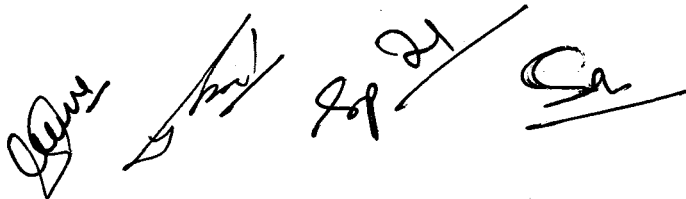


REQUEST FOR PROPOSAL
FOR
"ADVANCED INTEGRATED AMBULANCE SERVICES"
as "Dial an ambulance Service Project"

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

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***DOCUMENT OF REQUEST FOR PROPOSAL
FOR***

***"ADVANCED- INTEGRATED AMBULANCE
SERVICES"***

as "Dial an ambulance Service Project"

2019-20

278

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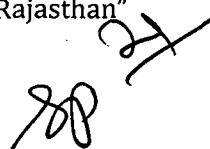


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Disclaimer

The information contained in this RFP document or subsequently provided to Applicant(s), by National 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 (NHM) 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 (NHM), 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 (NHM), 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 (NHM) may on its absolute discretion, but without being under any obligation to do so, update, amend or supplement the information in this RFP document. Bidders are advised to acquaint themselves with the provisions of the law relating to procurement, "The Rajasthan Transparency in Public Procurement Act, 2012" and "Rajasthan Public Procurement Rules", 2013. If there is any discrepancy between the provisions of the Act and the Rules and this Bidding document, The provisions of the Act and Rules shall prevail.



Part- A1

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

F. No. 23 ()/NRHM/ISC/A-IAP/Tender/2019-20/ **470**

Date: 05 / 12 / 2019

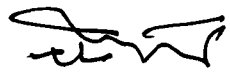
NOTICE

RFP published vide Notification No. F. No. 23 ()/NRHM/ISC/A-IAP/Tender/2019-20/470 dated 05.15.19 uploaded on sppp.rajasthan.gov.in, portal departmental website, www.rajswasthya.nic.in and website: <http://eproc.rajasthan.gov.in>. Proposals shall be submitted online in electronic format on website: <http://eproc.rajasthan.gov.in>

All details related to this RFP can be viewed and downloaded from sppp.rajasthan.gov.in, departmental website www.rajswasthya.nic.in and website: <http://eproc.rajasthan.gov.in>. Timelines are as below:-

Date and time for downloading RFP document	Date of pre-bid conference	Last date and time for downloading the RFP document	Last date and time for submission of online proposals	Last date to deposit SD/RISL fees/Bid form fees in physical form at Room no. 312, 3 rd floor, NHM Building, Swasthya Bhawan, Jaipur	Date and time for opening of technical proposals.	Date and time for opening of financial proposals.
05.12.19 at 4:00 PM onwards	12.12.19 at 11:00 AM	24.12.19 upto 12:00 PM	24.12.19 upto 3:00 PM	24.12.19 upto 4:00 PM	24.12.19 at 05:00 PM	Shall be informed separately to the qualified bidders

Note:- In case if any date mentioned above happens to be a holiday, the scheduled activity of that date will be carried out on next working day on same time.


Mission Director, NHM

"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 25% (twenty Five 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, 2013.

"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.

"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 "Integrated 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 "Integrated 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, 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.

"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 (NHM) to the Successful Bidder(s) for Operation and Maintenance of ambulances under the "integrated 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 Five percent (25%) 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.

"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, addendums 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 "Integrated 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 "Integrated 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.

"Valid Call": Any call made by a caller to seek services of 108 ambulance, 104 Janani Express, It also refers to the call made by a caller in case of emergency/ non -emergency seeking the services available at the call center. It is the responsibility of the service provider to direct the call to the relevant call taker/section/doctor/ambulance/vehicle etc. and provide necessary service to the caller as per the need. It does not include a call which is of a nature e.g. a missed call/disconnected call/nuisance call/prank call/silent call/wrong call/dropped call to which service provider is not expected to deliver any service laid down in the RFP.

"Invalid Calls": All calls which are not covered under the definition of Valid Call.

"Inspection of ambulances/vehicles" :Any Physical verification undertaken by any authority designated by MD, NHM at random or on regular basis. The inspection shall be undertaken on a prescribed checklist given by NHM. Regular inspections shall be undertaken by the district authorities based on mobile application and report of the said inspection will be sent to the district and state authorities. It will have a provision of calculation of the penalty on the basis of the checklist and the provisions of the agreement. The calculated amount of penalty for a particular ambulance for one inspection shall immediately be intimated to the district and same deduction shall be affected from the claims of the service provider. The responsibility of development of mobile app is the responsibility of the service provider to incorporate in the IT /software part.

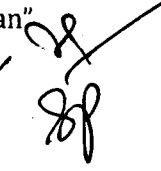
"Services of 108 Ambulances" "108 ambulances shall be assigned in following cases but not limited to:-

- a. Road Traffic Accidents
- b. Mass Casualties
- c. Snake Bite
- d. Burn case
- e. Heart Attack
- f. Poisoning/food poisoning
- g. Pregnancy related cases/for sick new borns (if 104 Janani Express is not available in that area or it is engaged on a separate case)
- h. Referral in case of emergency or
- i. Any other medical emergency

"Services of 104 Janani Express vehicles" 104 janani Express shall be assigned in following cases:-

- For pregnant women/pregnancy related cases (both pre and post) from home to hospital and hospital to home. (Except District hospital & Medical colleges)
- For transport of sick/referred children upto an age of 18 years.
- Referral cases under RBSK programme.
- Drop back home facility to sterilization cases.
- However; any other service may be added as per directions of NHM/Govt time to time.

2/8

Information to prospective bidders regarding on line bidding:

E-Procurement:-

1. Request for proposal for the "Advanced Integrated Ambulance Services" as "Dial an 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 No's. 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 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

1	The tender documents can be downloaded from web site http://eproc.rajasthan.gov.in . Detail of this tender notification and pre-qualification criteria can also be seen in NIB exhibited on website www.rajswasthya.nic.in Tenders are to be submitted online in electronic format on website http://eproc.rajasthan.gov.in
2	1. The tender document can be downloaded from website http://eproc.rajasthan.gov.in. 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/Bank Guarantee by Bid due date 2. (a) Tender fees of Rs.200000/- in words (Rs. Two Lakhs only) in the form of DD/Bankers Cheque in favor of Rajasthan State Health Society. (b) RISL Processing fees of Rs. 1000/- in words (Rs. One Thousand only) in the form of DD/Bankers Cheque in favor of MD RISL as mentioned in the notification published in newspaper (refer circular no 19/2011 dated 30-09-2011). (C) Bid Security Deposit of Rs. 13.68/- crores in words (Thirteen crores and Sixty eight Lakhs only) in the form of DD/Bankers cheque/Bank Guarantee/FDR in favor of Rajasthan State Health Society 3. Annexure 1 and 4 have also to be submitted physically.
3	Last date & time for downloading of tender document: As per notification in part A1 of the RFP.
4	Last date and time of submission of online bids As per notification in part A1 of the RFP.
5	Date and time of Opening of online bids As per notification in part A1 of the RFP.
6	Physical submission of Tender Fee , Processing Fee & BID SECURITY at the Office of Tendering Authority: MD, NHM, III rd floor, Main Building, Swasthya Bhawan, Tilak Marg, Jaipur (Rajasthan) – 302005 before stipulated time As per notification in part A1 of the RFP. In absence of the above fee, the e-bid will not be processed further and the bid shall be rejected (DD/ Bankers Cheque/bank Guarantee should be in the favor of Rajasthan State Health Society)

27/12

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Instructions to Bidders for online tendering (e-tendering)	
1	The bidders who are interested in bidding shall participate through e bidding system of http://eproc.rajasthan.gov.in .
2	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 Bid Security. It should be submitted manually in the office of Tendering Authority as mentioned in the RFP document and scanned copy of D.D./BG should also be uploaded along with the online bid.
3	• Bidders are strictly instructed to quote their rates in BOQ on eproc only. • Bidders shall not indicate their rates in technical bid/proposal in any form. If found, Bid will be rejected at first instance.
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.

For more Information contact to:

ISC Section, NHM: 0141-2220961; Email ID: co_isc.nrhm@yahoo.com

Project Director, NHM: 0141-2220289; Email ID: pd-nrhm-rj@nic.in

**IMPORTANT
DATES**

Notice inviting tender published in Newspapers	As per notification in part A1 of the RFP.
Download of RFP by prospective bidders	As per notification in part A1 of the RFP from www.eproc.rajasthan.gov.in , departmental website www.rajswasthya.nic.in and sppp.rajasthan.gov.in
Last date for receiving the queries	As mentioned in clause 2.3.3
Cost of RFP document	As per notification published vide no. F. No. 23 ()/NRHM/ISC/AIAP/2019-20/ dated
Last date & time for submission of electronic Bid (the "Bid Due Date")	As per notification in part A1 of the RFP document.
Date, time and place of opening of Proposal and presentation	As per notification in part A1 of the RFP document. For technical presentation eligible bidders will be informed separately.
Issue of Letter of Intent (LOI)	Within 3 days of approval of award by the competent authority.
Signing of management Agreement	Within 7 days of acceptance of LOI

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Part- A2

INFORMATION AND INSTRUCTIONS TO THE BIDDERS

2.1 The name and objectives of the project:-

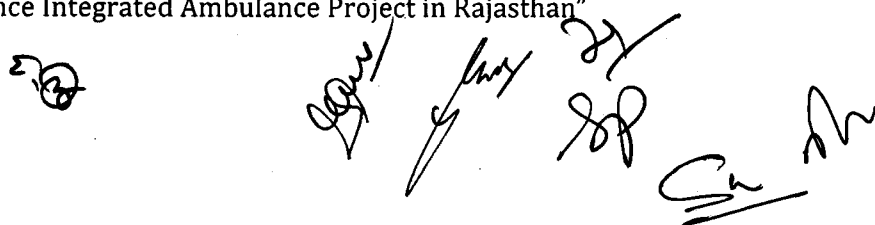
Name of the project: "Advanced Integrated Ambulance Project Services" as "Dial an Ambulance Service Project" in The State of Rajasthan.

Among the major attributes, delay in reaching to an appropriate health facility is considered to be one of the prime factors contributing to high number of deaths in emergencies. It also results in high NMR and MMR if the pregnant women or sick new born doesn't get a prompt referral transport within specified time. This normally happens either due to lack of readily available and affordable transport facility or inaccessibility / distance for which people fail to access institutional health services. Apart from this it is also a well-known fact that if any emergency reaches to/ gets medical aid within **Golden Hour**, chances of saving a life can be increased manyfolds.

In view of all above, the Government of Rajasthan took initiative to integrate the existing separate Two services and operate the same through a single centralized call center i.e. 108/104 to improve overall operational efficiency and cost effectiveness of both schemes. The purpose of this RFP is to invite proposal from eligible parties to operate and manage Emergency Ambulance Service (108), 104 Janani Express.

