
| Number of patients transported per ambulance per annum on average   |        |        |
| Number of emergency response centers (ERCs) / call centre operated in the State   |        |        |
| Location and address of ERC/Call Centre   |        |        |
| Number of Call Operators working per ERC /Call Centre   |        |        |
| Average volume of daily calls received per ERC / call   |        | Note 5 |
| Certificate of satisfactory performance   |        | Note 6 |

The Bidder should provide details of experience of only those Projects of ambulance operation which is undertaken by it under its own name / under the names of the Consortium Members.

Experience of the Associate of Bidder/ Consortium Members will also be considered for eligibility under the experience criteria.

The percentage holding of the Financially evaluated company, Lead member, affiliate at the beginning and during the tenure of the Project shall be governed by the clauses given under Financial capacity clause.

**Note 1**

Please enclose Registration / Incorporation Certificates

**Note 2**

Please enclose certified copies of Memorandum & Articles of Association, documents.

**Note 3**

In case of International experience, country wise details should be provided. The information shall be provided for each of the Financial Year. The Financial Year shall mean the accounting year followed by the Bidder in course of its normal business.

**Note 4**

Provide certificate from the Government Authority or Statutory Auditor towards fleet of Ambulances operation in the State.

| <b>Certificate from the Government Authority /Statutory Auditor regarding Qualification experience</b>   |        |        |
|--|--------|--------|
| This is to certify that ..... (name of the Bidder/Member/Associate) has been operating a fleet of Ambulances supported by a call Centre in the State of _____ for the past _____ financial years as per year-wise details noted below: |        |        |
|  | Year 1 | Year 2 |
| Number of Ambulances   |        |        |
| Number of Call Operators at the ERC / Call centre  |        |        |
| Signature of the Authorised Signatory  |        |        |

**Note 5**

The Bidder shall provide documentary evidence showing successful operations of ERC/call centre like computer generated call logs, etc.

**Note 6**

The Bidder shall provide Performance certificate from the relevant Government Authority from the State/Country in which the Ambulances are operational.

## ANNEXURE-12: DETAILS OF ELIGIBLE EXPERIENCE

The Bidder should provide the experience details of services provided at each location/ State / Country / undertaken. The experience of the Single Entity's Associate or Consortium Member's Associates (who are not Members of the Consortium) will also be considered.

In case Bidder is a Consortium, the above information should be provided for each member and their Associate (for whom the experience is claimed).

In Role of Member specify whether Single Entity, or in case of Consortium specify whether Lead Member or Member.

|   |                         |  |             |   |
|---|-------------------------|--|-------------|---|
| <b>Name of entity providing support:</b>  |                         | <b>Project cost:</b>   |             |   |
| <b>Location: (country, state, districts):</b>   |                         | <b>No. of staff by category:</b>   |             |   |
|   |                         | <b>Ambulance:</b><br>(per ambulance)   | <b>ERC:</b> | <b>Other:</b><br>(e.g. first responders etc.) |
| <b>Duration of ambulance service provision:</b>   |                         | <b>Profile of staff:</b><br>Summary of key staff (degree /diploma/certificates with specific reference to project, training, number of years in employment, total relevant experience as a paramedic/ call centre employee.) |             |   |
| <b>Start Date:</b>  | <b>Completion Date:</b> | <b>Name of associates, Consortium members (if any):</b>  |             |   |
| <b>Details of government rganization, funding rganization or contracting agency for ambulance services:</b>   |                         |  |             |   |
| <b>Name of Senior staff (Project Director, Project Manager) involved and functions performed:</b>   |                         |  |             |   |
| <b>Narrative description of project and the outcome:</b><br>(Including number of patients transported per ambulance per annum on an average)  |                         |  |             |   |
| <b>Brief description of actual services provided:</b>   |                         |  |             |   |
| <b>Fleet details:</b>   |                         |  |             |   |
| <ul style="list-style-type: none"> <li>• Number of ALS ambulance operated</li> <li>• Number of BLS ambulance operated</li> <li>• Number of ambulances owned</li> <li>• Number of ambulances leased</li> </ul> |                         |  |             |   |

**Emergency Response Centre / Call Centre:**

- Average number of calls received per month
- Toll free number used
- Software used
- If operations are in more than one state the control room/ call centre details for each area of operation may be separately provided.

**Instructions:**

1. A separate sheet should be filled for each state where ambulance services have been provided.
2. Role of Member would be Single Entity or in case of Consortium would be Lead Member or Member.
3. Ambulances services carried out for: Government Agency / Self or own company (parent company / group company). Details such as name, address and contact details need to be provided.
4. Project Cost should be provided. Date of successful completion / substantial completion should be provided.

**ANNEXURE-13: FINANCIAL CAPABILITY OF THE BIDDER/MEMBER**

*(To be submitted by each member in case of consortium)*

Name of Bidder/Member .....

Role of Bidder/Member.....

Calculation of Net-Worth:

**FY 1**

**FY 2**

**FY 3**

Net Worth

= Paid up Share capital (in case of companies) which includes:

1. Paid up Equity share capital; and
2. Fully, compulsorily and mandatorily convertible Preference Shares; and
3. Fully, compulsorily and mandatorily convertible Debentures

Note: a) In case of Registered societies, the Corpus Fund and Capital Fund  
 b) In case of Proprietorship firm / Partnership firm the Capital reflecting in the Audited Balance Sheet

Add: Free Reserves

(Including Share Premium provided it is realized in Cash or Cash equivalents but excluding Revaluation Reserve if any)

In case of Proprietorship firm / Partnership firm, the Credit balance of Reserve and Surplus or by whatever name called as appearing in the Balance Sheet

Subtract: Intangible Assets

Subtract: Miscellaneous Expenditures to the extent not written off and carry forward losses.