The scheme is formulated by Medical & Health Department with financing from RSHS (NHM) & State Plan. Presently 701 ambulances (108) are running across the State under the scheme for providing emergency care, 581 Janani Express vehicles are also operational for providing referral; transport. However; the bidder will be handed over only with the ambulances/vehicles which are in roadworthy condition. Bidder may thus, take into account, a fleet of 701 ambulances (108), 581 Janani Express Ambulances are to be operated during the year 2019-20 and 204 ambulances (108) on turnkey basis which will be replaced later on by Service provider in place of Ambulances proposed to be condemned within the timeframe of 120 Days (in phased manner) as mentioned in Annexure 20 hence, it will contribute to make the total fleet of 741 Ambulances (108), 600 Janani Express vehicles. However; the numbers are indicative and may differ from the actual handed over vehicles , But in any condition, the fleet shall not exceed from 741 Ambulances(108), 750 Ambulances (104 Janani Express (600 Existing and 150 Subject to approval from GoI) .For abovementioned services, A centralized call Centre is presently operational in SIHFW building at Jhalana Dūngri, Jaipur.

Scope of work mainly includes operationalization of an existing project with a fleet of 701 ambulances (108), 581 Janani Express (104) deployed strategically across the State of Rajasthan supported with two fully functional call centers situated at State Institute of Health & Family Welfare (SIHFW) building in Jhalana Dungari, Jaipur which is receiving approximately 12000 calls per day and handling approx. 3500 emergencies on daily basis. Number/type of Ambulances may increase/ decrease during the contract period. The scope of services shall include procurement of assets, operation and maintenance of Ambulances, Ambulances to be deployed on turnkey basis, provision of medical and non-medical consumables constantly, as specified in Annexure- 15 of this RFP and also associated activities in designated zones within the State of Rajasthan.



Advanced Integrated Ambulance Service Concept:-

Caller can dial a single number from anywhere in Rajasthan in case he/she needs/ or can also access the services through AIAP Mobile app. It shall be the responsibility of the Service Provider for development of AIAP Mobile App and its maintenance for the project period.

1. Services of emergency/referral transport either through 108 or 104
2. Services of 104 Janani Express,

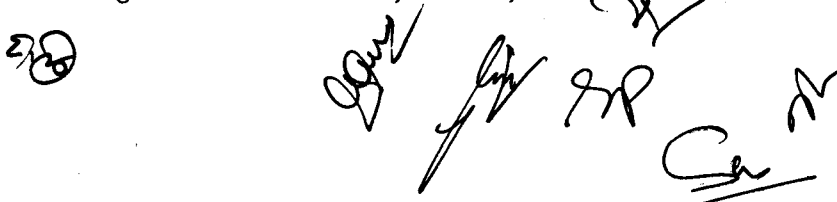
Emergencies related to Police and fire is also reported on the same number. Police and Fire emergencies are being referred to nearby police station/fire station. The Integrated Ambulance Project is monitored on the basis that all valid calls or cases should not be left unattended and corresponding services should be made available as detailed in the RFP's part A3. Service Provider is penalized if any service is denied or call is not attended or service is provided late or not as per conditions. It is not target based.

The components of this concept are:-

Services of 108 ambulances, 104 Janani Express:-

- To provide 24 x 7 Ambulance/referral /medical transport Services through 108/104 toll-free numbers across all 34 districts in the state of Rajasthan.
- Identify and respond to medical, police and fire emergencies in the entire state of Rajasthan managed through a centralized integrated call center and an existing fleet of 701 Basic Life Support Ambulances (BLS), 581 Janani Express vehicles ,which may be scaled up further but shall not exceed from 741 BLS Ambulances, 750 Janani Express (600 Existing and 150 Subject to approval from GoI) .
- Operate and integrate 24 x 7 108 and 104 call Centers for managing and coordinating all these ambulances and vehicles.
- Deploy trained, professional, well behaved manpower in these ambulances (Driver and EMT in 108 ambulances and drivers in 104 Janani Express) with uniform and ID cards in the ambulance and specified medical equipment that will stabilize the patients and then transport them to the nearest / required as per condition of Patients to Government/ Trauma centers /authorized private Hospital & provide referral transport services to pregnant women and , sick children up to 18 years with the help of Janani Express vehicles within the shortest possible time adhering to the response time standards as per clause. Pre arrival intimation of Ambulances at various health facilities.
- Traige coding about Patient's health condition i.e.
 - Red – Patient need ICU
 - Yellow – Patient need admission.
 - Green – Patient to be treated as outpatient.
- Operationalization, management and maintenance of a fleet of all these ambulances/ vehicles (approx.) deployed across state.
- Provide GPS monitoring for these vehicles (complete solution as detailed in the RFP)
- Manage and operate the centralized integrated 108 and 104 call centers for dispatch and monitoring of these vehicles.

NOTE:- Number of vehicles mentioned in this RFP document are indicative only and on the basis of present fleet in Rajasthan. These numbers may differ (may be lesser or higher) from the actual handed



over vehicles while handing over. but shall not exceed from 741 BLS Ambulances, 750 Janani Express vehicles(600 Existing and 150 Subject to approval from GoI).

2.2 Agreement Period: Agreement period will be for 5 years in two phases .First phase shall be for the period of 3 years and will commence from date of signing of agreement. After two & half years it would be evaluated at state level monitoring committee. If services found satisfactory as per provision of RFP it will be extended for remaining two years .

If either the parties is not willing to continue its services before stipulated period of the agreement the same can only be done by giving 2 months notice in writing and after joint consultation among the parties. It cannot be done if the joint consultation is not conducted and decision is not communicated in writing.

Escalation @ 3% per year on the bid price shall be applicable for 108 Ambulance and 104 Janani Express .

2.3 Eligibility Criteria:-

2.3.1 Technical Capacity:-

The applicant can either be a single entity, a joint venture company or consortium of entities formed for this purpose with a valid memorandum of understating (MoU) duly executed. The applicant(s)/ members can either be a Firm, Company, Society or a Trust fulfilling following conditions are only eligible to apply:-

- I. Companies incorporated under the Company's Act, 2013 are eligible on standalone basis or as a part of the bidding consortium.
- II. Societies registered under Societies Act as well as Income Tax Act, 1961.
- III. A foreign company can also participate as a member of consortium with an Indian entity mentioned in point I to IV.
- IV. Trust incorporated under relevant Act in India
- V. Proprietorship firm
- VI. Partnership firm (Registered under relevant applicable Act.)

2.3.1.1 Should have minimum 2 years of experience of operation of a fleet of 250 Ambulances each year (based on GPS & GIS services) in last 5 years and should have 5 years experience in years (2014-15 to 2018-19) in vehicle monitoring system with call center having computer telephony integration and ability to log calls with GIS based GPS information. Copy of Work orders and Certificates of Satisfactory services issued from various central / State Government / Corporations / Boards/ other Autonomous & Statutory bodies to whom services have been provided in past needs to be submitted along with the proposal mandatorily.

2.3.1.2 The bidder must be operating an inbound and outbound call centre with a minimum of 50 seats in last 5 years (as on the date of submission of proposal/bid). The experience of running in-house call center/help desk for bidder"s own operations or their partner/associate"s operation will not be counted and only experience of running a Call center for third party clients will be considered. (Copy of Work orders and Certificates of Satisfactory services issued from various central/State Government /Corporations/Boards /other Autonomous & Statutory bodies to



whom services have been provided in past needs to be submitted along with the proposal mandatorily).

2.3.1.3. Bidder should not have been convicted by any court of law for any criminal or civil offences either in the past or in the present. In case of a consortium, the members should not have been declared bankrupt in the past. Bidder will submit an affidavit to this effect.

2.3.1.4 Bidder will give an affidavit that no investigation by any statutory body / Govt. investigating Agency of any state Govt./ Central Govt. is undertaken or pending against the bidder for the charge having nature of criminal/economic offence/fraud.

2.3.1.5. Should not have been debarred in the past or in the last three years from the date of submission of bid by any Central/ State/ Public Sector undertaking in India.

2.3.1.6 Bidder should not be declared as an insolvent by any Authority or institutions.

2.3.2 Financial Capacity:-

1. Should have minimum Rs. 50 crores of annual average turnovers during last three Consecutive financial years which refers to gross receipts starting from financial year 2016-17. Bidder needs to submit audited turnover statements by statutory auditor. For purpose of verification of turnover, bidder is required to submit a certificate of turnover of concern financial years of Chartered Accountant. The Bidder should submit details of financial capability for the last three (3) financial years as per **Annexure-13**. The Qualifying 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.

2.3.2.1 If the response to RFP is submitted by a Consortium, the technical and financial requirement shall be met collectively by the Bidding Consortium in which case the financial requirement to be met by each Member (Maximum Three members are allowed to form consortium and participate) 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). 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 (NHM)* 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. Further in case of failure of emergency services, the performance security deposited by project company shall be forfeited.

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) In a bidding consortium, each share holding company needs to satisfy the net worth requirement's on a priority equity commitment basis as per Annexure 13 A.
- (iv) CA Certified copies of all the Balance Sheets whether of Bidder from where the financial strength is drawn has to be submitted along with RFP.

2.3.3 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. If any discrepancy is found in the RFP document including terms of reference, Bidder should submit his issue/question in writing within two days of Pre-bid meeting.

2.3.4 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 favor of the Lead Member in the format in **Annexure-6**.

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2.3.5 Proposal Submission Requirements

2.3.5.1 PART A (Technical Proposal)

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

2. Duly filled up Application Form (as per **Annexure-1**).
3. Covering Letter cum Project Undertakings as per **Annexure-4**.
4. Bid Security of Rs. 13.68 Crore (Rs. Thirteen crores and sixty eight lakhs only) in form of an account payee DD/Banker's Cheque/Bank Guarantee/FDR of scheduled Bank in favor of Rajasthan State Health Society, Payable at Jaipur.
5. The Bidder is expected to provide details of its registration as per **Annexure-11** and furnish registration certificates and other supplementing documents.
6. A summary of relevant past experience should also be provided as per **Annexure-11**.
7. 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**.
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. Covering letter and brief profile of the bidder.
12. Proposed organizational structure and Curriculum Vitae (CV) of key personnel to be involved in the operation of the project.
13. Detailed proposal for development of software required for implementation, performance monitoring and evaluation, quality assurance and internal control for successful and efficient implementation of the Ambulatory Services as provided by the bidder.
14. Affidavit certifying that Entity/promoters/Directors/members of an entity are not blacklisted as per **Annexure 10A**. Affidavit of Declaration (Anti Collusion Certificate) mentioning that the applicant/consortium will not collude with the other applicants as per **Annexure-10B**
15. Certificates of relevant experience issued by government or any other organizations by a competent authority.
16. Documents/ Certificates/ evidence of fulfilling the eligibility criteria including audited financial statements for the last 3 (three) years i.e. 2016-17, 2017-18 & 2018-19 (In case audited financial statement of Financial year 2018-19 not received then Certificate generated by Chartered Accountants shall be submitted by the bidders)
17. The Bidder should submit details of financial capability for the last three (3) financial years as per **Annexure-13**. The Qualifying 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.
18. Latest GST clearance certificates.
19. 50 seater call centre and 2 years" experience enclosed.
20. GST Number & PAN Number
21. Firm's Registration Copy.
22. **Ann A, B, C and D** as per RPPP Act.
23. Certificate of CA for Annual Turnover as per Annexure 29

2.3.5.2 PART B (Financial Proposal)

1. Bidder shall submit Financial Proposal as per **Annexure – 3**.
2. In case of any discrepancy between figures and words in the financial proposal, the one described in words shall be adopted.
3. The Bidder shall be paid per ambulance per month for 108 ambulances and 104 Janani Express. Payment under JE would include operation and maintenance of Call center for Toll Free 108 / 104 number.

2.3.6 Evaluation of the Proposals

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

Financial Part of only those bidders will be opened who are found substantially in order of the RFP stipulations and qualifies the technical proposal. Committee reserves the rights to disqualify any or all bidders without assigning reasons thereof even though the bidder/s qualifies the eligibility criteria laid down in the RFP in clause 2.3. The decision of the committee shall be final binding on the bidders.