**Revenue-Expenditure Statement**

(in Rs. Lacs)

| S.No. | In Rupee, at the end of concerned Financial Year | FY 1 | FY 2 | FY 3 |
|-------|--|------|------|------|
| 1.    | Revenue / Income/ Gross Receipts (A)             |      |      |      |
| 2.    | Operating Cost (B) =(C+D+E)                      |      |      |      |
| 3.    | Employees cost I                                 |      |      |      |
| 4.    | Admin and General Cost (D)                       |      |      |      |
| 5.    | Other Costs (E)                                  |      |      |      |
| 6.    | Depreciation (F)                                 |      |      |      |
| 7.    | Interest (G)                                     |      |      |      |
| 8.    | Provisions (H)                                   |      |      |      |
| 9.    | <b>Profit Before Tax I = (A-B-F-G-H)</b>         |      |      |      |
| 10.   | Tax Paid (J)                                     |      |      |      |
| 11.   | <b>Profit After Tax (I-J)</b>                    |      |      |      |

Note:

1. This information should be extracted from the Annual Financial Statement / Balance Sheet which should be enclosed and this response sheet shall be certified by the Statutory Auditor.
2. The Single Entity or the Consortium should provide the Financial Capability of its own / of the Consortium Members/Financially evaluated company.
3. In Role of Member specify whether it is a Single Entity, Lead Member or Member of the Consortium or Affiliate or Parent.
4. The Bidder along with Consortium Members shall attach copies of the balance sheets, financial statements and Annual Reports for 3 (three) years preceding the Proposal Due Date.
5. Financial Year 1 (FY1) will be the latest completed financial year, preceding the bidding. Year 2 shall be the year immediately preceding Year 1 and so on.
6. If data is provided by the Bidder in foreign currency, equivalent rupees of Net Worth will be calculated using bills selling exchange rates (card rate) USD / INR of State Bank of India prevailing on the date of closing of the accounts for the respective financial year as certified by the Bidder's banker.

For currency other than USD, Bidder shall convert such currency into USD as per the exchange rates certified by their banker prevailing on the relevant date and used for such conversion.

(If the exchange rate for any of the above dates is not available, the rate for the immediately available on previous day shall be taken into account)

1. The bidder shall provide an Auditor's Certificate specifying the Revenue / Income/ Gross Receipts of the bidder and its Consortium members and also specifying the methodology adopted for calculating the same.
2. The Bidder shall attach the copies of the audited balance sheets, financial statements and Annual Reports for 3 (three) years preceding the Proposal Due Date of its Associate whose Financial Capacity has been claimed.

**ANNEXURE-13A: FINANCIAL CAPABILITY OF THE BIDDER MEMBER**

*(To be submitted by each member separately in case of consortium)*

Name of Bidder/Member .....

Role of Bidder/Member.....

Net Worth Requirement to be met by Member in Proportion to the Equity Commitment in the consortium: Rs.-----Crore (Equity Commitment (%) \* Rs. [ ] Crore)

For the above calculations, we have considered Net Worth by Member in Bidding Consortium and/ or Parent/ Affiliate as per following details:

| Name of Consortium Member Company | Name of Company / Parent/ Ultimate Parent/ Affiliate/ Consortium Member whose net worth is to be considered | Relationship with Bidding Company* (if any) | Either Financial Year to be considered for Net Worth or Net worth of the respective Company more than seven days prior to submission of RfP | Net Worth (in Rs. Crore) of the Consortium Member Company | Equity Commitment (in %age) in Bidding Consortium | Committed Net Worth (in Rs. Crore) |
|-----------------------------------|---|---|---|---|---|------------------------------------|
| <b>Company 1</b>                  |   |   |   |   |   |                                    |
|                                   |   |   |   |   |   |                                    |
| <b>Total</b>                      |   |   |   |   |   |                                    |

*\* The column for "Relationship with Bidding Company" is to be filled only in case the financial capability of Parent/Affiliate has been used for meeting Qualification Requirements. Further, documentary evidence to establish the relationship, duly certified by the company secretary/chartered accountant is required to be attached with the format.*

**(Signature & Name of the person Authorized  
By the board)**

Date:

**(Signature and Stamp of  
Auditor )**

Note:

Along with the above format, in a separate sheet, provide details of computation of Net Worth duly certified by Statutory Auditor (preferable) or CA.

**ANNEXURE- 14: SOFTWARE REPORTING FORMATS**

**EMERGENCY RESPONSE SERVICES – RSHS (NRHM), RAJASTHAN  
[A-CALL DETAILS]**

**Emergency call-type-wise summary sheet**

**Up to reporting month: [.....-2013]**

**Print date & time**

| Sno | Emergency call-type |                  | during the month |                    | upto the month |                    |
|-----|---------------------|------------------|------------------|--------------------|----------------|--------------------|
|     | code                | type             | No. of cases     | % of cases         | No. of Cases   | % of cases         |
| 1   | 2                   | 3                | 4                | 5                  | 6              | 7                  |
| 1   | 01                  | Unattended calls | n                | $(n/N) \times 100$ | p              | $(p/P) \times 100$ |
| 2   | 02                  | Emergency calls  | m                | $(m/N) \times 100$ | q              | $(q/P) \times 100$ |
| 3   | 03                  | Other calls      | o                | $(o/N) \times 100$ | r              | $(r/P) \times 100$ |
|     |                     | Total:           | N                | $(N/N) \times 100$ | P              | $(P/P) \times 100$ |

Note: Col no. 5 & 7 values should be up to 2 decimal places;

## EMERGENCY RESPONSE SERVICES – RSHS (NRHM), RAJASTHAN

### [B-DEPARTMENT-WISE DETAILS]

#### Emergency type-wise summary sheet

Up to reporting month: [.....-2013]

Print date & time

| Sno | Emergency |                          | during the month |            | upto the month |            |
|-----|-----------|--------------------------|------------------|------------|----------------|------------|
|     | Code      | Type                     | No. of cases     | % of cases | No. of Cases   | % of cases |
| 1   | 2         | 3                        | 4                | 5          | 6              | 7          |
| 1   | 01        | Medical (exclusively)    | n                | (n/N )x100 | p              | (p/P )x100 |
| 2   | 02        | Police (exclusively)     | m                | (m/N )x100 | q              | (q/P )x100 |
| 3   | 03        | Fire (exclusively)       | o                | (o/N )x100 | r              | (r/P )x100 |
| 4   | 04        | Medical and Police       | a                | (a/N )x100 | s              | (s/P )x100 |
| 5   | 05        | Medical and Fire         | b                | (b/N )x100 | t              | (t/P )x100 |
| 6   | 06        | Medical, Police and Fire | c                | (c/N )x100 | u              | (u/P )x100 |
| 7   | 07        | Other (if any)           |                  |            |                |            |
|     |           | Total:                   | N                | (N/N )x100 | P              | (P/P )x100 |

Note: Col no. 5 & 7 values should be upto 2 decimal places; Row no. 4, 5, 6 are those cases where combined emergencies occurs. It is not like [Total of Medical and Police cases]

## EMERGENCY RESPONSE SERVICES – RSHS (NRHM), RAJASTHAN

Closing status-wise summary sheet  
Up to reporting month: [.....-2013]  
Print date & time

| Sno | Closing status |                | during the month |                    | Up to the month |                    |
|-----|----------------|----------------|------------------|--------------------|-----------------|--------------------|
|     | code           | Type           | No. of cases     | % of cases         | No. of Cases    | % of cases         |
| 1   | 2              | 3              | 4                | 5                  | 6               | 7                  |
| 1   | 01             | Availed        | n                | $(n/N) \times 100$ | p               | $(p/P) \times 100$ |
| 2   | 02             | Not availed    | m                | $(m/N) \times 100$ | q               | $(q/P) \times 100$ |
| 3   | 03             | Vehicle busy   | o                | $(o/N) \times 100$ | r               | $(r/P) \times 100$ |
| 4   | 04             | Other (if any) | a                | $(a/N) \times 100$ | s               | $(s/P) \times 100$ |
|     |                | Total:         | N                | $(N/N) \times 100$ | P               | $(P/P) \times 100$ |

**Note: Col no. 5 & 7 values should be up to 2 decimal places.**

**EMERGENCY RESPONSE SERVICES – RSHS (NRHM), RAJASTHAN  
[D.1-TYPES OF CASE WISE DETAILS]**

**Chief complaint-wise summary sheet order by code  
Up to reporting month: [.....-2013]  
Print date & time**

| Sno | Chief complaint |   | during the month |            | upto the month |            |
|-----|-----------------|---|------------------|------------|----------------|------------|
|     | code            | Type  | No. of cases     | % of cases | No. of Cases   | % of cases |
| 1   | 2               | 3   | 4                | 5          | 6              | 7          |
| 1   | 01              | Abdominal Pain/ Problems                            | n                | (n/N )x100 | p              | (p/P )x100 |
| 2   | 02              | Animal Bites/Attacks                                | m                | (m/N )x100 | q              | (q/P )x100 |
| 3   | 03              | Allergies Reactions)/ Envenomations (Stings, Bites) | o                | (o/N )x100 | r              | (r/P )x100 |
|     |                 | Total:  | N                | (N/N )x100 | P              | (P/P )x100 |

**Note: Col no. 5 & 7 values should be up to 2 decimal places; report should be sorted on CODE**

**EMERGENCY RESPONSE SERVICES – RSHS (NRHM), RAJASTHAN  
[D.2-TYPES OF CASE WISE DETAILS]**

**Chief complaint-wise summary sheet order by type  
Up to reporting month: [.....-2013]  
Print date & time**

| Sno | Chief complaint |   | during the month |            | upto the month |            |
|-----|-----------------|---|------------------|------------|----------------|------------|
|     | code            | Type  | No. of cases     | % of cases | No. of Cases   | % of cases |
| 1   | 2               | 3   | 4                | 5          | 6              | 7          |
| 1   | 01              | Abdominal Pain/ Problems                            | n                | (n/N )x100 | p              | (p/P )x100 |
| 2   | 02              | Animal Bites/Attacks                                | m                | (m/N )x100 | q              | (q/P )x100 |
| 3   | 03              | Allergies Reactions)/ Envenomations (Stings, Bites) | o                | (o/N )x100 | r              | (r/P )x100 |
|     |                 | Total:  | N                | (N/N )x100 | P              | (P/P )x100 |

**Note: Col no. 5 & 7 values should be up to 2 decimal places; report should be sorted on TYPE**

**EMERGENCY RESPONSE SERVICES – RSHS (NRHM), RAJASTHAN**

**District-wise ambulance utilization detail [MONTHLY REPORT]**

**for the reporting month: [.....-2013]**

**Print date & time**

| Sno          | Name of District | No. of ambulances in the district | Detail of trips (Km based) |             |                  |                                     | No. of ambulances |                                       |                          | No. of institutional deliveries carried by 108 amb. | No. of deliveries in 108 amb. | No. of neonates (0-30 days) carried by 108 amb. | Remarks |
|--------------|------------------|-----------------------------------|----------------------------|-------------|------------------|-------------------------------------|-------------------|---------------------------------------|--------------------------|---|-------------------------------|---|---------|
|              |                  |                                   | Availed                    | Not availed | Total (Col. 4+5) | Average trips/ Ambulance (Col. 6/3) | Remained Off-road | making less than and equal to 5 trips | making more than 5 trips |   |                               |   |         |
| 1            | 2                | 3                                 | 4                          | 5           | 6                | 7                                   | 8                 | 9                                     | 10                       | 11  | 12                            | 13  | 14      |
|              |                  |                                   |                            |             |                  |                                     |                   |                                       |                          |   |                               |   |         |
|              |                  |                                   |                            |             |                  |                                     |                   |                                       |                          |   |                               |   |         |
|              |                  |                                   |                            |             |                  |                                     |                   |                                       |                          |   |                               |   |         |
|              |                  |                                   |                            |             |                  |                                     |                   |                                       |                          |   |                               |   |         |
| <b>Total</b> |                  |                                   |                            |             |                  |                                     |                   |                                       |                          |   |                               |   |         |



**EMERGENCY RESPONSE SERVICES – RSHS (NRHM), RAJASTHAN**

**Details of ambulances remained Off-road [MONTHLY REPORT]**

**For the reporting month: [.....-2013]**

**Print date & time**

| Sno | Name of District | Registration no. of ambulance | Off-road from date (DD/MM/YYYY) | Off-road to date (DD/MM/YYYY) | Total no. of Off-road days | Reason for Off-road | Remarks |
|-----|------------------|-------------------------------|---------------------------------|-------------------------------|----------------------------|---------------------|---------|
| 1   | 2                | 3                             | 4                               | 5                             | 6                          | 7                   | 8       |
|     |                  |                               |                                 |                               |                            |                     |         |
|     | <b>Total:</b>    |                               |                                 |                               |                            |                     |         |