2.3.6.1 Evaluation of Technical Proposals

- a) In the first stage, Part A (Technical Proposal) shall be opened online and the eligibility shall be assessed as per the set criteria given in the RFP.

2.3.6.2 Evaluation of Financial Proposal:

- a. The financial bid opening shall be done for only those bidders who shall qualify technically as per the criteria laid down in the RFP.
- b. It is highlighted that the bidder quoting the most advantageous bid (all three cumulatively Ambulances bids) would be judged as Successful Bidder. The total operational cost will be submitted according to proposed agreement period.

Selection Criteria for L1 Bidder				
S.N o.	Ambulances Type	Cost per Ambulances (NHM)	No. of Ambulances	Total Cost of Ambulances (NHM)
1	108 Ambulances of NHM	A	537	$D=A*537$
2	108 Ambulance on Turnkey Basis	B	204	$E=B*204$
3	104 –JE of NHM	C	600	$F=C*600$
	Total Bidding Cost			$G=D+E+F$
Note: Amount of G will be L1 bid quoted by Bidder				

2.3.7. Number of proposals

A bidder is eligible to submit only one proposal 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.

2.3.8 Validity of Proposals

The Proposal shall remain valid for 120 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.

2.3.9 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.

2.3.10 Acknowledgement by Applicant

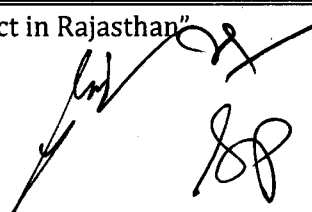
- a) It shall be deemed that by submitting the Proposal, the Applicant has: -
- (i) Made a complete and careful examination of the RFP;
 - (ii) Received all relevant information requested from Department.
 - (iii) Acknowledged and accepted the risk of inadequacy, error or mistake in the information provided 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.

2.3.11 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.

2.3.12 The bidders should note the following points:

- 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.

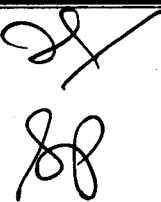


- 5) No change in/or supplementary information shall be accepted once the proposal is submitted. However, the RSHS (NHM) reserves the right to seek additional information and/or clarification from the Bidders, if found necessary, during the course of evaluation of the proposal. Non submission, incomplete submission or delayed submission of such additional information or clarifications sought by RSHS (NHM) 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 (NHM) reserves the right to make modifications to the stated evaluation criteria before the Bid Due date by issuing an addenda, 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 (NHM). 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) RSHS (NHM) reserves the right to reject any or all Proposals/entire RFP without assigning any reason whatsoever.
- 9) Mere submission of information does not entitle the Bidder to meet an eligibility criterion. RSHS (NHM) 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 Bid Security shall be forfeited. Mere clerical errors or bonafide mistakes may be treated as an exception at the sole discretion of RSHS (NHM) 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 (NHM) 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 office of Mission Director, NHM, Rajasthan.
- 13) The RSHS (NHM) 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 Health Mission.

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Part- A3
TERMS OF REFERENCE

3.2 Objectives & Goals of the Project

It is very clear from the project profile that DAA project entails integration, taking over and implementation of 108 ambulance, 104 Janani Express Projects. Therefore scope includes to provide comprehensive Integrated Ambulance Services to the people of Rajasthan and to Improve the access to medical & health care, police and fire services, particularly attending the emergency situations relating to Accident (Road traffic accidents/other accidents), medical, pregnant women, neonates, parents of neonates, infant and children in situations of serious ill-health and all other emergencies in the general population like mass casualties, epidemic etc; and thereby assist the State to achieve the critical Sustainable 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 Integrated Ambulance Services.

However; components wise details are also given for ease of bidders to understand:-

- The services are being coordinated through two existing 24x7 integrated Call Centers one at SIHFW building Jhalana Doongari and another at Swasthya Bhawan Jaipur with a common toll free number 108 and/ or 104 and GPS device fitted on 108 Ambulances, 104 Janani Express and with mobile App installed in mobile phones mandatorily to capture the movement from base location, to patient location, to hospital location and back to base location. The bidder will have to set up IT platform and software for management of these call centers.
- 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/vehicle monitoring and tracking system, call management, performance monitoring and reporting. The movement (movement from base location, to patient location, to hospital location and back to base location) of every ambulance/vehicle is tracked through GPS and mobile App for every trip/move of the Ambulance/vehicle.
- Taking over of presently fully operational 108 Ambulance project along with all assets and centralized Call Center based at SIHFW, Jaipur, taking over of entire fleet of 104 Janani Express vehicles and making them operational after proper branding as per directions of NHM through these toll free numbers/call centers with all modern necessary equipments and GPS devices.
- 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.

The main parts of this service are:-

3.2.1 Management and operation of 108 and 104 call centers:-

This part mainly consists of two sub- parts:-

3.2.1.1 Management and integration of call centers:-

- Operate both 24 x 7 call centers 108 and 104 in integration and coordination for providing ambulance/referral/transport services.
- The integration shall be IT based however both the call centers shall continue to operate on the same places they are presently operating on. NHM do not have provision for place to operate both call centers from one place. Also considering emergency nature of services it is advisable to have two separate call centers so that in case of failure/breakdown of one call center due to any reason another may be utilized and emergency services can be kept uninterrupted. Integration of call center is basically an IT issue. Call centers will be operated from the existing places. Integration should not be affected in any case.
- Service Provider will take over both call centers as is where is and operate while integrating on IT basis.
- Both the call centers would provide all the services envisaged under the Integrated Ambulance Project.
- Any call whether dialed on 108 or 104 or request for ambulance through Mobile app would land on any of the call center and service provider would be liable to deliver desired services to the caller or person in need without asking the caller to dial another number for availing other service
- Provide adequate manpower 24X7 at the call center in a way that no valid call should be left unattended and unserved.

- Respond to emergencies related to Police and Fire and forward them to nearby/ respective police/fire station.

3.2.1.2 Establishment & implementation of IT platform and software for Integrated Ambulance Project:-

- The bidder will create, install, upgrade, establish, implement, manage, maintain and operate complete IT solution as detailed in RFP in clause 3.16.
- The IT solution and software shall be capable to implement all the envisaged services under RFP.
- It will have a provision of upgradation, upscaling, addition, amendment as per the requirement of NHM/Govt. given in this RFP and to be given time to time during the period of the agreement and after the currency of the agreement in case Govt. decides to continue after completion/termination of the project.
- The entire IT platform (Hardware , Software etc.) shall be the property of the Govt. and Service Provider shall be liable to create all required documents in a way that at the time of exit no technical/financial/legal problem arise on handing over to the Govt.

3.2.2 Maintenance, Management and operation of fleet

This part mainly consists of two sub- parts:-

3.2.2.1 Maintenance, Management and operation of assets handed over to service provider and of a fleet of 108 ambulances, 104 Janani Express:-

- To takeover, maintain and manage a fleet of 1301 ambulances. This includes 701 ambulances (108), 600 Janani Express.
- 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.
- 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 confirm to Good Industry Practice. The obligations of the Service Provider hereunder shall include:

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- Total fleet of Ambulances (108 Ambulances & 104 –JE) should be operational all the time, In any condition no ambulance shall be off-road at any point of time. It shall be the duty of Service provider to keep the off-road reserve ambulances to replace the off-road ambulances in case it is not done so, Penalty will be imposed as per clause 3.13 (6).
- Carrying out periodic preventive maintenance of the Project Facilities;
- Undertaking routine maintenance to ensure uninterrupted operation of the Project Facilities;
- Undertaking major maintenance such as ambulance repairs (as per vehicle manufacturers recommended maintenance schedules), refurbishment and necessary up gradation and maintenance of IT/GPS Infrastructure and other equipments time to time.
- Operation and maintenance of all communication, control and administrative systems necessary for the efficient operation of the Project Facilities;
- The Service Provider shall maintain, in conformity with Good Industry Practice, all ambulances, equipment, software, building and furniture forming part of the Project Facilities.
- Routine maintenance, upkeep, refurbishment of the vehicles and of the medical and non- medical equipments.
- Operationalize/ manage/ Maintain existing as well as new Ambulances which may be included in the fleet. Re-trade tyres, repaired batteries and retrieved spares will not be allowed in maintenance.
- Major aggregates chassis and complete engine can be hanged after due permission from NHM. Entry of this change has to be entered in vehicle registration certificate from District Transport Authority.
- To provide 24 x 7 Ambulance/referral Services through 108/104 toll-free numbers across all 34 districts in the state of Rajasthan.

3.2.2.2 Maintenance, Management and operation of a fleet of 108 ambulances provided on turnkey basis:

- In addition to existing fleet provided by NHM, the service provider has to purchase/hire/lease & provide 204 New/Fresh fully equipped 108 Ambulances in similar lines of existing fleet as per rates agreed on turnkey basis as prescribed norms set by Government.
- The vehicles which are to be procured on turnkey basis with similar make model already available in running fleet mentioned at Annexure 18 (a).
- Operation and Maintenance of fully equipped all Ambulances/vehicles 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.
- 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 confirm to Good Industry Practice. The obligations of the Service Provider hereunder shall include:
- Total fleet of turnkey Ambulances (108 Ambulances)should be operational all the time, In any condition no ambulance shall be off-road at any point of time. It shall be the duty of Service provider to keep reserve ambulances to replace the off-road ambulance.
- All penalties mentioned in clause 3.13 will be applicable on all turnkey Ambulances except 3.13(5,8)
- Carrying out periodic preventive maintenance of the Project Facilities;
- Undertaking routine maintenance to ensure uninterrupted operation of the Project Facilities;
- Undertaking major maintenance such as ambulance repairs (as per vehicle manufacturers recommended

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maintenance schedules), refurbishment and necessary up gradation and maintenance of IT/GPS Infrastructure and other equipments time to time.

- Operation and maintenance of all communication, control and administrative systems necessary for the efficient operation of the Project Facilities;
- The Service Provider shall maintain, in conformity with Good Industry Practice, all ambulances, equipment, software, building and furniture forming part of the Project Facilities.
- Routine maintenance, upkeep, refurbishment of the vehicles and of the medical and non- medical equipments.
- Operationalize/ manage/ Maintain existing as well as new Ambulances which may be included in the fleet. Re-trade tyres, repaired batteries and retrieved spares will not be allowed in maintenance.
- To provide 24 x 7 Ambulance/referral/ Services through 108/104 toll-free numbers across all 34 districts in the state of Rajasthan.

3.2.3 Services under the Project:-

3.2.3.1 Services of 108 Ambulances and 104 Janani Express Vehicles (free service):-

- Deploy trained, professional, well behaved manpower (Driver and Nursing Staff) in these ambulances.
- Identify and respond to medical, police and fire emergencies in the entire state of Rajasthan through an existing fleet of 701 BLS Ambulances (108) which may be scaled up further. 108 Ambulances will cater to broadly following emergency situations but not limited to:-
 - a. Road Traffic Accidents
 - b. Mass Casualties
 - c. Snake Bite
 - d. Burn case
 - e. Heart Attack
 - f. Poisoning/food poisoning
 - g. Pregnancy related cases (if 104 Janani Express is not available in that area or it is engaged on a separate case)
 - h. Referral in case of emergency
 - i. Any other medical emergency
- To provide referral transport services to pregnant women, sick children up to 18 years through Janani Expresses.
- Provide referral transport to malnourished children, children screened under RBSK program, drop back to home facility for sterilization cases with the help of Janani Express and any other as per the guidelines/directions issued/to be issued by the NHM.
- Provide integrated GPS monitoring for these vehicles (complete solution as detailed in the RFP)
- The Service Provider shall be paid @ per month per ambulance quoted in the Financial Proposal.
- 104 Janani Express vehicles will cater to broadly following emergency situations but not limited to:-
Provide referral transport to pregnant women/ sick newborn as below but not limited to:-
 - a) Pick up from Home To Hospital
 - b) Hospital To Home
 - c) Hospital To Hospital (Referral)
 - d) Provide referral transport to the children screened under RBSK
 - e) Provide referral transport to malnourished children
 - f) Drop back facility to sterilization cases.
 - g) No drop back would be allowed from Medical College/Medical College associated Hospitals/District Hospitals to Home.