**EMERGENCY RESPONSE SERVICES – RSHS (NRHM), RAJASTHAN**

**Details of trips [DAILY REPORT]**

**for the reporting month: [.....-2013]**

**Print date & time**

| Sno | Trip no. | District name | Base location of amb. | Reg. no. of amb. | Call date (DD/MM/YYYY) | Call Time (HH:MM:SS AM/PM) | Service type | Caller type | Chief complaint | Caller name | Caller phone no. | Patient name | Patient Age | Patient gender (Male/ Female) | Patient contact no. | Patient place/ picked from | Reaching time at patient place/<br>picked from (HH:MM:SS AM/PM) | Hospital reaching time (HH:MM:SS<br>AM/PM) | Base location reaching time<br>(HH:MM:SS AM/PM) | OPD/ IPD/ Emergency no. | Total distance (in Kms) | Trips (Km based) | Driver name | Driver/crew mobile no. | Remarks |
|-----|----------|---------------|-----------------------|------------------|------------------------|----------------------------|--------------|-------------|-----------------|-------------|------------------|--------------|-------------|-------------------------------|---------------------|----------------------------|---|--|---|-------------------------|-------------------------|------------------|-------------|------------------------|---------|
| 1   | 2        | 3             | 4                     | 5                | 6                      | 7                          | 8            | 9           | 10              | 11          | 12               | 13           | 14          | 15                            | 16                  | 17                         | 18  | 19   | 20  | 21                      | 22                      | 23               | 24          | 25                     | 26      |
|     |          |               |                       |                  |                        |                            |              |             |                 |             |                  |              |             |                               |                     |                            |   |  |   |                         |                         |                  |             |                        |         |



**EMERGENCY RESPONSE SERVICES – RSHS (NRHM), RAJASTHAN**

**Details of ambulances remained Off-road [DAILY REPORT]**

**For the date: [DD/MM/YYYY]**

**Print date & time**

| Sno | Name of District | Registration no. of ambulance | Off-road from date (DD/MM/YYYY) | Total no. of Off-road days | Reason for Off-road | Remarks |
|-----|------------------|-------------------------------|---------------------------------|----------------------------|---------------------|---------|
| 1   | 2                | 3                             | 4                               | 5                          | 6                   | 7       |
|     |                  |                               |                                 |                            |                     |         |
|     | <b>Total:</b>    |                               |                                 |                            |                     |         |

**ANNEXURE- 15**  
**Medical/ Non Medical Consumables in 108-Ambulances**

| <b>S.No.</b>    | <b>DRESSING MATERIAL</b>                  | <b>Unit</b> | <b>Quantity</b> |
|-----------------|---|-------------|-----------------|
| 1               | BANDAIDS                                  | Nos         | 20              |
| 2               | BETADINE SOLUTION 500ml                   | Bottle      | 1               |
| 3               | COTTON ROLL 500GM                         | Nos         | 1               |
| 4               | CRAPE BANDAGE 15CM X 4MTR                 | “           | 2               |
| 5               | CRAPE BANDAGE 7CM X 4 MTR                 | “           | 2               |
| 6               | DRESSING PAD 10CM X 10CM (pre-sterilized) | “           | 10              |
| 7               | DRESSING PAD 10CM X 20CM(pre-sterilized)  | “           | 10              |
| 8               | ELASTO PLAST (DYNA PLASTER) 10CM          | “           | 1               |
| 9               | GAUGE CLOTH 80CM X 18 MTR                 | “           | 1               |
| 10              | GAUGE ROLLS 4 “                           | “           | 1               |
| 11              | GAUGE ROLLS 6 “                           | “           | 1               |
| 12              | PLAIN BANDAGE OF VARIOUS SIZES            | “           | 3               |
| 13              | HYDROGEN PEROXIDE 400ML                   | Bottle      | 1               |
| 14              | MICROPORE TAPE 2”,4”                      | Nos         | 2               |
| 15              | SURGICAL SPIRIT BOTTLE 500ML              | Bottle      | 1               |
| <b>SURGICAL</b> |   |             |                 |
| 1               | AIRWAYS (NASOPHARYNGEAL)-SIZE 6.5MM       | Nos         | 1               |
| 2               | AIRWAYS (NASOPHARYNGEAL)-SIZE 7.5MM       | “           | 1               |
| 3               | AIRWAYS (NASOPHARYNGEAL)-SIZE 7MM         | “           | 1               |
| 4               | AIRWAYS (NASOPHARYNGEAL)-SIZE 8.5MM       | “           | 1               |
| 5               | AIRWAYS (NASOPHARYNGEAL)-SIZE 8MM         | “           | 1               |
| 6               | AIRWAYS (OROPHARYNGEAL)-SIZE 0            | “           | 1               |
| 7               | AIRWAYS (OROPHARYNGEAL)-SIZE 1            | “           | 1               |
| 8               | AIRWAYS (OROPHARYNGEAL)-SIZE 2            | “           | 1               |
| 9               | AIRWAYS (OROPHARYNGEAL)-SIZE 3            | “           | 1               |
| 10              | AIRWAYS (OROPHARYNGEAL)-SIZE 4            | “           | 1               |
| 11              | AMBULANCE CERVICAL COLLAR LARGE           | “           | 2               |

|    |                                 |     |             |
|----|---------------------------------|-----|-------------|
| 12 | AMBULANCE CERVICAL COLLAR MED   | “   | 2           |
| 13 | AMBULANCE CERVICAL COLLAR SMALL | “   | 2           |
| 14 | BED PAN (PLASTIC)               | “   | 1           |
| 15 | CLICK CLAMPS (CORD CLAMPS)      | “   | 5           |
| 16 | DISPO DELIVERY KIT              | “   | 5           |
| 17 | DISPO SYRINGES 10CC             | “   | 5           |
| 18 | DISPO SYRINGES 2CC              | “   | 10          |
| 19 | DISPO SYRINGES 5CC              | “   | 10          |
| 20 | FACE MASK RESPIRATOR            | “   | 2           |
| 21 | FACE MASKS BOX (PACKET)         | Box | Pack of 100 |
| 22 | I V CANULA-SIZE 16              | Nos | 5           |
| 23 | I V CANULA-SIZE 18              | “   | 10          |
| 24 | I V CANULA-SIZE 20              | “   | 10          |
| 25 | I V CANULA-SIZE 22              | “   | 10          |
| 26 | I V CANULA-SIZE 24              | “   | 5           |
| 27 | I V SET PEDIATRIC               | “   | 2           |
| 28 | I V SETS ADULT                  | “   | 10          |
| 29 | KIDNEY TRAY                     | “   | 1           |
| 30 | LANCETS                         | “   | 50          |
| 31 | MACKINTOSH ( 1 X 2 MTS )        | “   | 1           |
| 32 | MUCOUS SUCKER                   | “   | 2           |
| 33 | NASAL CANNULA-ADULT             | “   | 5           |
| 34 | NASAL CANNULA-CHILD             | “   | 5           |
| 35 | NEBULISATION MASK ADULT         | “   | 5           |
| 36 | NEBULISATION MASK CHILD         | “   | 5           |
| 37 | OXYGEN CYLINDER PORTABLE        | “   | 1           |
| 38 | OXYGEN MASK ADULT               | “   | 5           |
| 39 | OXYGEN MASK CHILD               | “   | 5           |
| 40 | PLASTIC APRONS                  | “   | 2           |
| 41 | SPLINTS : LONG ARM              | “   | 2           |

|                 |   |        |               |
|-----------------|---|--------|---------------|
| 42              | SPLINTS : SHORT LEG   | “      | 2             |
| 43              | SPLINTS : SHORT ARM   | “      | 2             |
| 44              | SPLINTS : LONG LEG  | “      | 2             |
| 45              | SPUTUM CUP  | “      | 1             |
| 46              | STRIP GLUCOMETER  | “      | 1             |
| 47              | SUCTION CATHETER 12   | “      | 5             |
| 48              | SUCTION CATHETER 16   | “      | 5             |
| 49              | SUCTION CONNECTOR   | “      | 1             |
| 50              | SURGICAL GLOVES (1 OF 100 PIECES)                             | Box    | Pack of 100   |
| 51              | STERILISED SILK SUTURE WITH CURVED CUTTING NEEDLE 1/0,2/0,3/0 | Nos    | one each type |
| 52              | URINE PAN ( PLASTIC)  | “      | 1             |
| <b>MEDICINE</b> |   |        |               |
| 1               | GLUCOSE 100GM   | Nos    | 2             |
| 2               | I V FLUID DEXTROSE 25%  | Bottle | 5             |
| 3               | I V FLUID NORMAL SALINE                                       | “      | 10            |
| 4               | I V FLUID RINGER (RL)   | “      | 10            |
| 5               | I V FLUID 5% GNS  | “      | 5             |
| 6               | INJ ADRENALINE 1ML  | Nos    | 5             |
| 7               | ASTHALIN-NEUBILIZING SOLUTION                                 | “      | 5             |
| 8               | INJ ATROPINE 1ML  | “      | 20            |
| 9               | INJ AVIL 2ML  | “      | 5             |
| 10              | BUDESONIDE-NEUBILIZING SOLUTION                               | “      | 5             |
| 11              | INJ DISTILLED WATER 5ML                                       | “      | 5             |
| 12              | INJ DIZAZEPAM 2ML   | “      | 5             |
| 13              | INJ HYDROCORTISONE 100 MG                                     | “      | 5             |
| 14              | INJ LASIX 2ML   | “      | 5             |
| 15              | INJ PARACITAMOL 2ML   | “      | 5             |
| 16              | INJ RANTIDINE 2ML   | “      | 5             |

|                    |   |        |         |
|--------------------|---|--------|---------|
| 17                 | INJ TRAMADOL 2ML                                    | “      | 5       |
| 18                 | INJ TRANEXAMINIC ACID                               | “      | 4       |
| 19                 | INJ NEOSTIGMIN                                      | “      | 4       |
| 20                 | INJ HAEMACCEL                                       | “      | 2       |
| 21                 | INJ MANITOL   | “      | 5       |
| 22                 | INJ SODABICARB 7.5%                                 | “      | 5       |
| 23                 | INJ METACLOPROMIDE                                  | “      | 5       |
| 24                 | INJ PHENYTOIN                                       | “      | 5       |
| 25                 | INJ HYOSYIMINE BROMIDE OR DICYCLOMINE HYDROCHLORIDE | “      | 5       |
| 26                 | INJ METHARGIN                                       | “      | 5       |
| 27                 | ORS 4.20GM  | “      | 10      |
| 28                 | SYP ANTACID ANAESTHETIC GEL                         | Bottle | 1       |
| 29                 | SYP PARACITAMOL 60ML                                | “      | 1       |
| 30                 | TAB ACTIVATED CHARCOAL                              | Strip  | 1       |
| 31                 | TAB CLOPIDOGREL                                     | “      | 1       |
| 32                 | TAB DISPRIN/ASPRIN                                  | “      | 1       |
| 33                 | TAB PARACETAMOL                                     | “      | 1       |
| 34                 | TAB ISOSORBRITE DINITRATE 5MG SUBLINGUAL            | “      | 1 Strip |
| 35                 | XYLOCAINE (WOCAINE GEL) 2% 30GM JELLY               | Nos    | 1 tube  |
| <b>NON-MEDICAL</b> |   |        |         |
| 1                  | LIQUID MOSQUITO REFIL                               | Nos    | 1       |
| 2                  | LIQUID MOSQUITO MACHINE                             | “      | 1       |
| 3                  | BIO HAZARD PLASTIC BAG (YELLOW)                     | “      | 10      |
| 4                  | BIO-HAZARD PLASTIC BAGS (RED)                       | “      | 10      |
| 5                  | CLEANING POWDER 0.500KG                             | “      | 1       |
| 6                  | CLEANING RUBBER WIPERS                              | “      | 1       |
| 7                  | DISINFECTANT 1 LTR                                  | “      | 1       |
| 8                  | DOOR MATS   | “      | 1       |
| 9                  | DOPING CLOTH  | “      | 5       |