Details of all available Ambulances are enclosed at Annexure 18.

- Provide trained manpower as per clause 3.3 and services through specified medical/non- medical equipments/ consumables that will stabilize the patients and then transport them to the nearest Government Hospital within the shortest possible time and adhere to the response time standards as per clause 3.18.
- Adhere to response time as given under the Clause 3.18.
- Provide integrated GPS monitoring for these vehicles (complete solution as detailed in the RFP)
- The Service Provider shall be paid @ per month per ambulance/per vehicle quoted in the Financial Proposal.
- These services shall be free of cost to the beneficiary.

Note:- All services shall be made operational through one integrated call center (108 +104). Caller in need of any of the above services will not be asked to dial another number.

3.3 Manpower for various services:-

Existing manpower, working in the implementation of the project may be given priority to the extent possible, subject to satisfactory performance.

The existing manpower retained subject to satisfactory services and other eligibility shall be entitled to atleast a 20% increase over the present wages (as on 07 Nov, 2019) Their wages will be in accordance with the provision of the Minimum Wages pertaining to skilled personnel.

The Service Provider, at each district, shall provide at least one district operational coordinator to explain the progress to CMHO/JD for co-ordination/resolution of complaints, if any. Other than above, Service Provider shall place adequate staff at state call centre and must have following categories of manpower having required qualifications as given below;

3.3.1 For 108 and one EMT and one driver round the clock whereas in Janani Express vehicles only drivers are required.

3.3.1.1 Basic qualification of EMT – B.SC. Nursing/GNM with relevant training or any other equivalent paramedical course from recognized university with valid registration from state statutory body with minimum 6 month relevant experience. The EMT should undergo training of at least one month or till proficiency in a tertiary care institution or at any recognized institutes to handle the life-saving & life sustaining equipment & administer use splints. EMTs should be trained and certified in working and usage in Basic Life Support (BLS) ambulances from a recognized national /international institution for BLS ambulances. He must be able to manage first aid/ emergency requirement and stabilizing the condition of the patient being transported. Refresher training from certified institutions / associations in Basic Trauma Life support or pre hospital trauma life support or equivalent every year.

3.3.1.2 Drivers:

The Service Provider has to provide driver on 24x7 basis on all vehicles, no medical technician is required in case of JE. Driver should be trained in giving first aid to the patient, if required. Drivers shall be kept as per qualification laid down in Motor Vehicle Act 1988 with latest amendments.

3.3.2 Call Centre Staff:

Call receivers for Emergency Response Service (ambulance/Vehicle Dispatch) : They will be responsible for attending all the calls and taking down the basic information related to the caller and emergency. He/she will also sensitize the emergencies and decide the dispatch of ambulance to the emergency site and coordinate with the ambulance staff and emergency response centre for virtual handling. The capacity of each Call receiver in a shift of 8 hours is approximately 250-300 for emergency calls. Appropriate training will have to be provided before starting their role of the COs/DOs.

Doctor (at call center for guiding the EMT during transport to provide virtual medical direction for all critical cases in need)

1. MBBS / MD (General Practitioner)

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

1. Team leader: for every 15 call taker
2. Feedback and research officer (1 person 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.

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.

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 repair schedule(Annexure-27).

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

3.4.2 104 and 108 Call Center: The Service Provider has to take up the call centers within 15 days of signing of the contract. 15 days time period is being provided for taking over the hardware of the call center, installing software, test check/run and then finally making it fully operationalized.

3.4.3 Handing over Taking Over shall be done under the supervision of NHM Staff. To avoid disruption to the present operation, Service Provider may take over operations from existing vendors in phased manner.

3.4.4 Moratorium Period:- Bidder will have to take over the project within 30 days time. In addition to these 30 days, bidder will be given a period of another 30 days as moratorium period wherein penalties will not be imposed. During taking over New Service Provider will be paid for the ambulances /vehicles taken over and for the days for which the taken over ambulances are operated. After these 60 days bidder will have to achieve all the parameters as mentioned in RFP otherwise penalties/deductions shall be affected from claims as per RFP. But in case Turnkey ambulances are not provided as per schedule mentioned in Annexure -20 then deduction shall be applicable as per clause 3.13(9)

- 3.4.5 New service provider will have to take over Ambulances on "As is where is" basis and installation of GPS devices will be ensured within this 60 days time. NHM will not undertake any repair of the ambulances. In case ambulances are received in damaged condition and new service provider undertakes repair; than the repair cost shall be reimbursed to the Service Provider out of a pool of reserve funds of Rs. 2.00 crores. The repair shall be undertaken by a committee having members from Govt and Service Provider both. The committee will take a decision regarding repair/quantum of repair and then undertake the repair as the rules and regulations of RTPP Act, 2013.
- 3.4.6 The Service Provider will be handed over the ambulances which are in roadworthy condition. These are approximately, 701 (108 ambulances), 600 Janani Express vehicles. After taking over the ambulances/vehicles service provider will undertake proper upkeep, maintenance, minor repair of the ambulances. The financial proposal of the Service Provider shall be inclusive of these costs also in addition to all other costs related to the implementation of the project.
- 3.4.7 Medical Equipments and Tools of Ann. 15 are available in present fleet of 701 ambulances (108). These shall be made available in newly launched ambulances on turnkey basis by service provider in future but there is a shortage of some equipments as mentioned in Ann. 15, these shall be provided by Service Provider. The previous Service Provider will repair/ meet the shortage in that case. In the absence of discharging such liability on the part of previous service provider, the same shall be done by the new service provider at the cost of previous service provider, which will be recovered by NHM from BG submitted by the previous service provider. Vehicle wise kilometer reading is enclosed at Ann. 25 for reference of bidders.
- 3.4.8 Gap analysis of all present ambulances will be done and any gap found will be funded by Govt. as per clause 3.4.5. Any discrepancy (shortage and/or repair) in the equipments of the ambulances which are on the part of previous service provider, the liability of the same will be of the previous service provider. The new service provider will then undertake the repair through authorized dealer in accordance with clause 3.4.5.

3.5 Expected Outcomes

- To provide residents of Rajasthan with a single point of contact through toll free numbers.
- 108 and 104 or request for ambulance Mobile app for emergency services, maternal health/ child health related services.
- The basic objective of the project is to cater emergencies and provide referrals .
- To successfully close all the valid calls received or request received through Mobile app for Ambulance services at the call center after providing the desired/required service to the caller/person in need. No valid calls or request received through Mobile app should be left unattended or denied from service. Any denial from services shall be viewed seriously and penal/disciplinary action shall be taken as per the provisions of the agreement.
- To provide 24x7 pre-hospital emergency transportation care (Ambulance) services across the State within Permissible Response Time of Urban- 20 min and in Rural- 30 min. and in dessert areas- Bikaner, Barmer and Jaisalmer other than Urban Areas- 40 Mins. of the call being received or request received through Mobile app for Ambulance services in the Call Centre as per clause 3.18.
- To provide 24x7 pre-hospital transportation facility to the pregnant women, sick new borns (Janani Express) across the State within Permissible Response Time of Urban- 20 min and in Rural- 30 min. and in dessert areas- Bikaner, Barmer and Jaisalmer other than Urban Areas- 40 Mins. Of the call being received in the Call Centre as per clause 3.18.
- Develop a mechanism to track details related to human resources like attendance, Roaster, availability and same should be accessible for NHM in Dashboard.
- State would be better equipped to handle any health crisis by effectively managing the Emergency response/transport service in the least amount of time.
- Reduction in the number of footfalls in hospitals.

- State would be able to optimize the resources in the Healthcare system – funds, personnel, facilities etc.
- 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 Integrated Ambulance Services under the project. Maintenance and upgradation of existing hardware's, software's, servers, voice solutions and all other solutions and equipments etc.
- AMC of hardware's, software's, servers, voice solutions and all other solutions and equipments etc.
- 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 RFP.
- Operate and manage further scaling up of the project.

3.6 **Procurements**

- The Service provider has to purchase/hire/lease and provide additional New/Fresh fully equipped 108 Ambulances in similar lines of existing fleet on turnkey basis as and when Directed by MD,NHM as per rates approved in agreement for turnkey Ambulances.
- 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 service provider.
- Medical/non-medical consumables to be made available in the Ambulances at all times as per **Annexure-15**. There shall invariably be an inscription on all such consumables as "Government supply Not for Sale".
- Details of present Hardware and software under the Project is enclosed at **Annexure 21** this includes Hardware and Software at call center.

3.7 **IEC of the Project:-**

- IEC activities of the project shall be undertaken by NHM, Medical & Health Department as per requirement.

3.8 **Responsibility of the service provider**

- 1) Ensuring 100% service to the valid calls received or request received through Mobile app for Ambulance services at the call center.
- 2) Installing IT platform and software as per the provisions of the RFP.
- 3) Maintenance and up gradation of existing hardware's, software's, servers, voice solutions and all other solutions and equipments etc.
- 4) AMC of hardware's, software's, servers, voice solutions and all other solutions and equipments etc.
- 5) Operation and management of the Integrated Ambulance Services in the State of Rajasthan.
- 6) To make sure that proper services are being delivered to valid calls or request received through Mobile app for Ambulance services which are landing on the call center. The call taker at the call center would identify the nature of call received at the call center and process it as per the call flow given in the clause 3.16 of the RFP.
- 7) To ensure availability of quality Emergency Response Service through 108 ambulances, transport/referral transport facility through 104 Janani Express vehicles to all the emergency/cases for which call receives at the call center through 104 or 108 numbers.
- 8) The facility through 108 ambulances or 104 Janani Express shall be provided within the given response time as per RFP.
- 9) Service Provider shall place the ambulances/ vehicles across Rajasthan in a way that call/emergency/case intimated at the call center from any area of the Rajasthan should be catered to and also in the given response time.

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- 10) Service provider shall be provided with the approximately 701 ambulances (108) and 600 104 Janani Express vehicles.
- 11) Service provider shall be given a list of all Medical Institutions like Medical College Hospitals, District Hospitals, Sub Divisional Hospitals, CHCs and PHCs and Service Provider will map its ambulances according to location of these institutions in consultation with NHM.
- 12) The service provider will have to cater to all emergencies of all areas of Rajasthan in the prescribed response time as per clause 3.18. Presently all ambulances are deployed at strategically selected locations however, relocation of these ambulances may be considered in order to attend all emergencies within response time. Provide technological, leadership, administrative and managerial support in open and transparent manner to produce mutually agreed outcomes. Relocation of any ambulance is permitted on the basis of approval of respective District Collector/DHS. It is the responsibility of the bidder to make justified proposal with reasons for such relocation and present it before the respective district collector / MD,NHM for approval.
- 13) (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.
- 14) 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.
- 15) 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.
- 16) 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.
- 17) It will be mandatory that the bidder shall be fully responsible for adhering to the provisions of various applicable laws including **Motor Vehicle Act, Labor 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. Service Provider has to comply with provisions of Labor Law, Minimum Wages Act, PF rules and ESI Act, Group Insurance cover (with accidental benefit of Rs.5.00 lacs in case of death) and other labor welfare laws of land while appointment, continuation, termination during the job. These laws shall also be complied by the Service Provider in case any accident/ mishap/death/injury/disability occur to any of the staff.
- 18) The Bidder shall be required to maintain consumption register of medical and non-medical consumable items in each Ambulance.
- 19) Assist the Government when required in accreditation of hospitals in the State and such other matters from time to time.
- 20) 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).
- 21) Strive for continuous improvement in management of Integrated Ambulance Services and shall ensure proper and timely monitoring of the services.