|                    |                              |     |    |
|--------------------|------------------------------|-----|----|
| 10                 | GLASS CLEANER 500ML          | “   | 1  |
| 11                 | LIQUID HAND WASH             | “   | 1  |
| 12                 | ODONIL PACKET                | “   | 1  |
| 13                 | PHENYL 5LTR                  | “   | 1  |
| 14                 | POLYTHENE BAG (Blue & Black) | “   | 2  |
| 15                 | ROOM FRESHENERS              | “   | 1  |
| 16                 | SPONGES                      | “   | 2  |
| 17                 | TEFLON TAPE                  | “   | 1  |
| 18                 | TISSUE PAPERS                | “   | 1  |
| 19                 | YELLOW CLOTH                 | “   | 5  |
| <b>OTHER ITEMS</b> |                              |     |    |
| 1                  | BED SHEETS                   | Nos | 1  |
| 2                  | PLASTIC BUCKETS              | “   | 1  |
| 3                  | PLASTIC JAR MEDIUM 500ML     | “   | 5  |
| 4                  | PLASTIC JAR SMALL 250ML      | “   | 17 |
| 5                  | PLASTIC MUG                  | “   | 1  |
| 6                  | RAIN COAT                    | “   | 2  |
| 7                  | TRAY PLASTIC                 | “   | 2  |
| <b>STATIONARY</b>  |                              |     |    |
| 1                  | ACCIDENT INFORMATION FORM    | Nos | 1  |
| 2                  | ATTENDANCE RECORD REGISTER   | “   | 1  |
| 3                  | BINDER PIN (1 BOX )          | Box | 1  |
| 4                  | BLANK REGISTER               | Nos | 1  |
| 5                  | BLUE PEN                     | “   | 2  |
| 6                  | BOOK FOR AMBULANCE (SPIRAL)  | “   | 1  |
| 7                  | CLOTH NAPKIN                 | “   | 2  |
| 8                  | CORRECTION FLUID             | “   | 1  |
| 9                  | DAILY STATEMENT REGISTER     | “   | 1  |

|    |                                  |     |   |
|----|----------------------------------|-----|---|
| 10 | DIESEL AND OIL RECORD REGISTER   | “   | 1 |
| 11 | EMT CHECK LIST DAILY             | “   | 1 |
| 12 | EQUIPMENT BOOK FOR AMB           | “   | 1 |
| 13 | ERASER                           | “   | 2 |
| 14 | ERCPC EQUIPMENT BOOK             | “   | 1 |
| 15 | EXTICATION KIT REGISTER          | “   | 1 |
| 16 | FACE TISSUE BOX                  | “   | 1 |
| 17 | FEVI STICK                       | “   | 1 |
| 18 | FLAT FILE                        | “   | 2 |
| 19 | INVENTORY REGISTER               | “   | 1 |
| 20 | PATIENT RECIVING RECORD REGISTER | “   | 1 |
| 21 | PCR BOOK                         | “   | 2 |
| 22 | PENCIL                           | “   | 2 |
| 23 | PLASTIC BOX SQUARE TYPE          | “   | 1 |
| 24 | POSTERS EMRI LEAFLETS            | “   | - |
| 25 | PUNCHING MACHINE                 | “   | 1 |
| 26 | RED PENS                         | “   | 2 |
| 27 | SCALE                            | “   | 1 |
| 28 | SCRIBBLING PAD                   | “   | 1 |
| 29 | SHARPENER                        | “   | 1 |
| 30 | SKETCH PEN                       | “   | 2 |
| 31 | SLIP PAD                         | “   | 1 |
| 32 | SPIRAL BOOK                      | “   | 1 |
| 33 | STAMP PAD                        | “   | 1 |
| 34 | STAPLER                          | “   | 1 |
| 35 | STAPLER PIN                      | Pkt | 1 |
| 36 | STOCK RECORDS                    | Nos | 1 |
| 37 | TRIP SHEET REGISTER              | “   | 1 |
| 38 | VEHICLE CHECK LIST – DAILY       | “   | 1 |
| 39 | VEHICLE CHECK LIST – WEEKLY      | “   | 1 |

|                           |                                   |     |   |
|---------------------------|-----------------------------------|-----|---|
| 40                        | VEHICLE COMPLAINT REGISTER        | “   | 1 |
| 41                        | VEHICLE DEFECT REGISTER           | “   | 1 |
| 42                        | VEHICLE LOG BOOK                  | “   | 1 |
| 43                        | VISITORS FORM / BLANK BOOK        | “   | 1 |
| 44                        | WORKSHOP BREAKEDOWN REGISTER      | “   | 1 |
| <b>MEDICAL EQUIPMENTS</b> |                                   |     |   |
| 1                         | AMBU BAG- CHILD (BAG VALUE MASK)  | Nos | 1 |
| 2                         | AMBU BAG- ADULT (BAG VALUE MASK)  | “   | 1 |
| 3                         | ARTERY FORCEPS 6”                 | “   | 1 |
| 4                         | AUTOMATIC BP APPARATUS            | “   | 1 |
| 5                         | CHARGER PULSE OXYMETER            | “   | 1 |
| 6                         | CYLINDER KEY                      | “   | 1 |
| 7                         | FORCEPS PLAIN 6”                  | “   | 1 |
| 8                         | GLUCOMETER                        | “   | 1 |
| 9                         | HUMIDIFIER                        | “   | 2 |
| 10                        | MANUAL BP APPRATUS                | “   | 1 |
| 11                        | MASK TO MOUTH RESPIRATOR- ADULT   | “   | 1 |
| 12                        | MASK TO MOUTH RESPIRATOR- CHILD   | “   | 1 |
| 13                        | NEBULISOR MACHINE                 | “   | 1 |
| 14                        | NEEDLE AND SYRINGE DESTROYER      | “   | 1 |
| 15                        | OXYGEN CYLINDER (D TYPE)          | “   | 2 |
| 16                        | OXYGEN FLOW METER                 | “   | 2 |
| 17                        | PULSE OXYMETER (MOTION TOLERANCE) | “   | 1 |
| 18                        | REGULATOR                         | “   | 2 |
| 19                        | SCISSOR STREIGHT                  | “   | 1 |
| 20                        | SCISSORS 6” WITH ROUND TIP        | “   | 1 |
| 21                        | SCOOP STRETCHER                   | “   | 1 |
| 22                        | SENSOR LEAD (SPO 2)               | “   | 1 |
| 23                        | SPINE BOARD STRETCHER             | “   | 1 |