22) Strict adherence to the stipulated time schedule as per Annexure 20.

- 23) Operation and Maintenance of fully equipped all Ambulances/vehicles 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.
- 24) Ensuring 24x7 services at the Call Centre.
- 25) To maintain 99.99 per cent up time of the complete integrated IT and GPS based system along with real-time tracking of all vehicles otherwise penalty will be imposed as per clause 3.13.
- 26) 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.
- 27) To maintain all information/ records for the project period and submit various reports in Given format (eg. GPS tracking Records of Vehicles ,Call details, Trips etc.) and information within the stipulated timeframe as desired by the Mission Director/ Project Director , National Rural Health Mission as well as District wise reports to respective CMHO/District Health Society.
- 28) The bidder shall be subjected to periodical System of internal, Data, IT and financial Audit. The audit may be conducted by auditor appointed by NHM. The expenses for conducting such audit would be borne by NHM. The Service Provider shall be liable to provide all required documents, access to system and data for audit purpose.
- 29) The Service Provider is required to submit the suggestion of the ambulances/vehicles's location based on real user data every quarter to make ambulance reach to patient as soon as possible, in order to provide services in all areas of Rajasthan with valid Justification. This submission would be subject to approval by Mission director NHM/District collector to change the locations of the ambulances/vehicles.
- 30) Service Provider will be provided to data access for pregnant women and child health and other health scheme beneficiaries. From this data set like PCTS, etc, the service provider will fetch the due date list of expected ANC's, deliveries, PNC's and immunization of children. This due date list shall be kept in each and every JE vehicle and Service Provider shall make calls to the patients mentioned in due list for providing transport services through JE.
- 31) Service Provider shall comply with software requirements as mentioned in clause 3.16.
- 32) The service provider shall ensure to fill PCR form electronically and physically 108 Ambulance & BTR (Beneficiary Trip records) for 104 -Janani Express form electronically and physically as per **Annexure 24 A & 24 B** for each and every patient/Beneficiary transported in the ambulance. At the end of the month the service provider shall submit a certificate duly certified by the BCMO that he has seen and checked all the PCR/BTR forms for the patients/Beneficiary transported in that particular month for all the ambulances/Janani Express in that particular block. Service provider shall ensure to fill three copies of the PCR/BTR form out of which one shall be handed over to hospital at the time of handing over the patient, second shall be kept in ambulance and third shall be sent to head office of Service Provider . It will be that every month Service Provider shall submit a report about the certified PCR/BTR forms received at its state office to NHM Rajasthan. In Case Service provider fails to submit certified PCR payment for such vehicles will not be processed & similarly fails to submit certified BTR (Beneficiary Trip records) for 104 -Janani Express than Trip will not be considered as a valid trip and trip Deduction will be imposed as per clause 3.13 .
- 33) **Linkage/ Coordination with Other Departments(Subject to approval) :-**
Coordination with NHA Ambulances and Bike Ambulances (Linkage between both Call centers and GPS Portals) that NHA and service provider able to access the location of Ambulances stationed near the accident site. Thus nearby Ambulances shall be dispatched in case of any Emergency. Service provider has to keep provision to coordinate with other similar programmes.
- 34) Biomedical waste generated in Ambulances shall be handed over to nearest Government health care institutions/ facility.
- 35) Provision of Data capturing of All Private registered Ambulances operational in Rajasthan (Only for Data Purpose)

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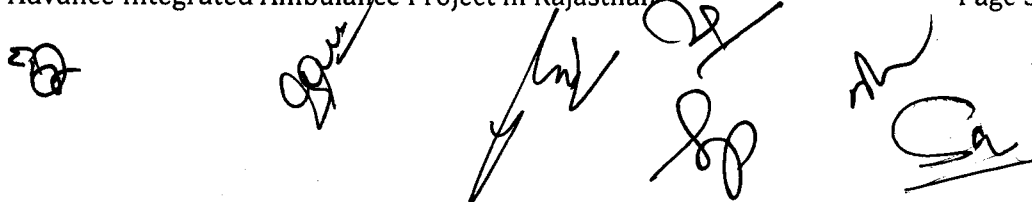
Infrastructure: The Company is required to maintain the building and other infrastructure throughout the life of the agreement to prevent the structural and functional deterioration that can impede the service delivery as years pass by. The company shall also ensure that the ownership of government of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

Statutory Compliance: the Service Provider is responsible for the compliance of the statutory requirement under any law in respect of any asset and operation. The Service Provider 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 secured 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.

3.9 Responsibility of National Health Mission / Government of Rajasthan

- 1) National 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 conduct regular monitoring and evaluation of the project activities based on quantifiable indicators and reports received from the service provider.
- 5) Prescribe various formats for reporting progress of the project Service.
- 6) Nodal Officer PCTS (State Demographer) will provide the PCTS User ID and Password to Service Provider



3.10 Bid Security and Performance Security

3.10.1 Bid Security: 2% of the total estimated Project Cost Rs. 1140.00 Crores for five years but the bidder has to submit bid security for three years (36 months) hence 13.68 crore has to be submitted by bidder as 2% bid security in the form of Banker's Cheque/ Demand Draft/ BG/FDR in favor of "Rajasthan State Health society". The bid security must remain valid thirty days beyond the original or extended validity period of the bid.

In the absence of the Bid Security, technical proposal of the bidder shall be rejected.

The Bid Security shall be kept valid through the proposal validity period and would be required to be extended if so required by the department.

The Bid Security shall be returned to unsuccessful bidders within a period of eight (8) weeks from the date of announcement of the successful bidder without any interest or claim whatsoever.

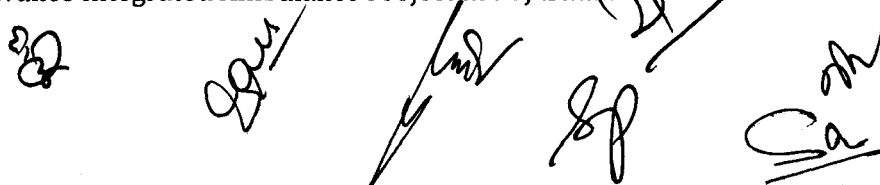
The Bid Security shall be forfeited in the following namely:

- a. when the bidder withdraws or modifies its bid after opening of bids;
- b. when the bidder does not execute the agreement , if any , after placement of supply / work order within the specified period;
- c. when the bidder fails to commence the supply of goods or services or execute work as per supply / work order within the time specified;
- d. when the successful bidder does not deposit the performance security within specified period after the supply / work order is placed;
- e. if the bidder breaches any provision of code of integrity for bidders specified in the act;

Without any right of claim of the bidder, if the bidder withdraws/modifies its proposal during the interval between the proposal due date and expiration of the proposal validity period of the "Integrated Ambulance Services" popularly known as "108 Ambulance Service Project" in Rajasthan- Request for Proposal.

3.10.2 Performance Security: The bidder whose proposal is accepted and Award issued shall have to deposit Performance Security of an amount of 5% of the total project cost to be calculated on the basis of rates received in the RFP along with signing of the agreement. Amount of Bid Security can be adjusted into the security deposit.

S.N o.	Project Cost for 60 Months in Crores	Period Five Years in Two Phases (3+2)	Bid Security (2% of Bid Security)	Performance Security (5% of Bid Security)
1	1140.00	First Phase for 3 Years from date of signing of Agreement.	*13.68 Crores (2% of Project cost for First Phase i.e.3 Years	1. 5% of Project Cost for 36 Months. (1st phase) 2. Validity of Performance Security for 66 Months.
2	-	Second Phase for Two Years After completion of three years if fulfilling the conditions		1. Remaining performance security for Second Phase. 2. Validity of remaining Performance Security for 30 Months.



Security deposit is required for due performance of the agreement. Non submission of Performance security within the specified time may also lead to forfeiture of the Bid Security in the following case:-

1. When any terms and conditions of contract is breached.
2. When the tenderer fails to make complete supply satisfactorily.
3. Notice of reasonable time will be given in case of forfeiture of security deposit.
4. The decision of purchase officer in this regard shall be final.
5. The expenses of completing and stamping the agreement shall be paid by the tenderer and the department shall be furnished free of charge with one executed stand counter part of the agreement.

Performance security furnished in the form specified in clause 3.10.2 (b) to (e) of sub- rule (3) of Rule 75 of the said Rules 2013 shall remain valid for a period of one hundred eighty days beyond the completion of all contractual obligations of the bidder , including warranty obligations and maintenance and defect liability period. In case performance security is deposited in form of Bank guarantee (BG),.The original BG shall be deposited at the office of Mission Director, NHM within the period mentioned in Award of Contract & along with this additional Bank guarantee of performance security shall also be deposited in case the period of agreement is extended .

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.

3.11 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 invoices by the service provider. No advance financing shall be done under any circumstances.

3.12 Investment and ownership

All movable and immovable assets created in the project will be the property of RSHS (NHM), 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. Service Provider shall ensure to send the detailed information on monthly basis of the assets procured in that particular month.

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3.13 Operational Parameter and Penalty Clauses

For 108 Ambulances and 104 Janani Express:-

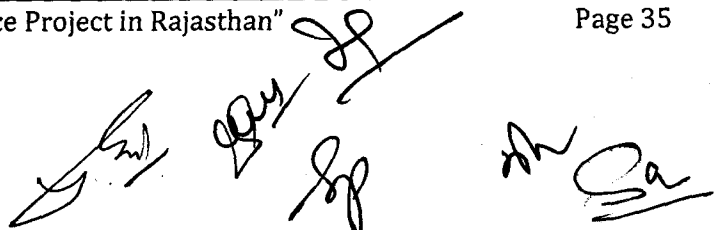
The Agency (Service Provider) shall ensure that all call/emergency/case intimated at the call center from any area of the Rajasthan should be catered to and also in the given response time as mentioned in clause 3.18.

- (a) Total fleet of Ambulances (108 Ambulances & 104 –JE) should be operational all the time, In any condition no ambulance shall be off-road at any point of time. It shall be the duty of Service provider to keep the reserve ambulances to replace the off-road ambulances as to adhere the norms / provision as Mentioned in RFP.
- (b) In case this level of services is not achieved / Ambulances (108 Ambulance & 104 –JE) reported off-road then a proportionate deduction towards non-running of ambulances shall be affected from the claims. 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 Health Mission, Director (RCH), Project Director (NHM) and Director (Finance, NHM).
- (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) If the Service Provider feels aggrieved with any of the decision/decisions of the above committee, it may proceed further with the issue as per the clause 3.25 for Settlement of disputes and Arbitration.
- (e) If an ambulance is condemned after following due procedures as per rules (GF & AR) or total loss because of an accident then the service provider has to provide Ambulance on rates agreed as per agreement on turnkey basis.

Insurance & Fitness of the Ambulances for whole of the contract period:-

New Service Provider shall ensure to transfer the old insurance & Fitness certificates from previous service provider's name to its name.

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S.No	Description of Penalty	Amount of penalty to be imposed						
1	Permissible Response Time as per clause 3.18 : (for 108 ambulance and 104 Janani Express) Urban- 20 min and in Rural- 30 min. and in dessert areas- Bikaner, Barmer and Jaisalmer other than Urban Areas- 40 Minuts.	If an ambulance gets delayed from the prescribed response time then the penalty would be Rs. 50/- per minute after the prescribed response time. The seconds in delayed response time would be rounded off to minutes as following manner: Upto 29 seconds, it would be added as 0 minute in delayed response time. Upto and more than 30 second delay, it would be added as 1 minutes in delayed response time. For eg, If ambulance is delayed by 1 minute 29 seconds from the prescribed response time then the penalty for this case would be Rs. 50. If ambulance is delayed by 1 minute 30 seconds or one minute 31 seconds then the prescribed response time then the penalty for this case would be Rs. 100/-. Note:- Driver mobile App installed in mobile phones mandatory to capture the movement from base location, to patient location, to hospital location and back to base location. A mobile application for ambulance drivers (108 Ambulance, 104 – JE &) for log their trip details, so that trip time (Response time) calculations can be accurate. This data also integrate with data base and available on MIS report. In case, if it is not done so, then proportionate deduction shall be imposed for the day when it was reported non functional from the claims of Service Provider. No manual entry shall be encouraged in any condition.						
2	In case a valid call is not serviced as per RFP requirement. Calls received at the call center shall be scrutinized and checked by IT team of NHM / Third party placed at the call center and at Swasthya Bhawan State Head Quarters on random sampling of minimum 10% of total valid calls received at call center on daily basis. If it is found that the required services are denied/not provided to the call or the call is not successfully closed due to the fault of service provider or calls is not attended within 10 seconds then penalty shall be imposed. Formula for call auditing will be finalized by NHM.	This will be calculated on monthly basis and penalty shall be imposed as below:- <table> <tr> <th>Sr. No.</th><th>SLA</th><th>Penalty</th></tr> <tr> <td></td><td>The prime requirement of this RFP is that all valid calls received at the call center should be provided with the required service as per RFP provisions. If it is found in the verification that any valid call is not provided with the required service or is denied from the service then</td><td>Penalty @ Rs. 1000/- per ambulance /JE related unattended valid call and Rs. 200/- per call for remaining unattended valid calls shall be deducted from the claims of the service provider. Number of such calls shall be ascertained on the basis of inferences of random sampling. For eg. If 10% calls out of the sample comes out to be as calls to which required service is not provided or service is denied then deduction @ Rs. 1000/- or Rs. 200/- (on the basis of nature of</td></tr> </table>	Sr. No.	SLA	Penalty		The prime requirement of this RFP is that all valid calls received at the call center should be provided with the required service as per RFP provisions. If it is found in the verification that any valid call is not provided with the required service or is denied from the service then	Penalty @ Rs. 1000/- per ambulance /JE related unattended valid call and Rs. 200/- per call for remaining unattended valid calls shall be deducted from the claims of the service provider. Number of such calls shall be ascertained on the basis of inferences of random sampling. For eg. If 10% calls out of the sample comes out to be as calls to which required service is not provided or service is denied then deduction @ Rs. 1000/- or Rs. 200/- (on the basis of nature of
Sr. No.	SLA	Penalty						
	The prime requirement of this RFP is that all valid calls received at the call center should be provided with the required service as per RFP provisions. If it is found in the verification that any valid call is not provided with the required service or is denied from the service then	Penalty @ Rs. 1000/- per ambulance /JE related unattended valid call and Rs. 200/- per call for remaining unattended valid calls shall be deducted from the claims of the service provider. Number of such calls shall be ascertained on the basis of inferences of random sampling. For eg. If 10% calls out of the sample comes out to be as calls to which required service is not provided or service is denied then deduction @ Rs. 1000/- or Rs. 200/- (on the basis of nature of						

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				unattended valid calls) for 10% calls of the total Valid calls shall be made from the claims of service provider. It would be extrapolated on total calls.
3	Any shortfall/ default found on inspection by RSHS (NHM)/ authorized District representatives. (For 108 ambulance, 104 Janani Express) On the basis of inspection conducted by NHM as defined in RFP.	Categories of shortfalls:- Would be applicable as per Annexure 26 .Penalty would be imposed for each default mentioned For 108 ambulance, 104 Janani Express .		Penalty of Rs 500/- for first time for every category of shortfall and subsequently would be doubled on each inspection for the shortfall already reported and as mentioned earlier in new case Penalty of Rs 500/- for first time for every category of shortfall (Individually for every category of shortfall)
4	Submission of information desired by NHM, GoR in stipulated time frame.	Penalty of Rs 1000/- will be imposed per day per information, once the stipulated time is lapsed specifically mentioned in letters and email. Same penalty shall be imposed for incorrect /incomplete information.		
5	Quarterly Security Audit of System and Data will be done by NHM as mentioned in clause 3.16(18)	It is mandatory to correct the observations are made under security Audit Report. Security Audit will be conducted quarterly by third party on the part of NHM. If any default is found then it will be communicated to the service provider and if it is not corrected within the period of 30 days from the date of when communicated then 1% penalty would be deducted from the quarterly payment if vulnerability and observations not corrected and persist in next Security Audit..		
6	• If the ambulances/ vehicles are not maintained as per the vehicle manufacturer maintenance schedule penalty @ Rs. 1000/- for default in per category as per R-16 of Ann. 14 (it is inspection based) shall be deducted from the claims of the service provider. • If Off road without permission of concerned Authority then Payment will be deducted of the monthly bid price/ Ambulance/ day proportionately for the number of days the ambulance has remained off road as per Repair Maintenance Schedule-Annexure -27.			
7	If any GPS unit is frequently non-functional then replacement/repair of such GPS units Should be ensured within 1 day otherwise penalty will be imposed at the rate of Rs 1000/- per day per GPS unit from 1 st day onwards.(For 108 ambulance,104 Janani Express). GPS penalty will be calculated on the basis of GPS monitoring done at state level and same will be informed to respective districts for the deduction of calculated amount from the claims of service provider. GPS penalty will not be deducted for off-road vehicles shown in daily report of the Service Provider.			
8	4 Trips per day per 104 JE Proportionate trip penalty/ deduction would be imposed if average trip is less than 4 in a month for whole fleet of 104-JE104 –JE.			
9	If Ambulances (108)on turnkey basis are not operational within stipulated time in phased manner as mentioned in RFP annexure -20, then the amount for rates agreed on turnkey basis shall be deducted (in form of penalty) per default from total invoices raised by service provider for respective District till all the Ambulance is operational.(Note :- Moratorium period shall not be applicable to turnkey Ambulances)			

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3.14 Sanctions and Transfer of funds to the service provider: Transfer of funds shall be done from District Level to the Service Provider.

Payments to the Service Provider shall be made on Monthly basis and system generated and based on the reports of the IT team and verification reports of the districts.

The Service Provider shall submit invoices/bills along with documents as indicated at Ann. 22 monthly at district headquarters. The Service provider will first submit the invoices in scanned copy online and hard copy of the same within 24 hours to the respective District CMHO.

State Head quarter IT team shall generate a monthly report which will be sent to all districts. For this purpose the Control room team of third party deputed by and under the supervision of NHM State Head quarters shall analyze the reports generated on daily basis. The control room team will listen to minimum of 10% call recordings of total valid calls received at the call center on daily basis and a provisional daily payable amount shall be generated after accounting for the penal provisions as mentioned in the RFP clause 3.13. Such daily generated amount will be prepared after accounting for the penal provisions except point number 3,4, 6 and 9 of the penalty table mentioned in penalty clause 3.13. Simultaneously the district may also undertake the call verification process on daily basis through verification of OPD/IPD numbers through a designated person specially employed for this purpose as by Third Party. This person will verify the valid calls through verification of IPD/OPD/discharge ticket numbers and/or as directed by NHM time to time. The service provider shall make arrangements for storage of call recordings at the call center and make it available to the NHM team at Swasthya Bhawan Jaipur as and when required.

The districts will report the State HQ about penalty and /or proposed deduction to be affected from the claims of the Service Provider within 5 working days w.r.t point number 3,4 and 6 of the penalty table mentioned in penalty clause 3.13. After taking into account the penalties and/or proportionate deductions reported by IT team at NHM HQ, the genuineness and calculations of claims raised in the invoices by the Service Provider and penalties/ deductions (if any) on the basis of verification report of districts as per the provision of the RFP the district CMHO will issue the sanction and transfer funds to the Service Provider.

A separate software has developed by NHM for above payment process to avoid any unwarranted delay in payments.

For any payment/penalty related problem Service Provider may submit representation to CM&HO/DHS or MD,NHM in case of any clarifications.

Inspection of ambulances/vehicles:- Any Physical verification undertaken by any authority designated by MD, NHM at random or on regular basis. Regular inspections shall be undertaken by the district authorities based on mobile application made by Service provider in consultation with NHM and report of the said inspection will be sent to the district and state authorities along with a copy to service provider. It will also have a provision of calculation of the penalty on the basis of the checklist and the provisions of the agreement. The calculated amount of penalty for a particular ambulance for one inspection shall immediately be intimated to the district and same deduction shall be affected from the claims of the service provider. The responsibility of development of mobile app is the responsibility of the service provider to incorporate in the IT/software part.

NHM may undertake inspection of any of the ambulance and call center by the officers nominated by MD, NHM and shortcomings noticed in the report may result in imposition penalty as per provisions of the agreement. NHM may also undertake verification of calls and OPD numbers in the hospitals (of the patients intimated to be admitted by 108/104 ambulances); in case any shortcomings noticed in the report it may result imposition of penalty as per provisions of the agreement. In case of any mismatch, payment related to that particular case shall be deducted from the claims of the service provider.

Cross check by Service Provider and re-inspection by NHM:-

On the basis of report the service provider shall undertake a cross check of that particular ambulance/vehicle and rectify the shortcomings within 7 days of the receipt of the inspection report. After the rectification the designated officer of the service provider will re inspect the ambulance and submit the re-inspection report using same mobile app and will send a copy to the district and state authorities and also to the inspector who had done the inspection of that ambulance/vehicle. Software should have a provision to immediate cross tally both the reports and generate a cross check report. The Cross check report will confirm the rectification done by the service provider which will be further verified by the inspector of NHM. If all the shortcomings found rectified by the inspector of NHM then he/she will send a confirmation report to the State & district authorities and to service provider. If some/all of the shortcomings are still noted or if the service provider fails to cross check/rectify the shortcomings then penalty shall be deducted from the claims as per penalty clause.

In any case the inspection of each ambulance shall be done on weekly basis by district authority.

3.15 Referrals by 108,104 :-

In case a patient needs referral then following approvals are required:-

- a. For referral of a patient; referral slip from the MoIC/ Specialist of the institution indicating need for such referral is
- b. In emergency situations prior approval for referral is not required.
- c. Referrals As per directions/Guidelines issued by NHM time to time.