|              |   |       |    |
|--------------|---|-------|----|
| 24           | STETHOSCOPE                               | “     | 1  |
| 25           | STRETCHER CUM TROLLEY                     | “     | 1  |
| 26           | SUCTION PUMP BATTERY OPERATED             | “     | 1  |
| 27           | SUCTION PUMP HAND OPERATED                | “     | 1  |
| 28           | THERMOMETER DIGITAL                       | “     | 1  |
| 29           | TONGUE DEPRESSOR WOODEN                   | “     | 10 |
| 30           | TOOTHED FORCEPS 6”                        | “     | 1  |
| 31           | WHEEL CHAIRS STRETCHER                    | “     | 1  |
| <b>TOOLS</b> |   |       |    |
| 1            | ALLEN KEY 14MM                            | Nos   | 1  |
| 2            | ALLEN KEY 5 MM                            | “     | 1  |
| 3            | ALLEN KEY 6 MM                            | “     | 1  |
| 4            | ALLEN KEY 8 MM                            | “     | 1  |
| 5            | BOLT CUTTER WITH 1” TI 1 3/4” JAW OPENING | “     | 1  |
| 6            | CROWBAR 51” PINCH POINT                   | “     | 1  |
| 7            | FIRE BLANKET (RESCUE)                     | “     | 1  |
| 8            | FIR AXE WITH 24” HANDLE                   | “     | 1  |
| 9            | FIRE EXTINGUISHER 5 KGS ABC TYPE          | “     | 1  |
| 10           | GUM BOOTS                                 | Pairs | 1  |
| 11           | HACKSAW WITH 12” CARBIDE WIRE BLADES]     | Nos   | 1  |
| 12           | HAMMER 5 LB WITH 15” HANDLE               | “     | 1  |
| 13           | HAND GLOVES (GAUNTLETS)                   | Pairs | 1  |
| 14           | LUMINOUS WARNING TORCH                    | “     | 1  |
| 15           | MASTIC KNIFE                              | “     | 1  |
| 16           | O.T GOGGLES                               | “     | 2  |
| 17           | PLIERS PIPE GRIPS 10”                     | “     | 1  |
| 18           | PLIERS SIDE CUTTING 200 MM                | “     | 1  |
| 19           | PRUNING SAW                               | “     | 1  |
| 20           | PUNCH CENTRE                              | “     | 1  |

|    |                                      |   |   |
|----|--------------------------------------|---|---|
| 21 | PUPILLARY TORCH (AA BATTERY X 2NOS   | “ | 1 |
| 22 | ROPE 5100 LB TENSILE STRENGTH IN 50’ | “ | 1 |
| 23 | SCREW DRIVER 12” STANDARD SQUARE BAR | “ | 1 |
| 24 | SCREW DRIVER NP 150 MM               | “ | 1 |
| 25 | SCREW DRIVER PHILLIPS HEAD 150 MM    | “ | 1 |
| 26 | SCREW DRIVER PHILLIPS HEAD 8”        | “ | 1 |
| 27 | SHOVEL GS POINTED BLADE              | “ | 1 |
| 28 | SPANNER OJDE 12 X 13 MM              | “ | 1 |
| 29 | SPANNER OJDE 14 X 15 MM              | “ | 1 |
| 30 | SPANNER OJDE 16 X 17 MM              | “ | 1 |
| 31 | SPANNER OJDE 20 X 22 MM              | “ | 1 |
| 32 | SPANNER OJDE 6 X 7 MM                | “ | 1 |
| 33 | SPANNER RTDE 10 X 11 MM              | “ | 1 |
| 34 | SPANNER RTDE 12 X 13 MM              | “ | 1 |
| 35 | SPANNER RTDE 14 X 15 MM              | “ | 1 |
| 36 | SPANNER RTDE 16 X 17 MM              | “ | 1 |
| 37 | SPANNER RTDE 18 X 19 MM              | “ | 1 |
| 38 | SPANNER RTDE 20 X 22 MM              | “ | 1 |
| 39 | SPANNER RTDE 6 X 7 MM                | “ | 1 |
| 40 | SPANNER RTDE 8 X 9 MM                | “ | 1 |
| 41 | TIN SNIPS, DOUBLE ACTION 8” MINIMUM  | “ | 1 |
| 42 | WRECKING BAR WITH 24” HANDLE         | “ | 1 |
| 43 | WRENCH ADUSTABLE 12” OPEN END        | “ | 1 |

## **ANNEXURE- 16: STAFF DEPLOYMENT & TRAINING**

### **AMBULANCE STAFF:**

#### **Ambulance Drivers (As in Government for driving of light (LCV) vehicles)**

- Vehicular Safety Checks
- Elements
- Ambulance Driving Techniques
- Accident Avoidance and Crash Procedures
- Basic Life Support
- Disaster Management Protocols

#### **Emergency Medical Technician (EMT) (GNM/ B. Sc (Nursing))**

- In-Depth Anatomy and Physiology
- Primary Care Theory
- Trauma Care Theory
- IV Administration and Theory
- Nasopharyngeal Suctioning
- D50W Administration Theory
- Pharmacology
- Cardiac Monitoring
- Oxygen Delivery Theory and Practical
- Patient Assessments
- Communications
- Transportation
- Ambulance Operations
- Trauma
- CPR
- AED
- Clinical Hospital Practice
- Basic Life Support
- Disaster Management Protocols
- Care issues

### **CALL CENTRE STAFF:**

#### **COMMUNICATION OFFICER (CALL TAKER)**

Who are responsible for attending all the 108 calls and taking down the basic information related to the caller and emergency. The capacity of each CO in a shift of 8 hours is approximately 500-600 calls. They undergo 21 days training before assuming the role of the CO.

### **DISPATCH OFFICER (DO)**

Who sensitize the emergencies and decides the dispatch of ambulance to the emergency site and coordinate with the ambulance staff/ first responder and emergency response centre physical for virtual handling. The capacity of each DO in a shift of 8 hours is approximately 90-100 calls. They undergo 21 days training before assuming the role of the CO.

### **POLICE DISPATCH OFFICER (PDO)**

Who take care of exclusive police cases and also the legal aspect of the medico-legal cases. These are the personnel provided by the police department.

### **MEDICAL DOCTOR**

A medical doctor should be available on call 24x7 to assist the EMT to provide virtual medical direction for all critical cases.

Apart from the above following personnel will also be deployed at the call centre:

1. Team leader: for every 15 CO/DO
2. Feedback and research officer (1person on every 15 call dispatch officer): To take continuous feedback from the patients using the 108-Ambulance service so as to improve/ upgrade the services being provided to the people of Rajasthan.

### **DISTRICT MANAGER:**

For every district there will be a District manager (head of operations) and is responsible for all administrative functions within the district including interaction with hospitals /District government officials. He will also be responsible for repair and maintenance of the Ambulances as per schedule.

### **ZONAL MANAGER:**

The zonal manager will be head of the zone and all respective district managers will report to him.

### **ADMINISTRATIVE STAFF**

- Emergency Medical Services
- Emergency Department
- Administrative issues
- Staff Management
- Financial Planning

## ANNEXURE- 17: CHECK LIST OF DOCUMENTS

**Check List of documents to be submitted along with the financial proposal to RSHS (NRHM):-**

| SNo. | List of documents  | Y/N | Page no. |
|------|--|-----|----------|
| 1    | Audited financial statements of the bidder/parent /ultimate parent (whichever is used for the meeting the qualification criterion) for the year for which Net worth is to be considered.                     |     |          |
| 2    | To demonstrate annual turnover/ gross receipts in this segment of atleast Rs.10 (ten) Crores in each of the last 3 (three) financial years, the bidder shall submit audited annual accounts for last 3 years |     |          |
| 3    | In case of a Consortium, Audited Annual Reports and financial statements of all the Members of Consortium  |     |          |
| 4    | Financial Proposal (BOQ) as per Annexure-2   |     |          |
| 5    | Schedule or rates as per Annexure- 3.  |     |          |
| 6    | Board resolutions {as per Annexure-3A(i) & 3A (ii)}  |     |          |
| 7    | Joint Bidding Agreement (as per Annexure-9).   |     |          |
| 8    | Anti Collusion Certificate (as per Annexure-10B).  |     |          |
| 9    | Financial Capability of the bidder duly certified by C.A. (as per Annexure-13 & 13A).  |     |          |

**Check List of documents to be submitted along with the technical proposal to RSHS (NRHM):-**

| SNo. | List of documents   | Y/N | Page no. |
|------|---|-----|----------|
| 1    | DD for cost of RfP of Rs. 10000/- in favour of Rajasthan State Health Society, payable at Jaipur (Non refundable) |     |          |
| 2    | DD towards RISL Processing fees for Rs. 1000/- in favor of M.D. RISL.   |     |          |
| 3    | Bid security DD/Banker's cheque for Rs. 50, 00,000/- in favor of "Rajasthan State Health society Jaipur".         |     |          |
| 4    | Certificates from the organizations to whom services have been provided in past.                                  |     |          |

|    |  |  |  |
|----|--|--|--|
| 5  | Duly filled up Application Form (as per Annexure-1).   |  |  |
| 6  | Format for undertaking (as per Annexure-1A).   |  |  |
| 7  | Covering Letter cum Project Undertakings as per Annexure-4.  |  |  |
| 8  | Power of Attorney authorizing the signatory for signing the proposal on behalf of the proposer/Bidder as per Annexure-5.   |  |  |
| 9  | In case of consortium, original Power of attorney for signing of application by the lead member as per Annexure-6.   |  |  |
| 10 | Letter of Exclusivity (in case of application by Consortium) as per Annexure-8.  |  |  |
| 11 | Affidavit certifying that entity/promoters/Directors/members of an entity are not blacklisted as per Annexure 10A.   |  |  |
| 13 | Affidavit of Declaration (Anti Collusion Certificate) mentioning that the applicant/consortium will not collude with the other applicants as per Annexure-10B  |  |  |
| 14 | A summary of relevant past experience and its registration should also be provided as per Annexure-11.   |  |  |
| 15 | Details of all information related to past experience and background should describe the nature of work, name & address of client, date of award of assignment, size of the project etc. as per Annexure-12. |  |  |
| 16 | Proposed organizational structure and Curriculum Vitae (CV) of key personnel to be involved in the operation of the project.   |  |  |
| 17 | Service tax clearance certificate / no dues from the assessing officer.  |  |  |
| 18 | Certificates of relevant experience issued by government or any other organizations by a competent authority.  |  |  |

## Abbreviations

|          |   |
|----------|---|
| AMC      | Annual Maintenance Contract                     |
| AVLT     | Automated Vehicle Location Tracking             |
| BG       | Bank Guarantee                                  |
| BLSA     | Basic Life Support Ambulances                   |
| BoQ      | Bill of Quantity                                |
| CO       | Communication Officer                           |
| DO       | Dispatch Officer                                |
| DR       | Disaster Recovery                               |
| EMD      | Earnest Money Deposit                           |
| EMT      | Emergency Management Technician                 |
| ERC      | Emergency Response Center                       |
| ERS      | Emergency Response Services                     |
| GIS      | Geographical Information System                 |
| GNM      | General Nursing Midwifery                       |
| GOR      | Government of Rajasthan                         |
| GPRS     | General Packet Radio Service                    |
| GPS      | Global Positioning System                       |
| GSM      | Global System for Mobile Communication          |
| IEC      | Information, Education, Communication           |
| IMR      | Infant Mortality Rate                           |
| MD, NRHM | Mission Director, National Rural Health Mission |
| MDA      | Model Driven Architecture                       |
| MDG      | Millennium Development Goals                    |
| MIS      | Management Information System                   |
| MMR      | Maternal Mortality Ratio                        |
| NRHM     | National Rural Health Mission                   |
| PD       | Project Director                                |
| PH       | Public Health                                   |
| PSTN     | Public Switched Telephone Network               |
| RFP      | Request for Proposal                            |
| RSHS     | Rajasthan State Health Society                  |
| SIHFW    | State Institute of Health & Family Welfare      |
| SoP      | Standard Operating Procedures                   |
| UAT      | User Acceptance Test                            |
| VoIP     | Voice over Internet Protocol                    |