3.16 Software Requirements:

Core Components of Emergency Response Centre (ERC): Dashboard to NHM team (state/district level view) based on base data including all defined reports and HR module including complete attendance & Rosters , Call Agent, Medical Dispatch Agent, Police Dispatch Agent, Fire Dispatch Agent, Supervisor, Emergency Physician, Stake Holders, A electronic guide to EMT staff in ambulance to suggest what to do in any particular case, Pre-Defined Reports, Customized Reports, Medical Directory, Telephone Directory, Health Institutions Directory, GIS, GPS Device with dual SIM to overcome dark zone limitations, Replay electronically Tracking and History Tracking of ambulances, Mobile Application for Drivers and State/District/Block Administrators, SMS gateway and Email, Mobile Phones (Android/USSD based), Computer Hardware, Web-based Application Software, Power Backup, Communication Channel (Primary and Backup)etc, billing and invoice module,

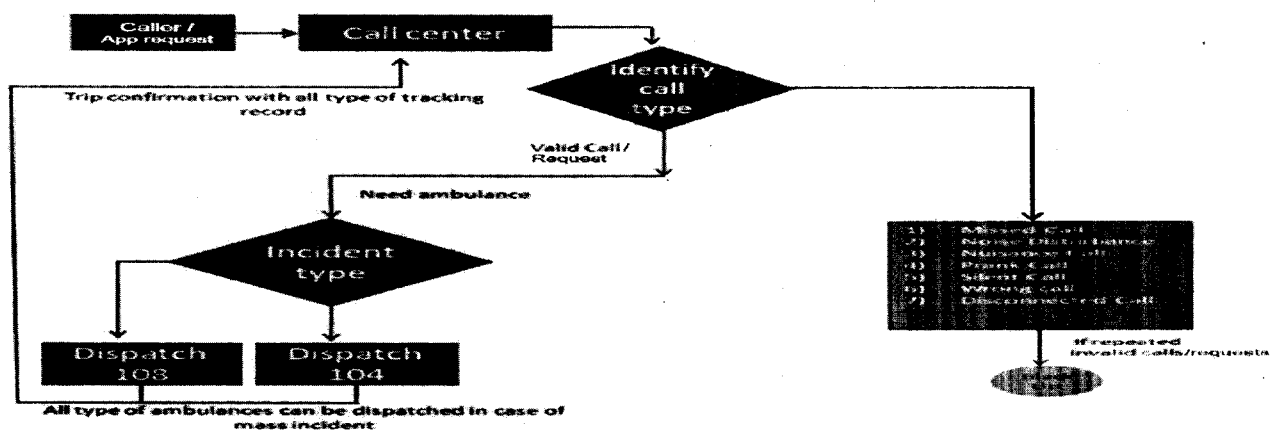
Note: Dark zone- where communication network of any telecom service provider is not available.

1. Software should be efficient, scalable and transparent to assist the stake-holders of RSHS (NHM) (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 also to assist agents for dispatching the appropriate available nearest ambulance. The bidder shall ensure upgradation of existing hardwares, softwares
2. Servers, voice solutions and all other solutions and equipments etc. Bidder shall also ensure maintenance of hardwares, softwares, servers, voice solutions and all other solutions and equipments etc. Under upgradation and maintenance of the hardware, software, server, voice solution etc. in addition to the other

requirements to fulfill the Service Level IT expectation of the project, the bidder shall ensure the following but not limited to:-

- a. Upgradation of the existing PBX with its new version of Hardware and Software.
 - b. Latest releases of communication server application to be procured and upgraded.
 - c. Maintenance of call pilot application.
 - d. Upgradation of the existing hardware (servers) for the communication Server Application as per the hardware specifications required for latest versions.
 - e. Upgradation of Call Logger and related solutions with provisions to log calls and backup.
 - f. Replacement of one 24 port switch.
 - g. Upgradation and maintenance of other solutions and equipments etc.
3. However, bidder may visit the existing call center/s and arrive at the best required alternative.
1. Global Positioning System (GPS) should be fully computerized, secured, robust, transparent and scalable (with online real-time login facility from DM&HS) and Comprehensive GPS Data will be available through online/offline reports to DM&HS. Integrated GIS maps (Google Maps), which enables to capture the incident location on the map for immediate dispatch of available nearest ambulance. GPS device should have capacity to store approximately 3000 records during "No Network Connection" situation and GPS History Tracking is an in-built feature of the software. GPS data should be kept for ready reference whenever asked for official purposes during whole of the agreement period and handover the data at the time of termination of the agreement.
 2. GIS Mapping of all government health institutions (Medical College and Hospitals, District Hospitals, Sub Division Hospitals, Satellite Hospitals, Community Health Centre and Primary Health Centre), accredited private hospitals, **Fire Stations, Police Stations** and all ambulances (104 Janani Express, 108 Ambulance) vehicle information should be display on map (i.e. vehicle registration no., driver name, vehicle contact no., speed, status etc) and GIS mapping of Accident prone areas to find out Black spots/Hotspots for better Ambulance deployment.
 3. Integration with SMS gateway and Email: For immediate information or notification of incident/dispatch to the concerned Caller, Ambulance, Police Station, Fire Station and Control Room at Swasthya Bhawan, Jaipur.
 4. Integration with mobile application configured to mobile phone present in ambulance through which drivers can immediately update the date and time stamp, location and status (Available, Busy, Off-road etc) of ambulance.

5. Overall System Flow:



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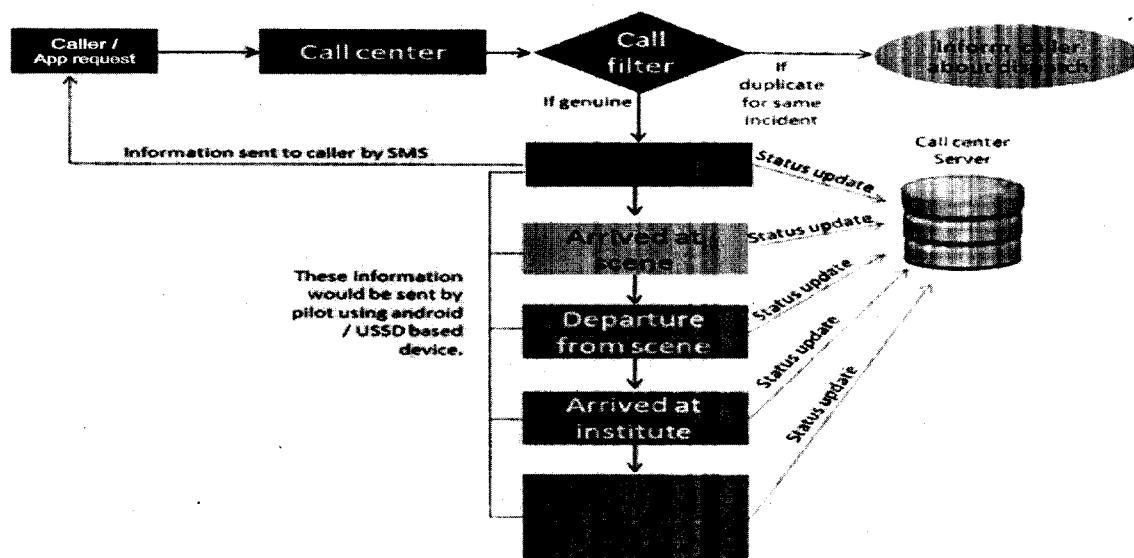
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Note: Integrated facility to block (black list) the number of callers who are calling more than 10 times under call type of prank call, Nuisance call, Wrong call etc. Ensure adequate number of call queues so that calls do not remain unattended.

6. Ambulance Dispatch Flow:



Note: CTN (Confirmation Token Number) can be OPD/IPD/Emergency Registration Number in case of 108 ambulances and JE. Discharge ticket number and referral slip can be used in case of drop back/referral by Janani Express vehicles.

Process details:

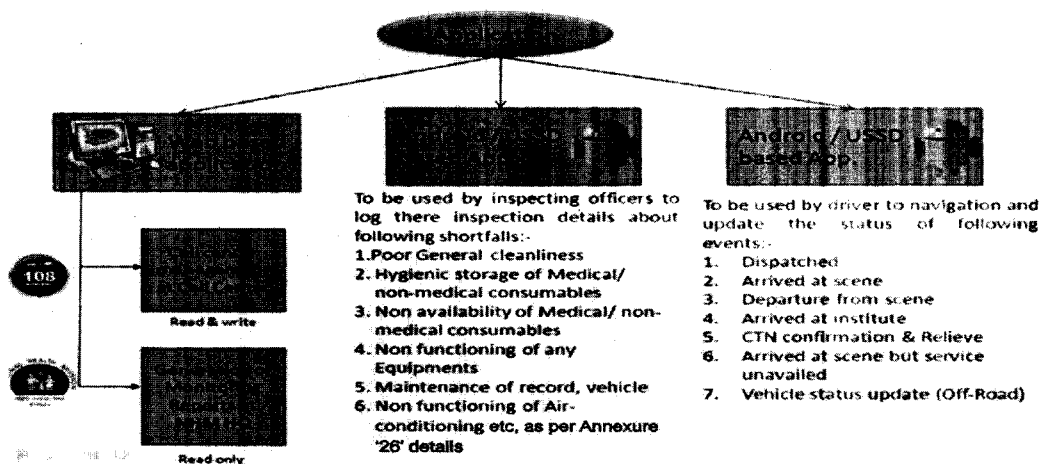
Sr. No.	Ambulance Status	Description
1	Dispatched	Case assigned to ambulance and it started movement towards patient location.
2	Arrived at scene	Ambulance is reached at the patient location.
3	Departure from scene	Ambulance takes the patient and started movement towards health institute/centre.
4	Arrived at institute	Ambulance is reached at health institute/centre with patient.

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5	CTN confirmation & relieve	Driver will enter OPD/IPD/ Emergency Registration Number/Hologram Number through their mobile application to the server. (now ambulance status is changed from Busy to Available for next case)
---	----------------------------	---

7. Application Type:



Note: All the applications should be integrated for real time updation of

vehicle status and other information. (All images are indicative).

- a) For Ambulance Drivers: A mobile application for ambulance drivers shall be mandatory for log their trip details, so that trip time (Response time) calculations can be accurate. This data also integrate with data base and available on MIS report. In case, if it is not done so, then proportionate deduction shall be imposed for the day when it was reported non functional from the claims of Service Provider. No manual entry shall be encouraged in any condition. Reporting of functional status of Driver mobile app in IAP vehicles along with GPS status of vehicle shall be made available on daily basis through portal at control Room of NHM.

Android/USSD based App
For inspecting Officers

Shortfall	Yes	No
1. Poor General cleanliness	☐	☐
2. Hygienic storage of Medical/ non-medical consumables	☐	☐
3. Non availability of Medical/ non-medical consumables	☐	☐
4. Non functioning of any Equipments	☐	☐
5. Maintenance of record, vehicle	☐	☐
6. Non functioning of Air-conditioning etc, as per Annexure '26' details	☐	☐

Report Status

MOBILE APP

JEEVAN VAHINI

Request for Ambulance

Track Ambulance

Call Emergency Helpline

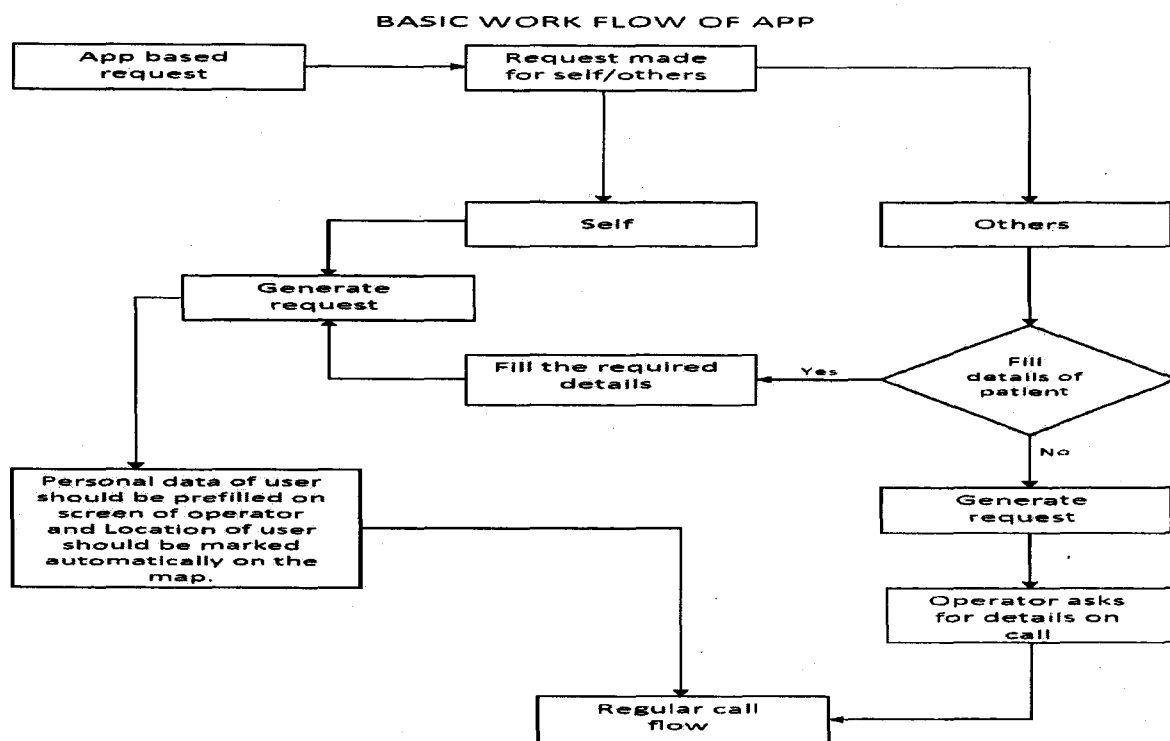
Feedback Form

Register Grievance

Android/USSD based App
For drivers

1. Dispatched
2. Arrived at scene
3. Departure from scene
4. Arrived at institute
5. CTN confirmation & Relieve
6. Arrived at scene but service unavalled

1. Dispatched
 2. Arrived at scene
 3. Departure from scene
 4. Arrived at institute
 5. CTN confirmation & Relieve
 6. Arrived at scene but service unavailed: Vehicle arrived to incident location but patient already moved to the hospital using other vehicle.(Note:- Nos. of unavailed trips shall be reported on Monthly basis before submitting invoices with proper justification-Within response time/ Beyond response time with PCR/BTR)
 7. Vehicle status update (Off-Road): Toggle button for Off-Road/On-Road (Driver mobile app shall be used for real time update , if fails to do so off-road penalty will be imposed as per clause 3.13)
- b) **For Inspecting Officers:** A mobile application for officers to submit their inspection reports regarding shortfalls found in the ambulance as per (Annexure: 15 and Annexure 26). Application come with facility of option "Any Shortfall – YES/NO". On submission of report an automated email of inspection will be send to inspecting officers mail ID/control room mail ID. Each inspection report contains all information with a *unique inspection ID*.It will be the responsibility of Service Provider to make fully functional and user friendly and android/ios based inspection app. For any issue occurs during inspection, a helpline contact details shall also be displayed on app itself for quick disposal.
- c) **For users / callers :** A mobile (Android & ios) application for to make request for ambulance with option of 108 emergency ambulance or 104 Janani express ambulance, track ambulance , call in case of emergency, to provide feedback including quality of service (medical and transportation) & to register grievances etc. It will also be the responsibility of Service Provider to make fully functional and intuitive, user friendly user/caller app. For any issue occurs during request, a helpline contact details shall also be displayed on app itself for quick disposal. The service provider may need to integrate this app with other application of the department like iHMS, etc.



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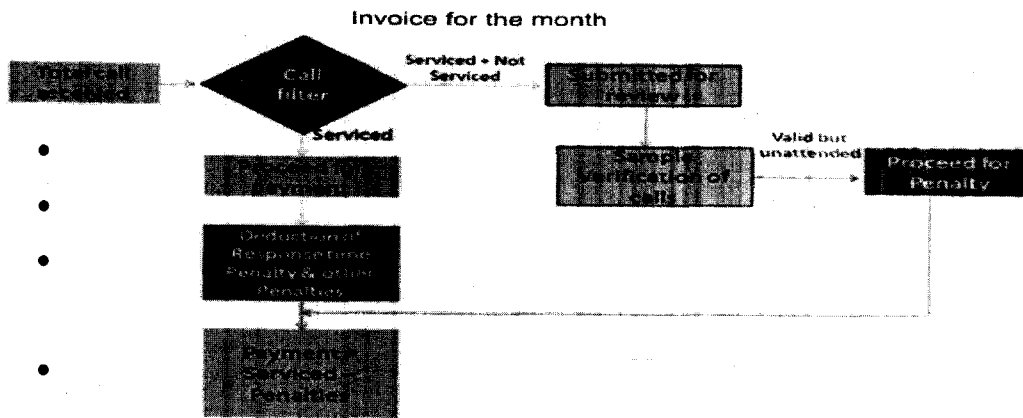
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- d) **For EMT Staff:** Service provider is required to prepare an electronic guide which will be available in the tablet that would be installed in the ambulance and will work in offline mode. In this App, the EMT staff will be able to select the nature of emergency on click of a button. App will show relevant videos to the EMT staff to guide him/her to help the patient for that specific emergency. EMT Staff are required to prepare PCR in electronic format only, using this app. EMT tablet data will be synched with the servers as soon as the ambulance reaches in internet zone. An automated call / sms will be sent to the destination hospital by the EMT app as soon as EMT staff enters the nature of emergency in the app by tap of a button.
- e) **For Department:** A dashboard to be prepared where access will be given at multiple level in the department and concern authority, can view summarized report which can be clicked down to patient level and will have access to call record, trip tracker etc. This dashboard would be built on original data set or the exact mirror of the original data set only. This dashboard should including availabilities and details of each vehicle's repair and maintenance from summarized view to vehicle level details.
- f) **Location Tracking:-** The service provider must have a mechanism for accurately tracking caller's location regardless of subscriber handset type (Smart phone or non-smart phone), telecom network type (GSM, CDMA, GPRS, EDGE, 3G, 4G/LTE, voice only, etc) and telecom infrastructure (using BTS information or other technology as required).

8. **Call Type:**

Valid Call Type	Definition
Emergency Call	When caller request for Medical, Fire, Police emergency
Information call	When caller seeks Information about health institution, health schemes etc.
Repeated Call	When caller calls for an emergency, for which an ambulance is already dispatched.
Follow Up call	When caller calls for his/her registration number/ complaint status.
Invalid Call Type	Definition
Nuisance Call	When caller misbehaving on call
Noise Disturbance	When noise disturbance from caller end
Missed Call	When Caller disconnects the call before it reaches to call taker
Prank Call	When caller making joke or mischievous things on call
Silent Call	When caller calls but no voice contact established
Wrong call	When caller inquire about gas booking, mobile recharge and other customer care numbers.
Disconnected Call	When call gets disconnected from callers end

9. Integrated Payment Module:



- Sample Verification of All Calls.

10. Call Taker (Communication Agent) should be able to identify, generate and capture following information:

- Unique Event ID for every call will be auto generated.
- Emergency Type (Fire, Medical, Police)
- Caller Information (If not available in the telephone database)
- Event Information (Intelligence to identify the duplicate calls, if the same incident is already reported; Integrated GIS Maps (Google Maps), which enables to capture the incident or event location on map)
- Victim/patient Information if available (Name, Age, Gender etc)
- Chief Complaint (Abdominal Pain etc)
- On the basis of above information, severity of the case and medical triage, the system should list the available ambulances and also recommend the nearest ambulance (104 Janani Express, 108 Ambulance etc), so that appropriate ambulance may be assigned and dispatched.
- Integrated SMS gateway would enable to send SMS to following stakeholders soon upon the assignment of ambulance:
 - To the caller as an acknowledgement regarding ambulance dispatch details including trip tracker link.
 - To driver/ pilot with event details and chief complaint of the victim/patient, this helps the EMT in preparing for the case.
 - To MOIC to be prepared for case (*a separate module would be developed to collect the institution profile along with the contact number of MOIC, it would be updated regularly by CMHO/district admin.*).

Once a decision taken to dispatch the ambulance/vehicle call taker should be able to identify, generate and

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capture following information:

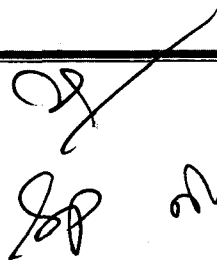
- i. Event Information using Unique Event ID.
- j. Dispatched
- k. Arrived at scene
- l. Departure from scene
- m. Arrived at institute
- n. Appending the victims to same event, in case of existence of more number of victims in the incident location than registered.
 - A. Real time status of hospital, ambulance and first responder to call centre on GIS maps:
 - i. To identify the nearest ambulance and event location
 - ii. To locate or navigate the shortest path between the ambulance and event location
 - iii. To display distance between ambulance and event location along with average time to reach the event location.
 - iv. To identify the nearest hospital and event location
 - v. To locate or navigate the shortest path between the event location and hospital
 - vi. To display distance between hospital and event location along with average time to reach the hospital.
 - vii. To monitor the ambulance movement and status on GIS maps to avoid the delay in service delivery (i.e. Live tracking of the ambulance while handling the emergency case)

11. Police and Fire Dispatch Module

- a. Receiving events dispatched from call taker through intelligent robust routing engine of ERS, and will be queued up at each PDA/FDA desk.
- b. Populating the following information regarding the event:
 - i. Caller Information
 - ii. Event Information
 - iii. Victim details
- c. Populating the nearest police station/fire station details based on the event details
- d. Sending reports (customizable formats) regarding the event information to corresponding police station/fire station (to the registered telephone number)
- e. Sending an E-mail to the corresponding official with the relevant information.

12. Dashboard

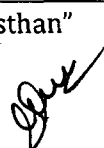
- a. No. of calls
- b. No. of calls attended
- c. No. of calls un-attended
- d. No. of emergency calls (Fire, Medical, Police)



- e. No. of trips (Availed/ Unavailed – Within response time/ Beyond response time)
 - f. No. of vehicles (On road- Available/Busy, Off road)
13. User Management System (User-role, Access rights): Application will capable to de-assign / modify the user credentials.
- a. Admin
 - b. State Hq
 - c. District Hq
 - d. Block Hq
 - e. Call taker
 - f. Call Dispatch
 - g. Other users
14. **Search Module:** to view information of any call or case in public domain on the basis of following parameters (Event ID, Call Date, Caller Name – first 3 characters, Caller Mobile No., Ambulance Registration No., Patient Name - first 3 characters, Gender, Patient Mobile No., Address - first 3 characters, District, Chief Complaint Type, Location Address, Hospital Name). Include provision of Query By form in the software for the generation of any kind of dynamic reports (downloadable/exportable). Dynamic reporting should be incorporated in the software, so that queries can be generated on various fields
15. A module for fleet management should be developed. It contains the regular updated information of On Road, Off Road, available ambulance, on trip ambulance, Unit wise manpower detail etc.
16. Regular AMC of hardware/ software/ security / communication channels etc. for the smooth operations of the ERS and GPS. Hand-over of complete operational system at the end of the project period/ termination/ discontinuation services.
17. Each call must be recorded and kept saved and each recording should also be accessible at NHM Control Room, Swasthya Bhawan. Submission of monthly backup of database by 3rd of every month to the NHM and the support to restore the backup and view/search information. Ensure adequate number of call queues so that calls do not remain unattended. All calls should be attended within 10 Seconds.
18. Change request mechanism including User Acceptance Test (UAT) for the timely incorporation of any new report (in MIS) to avoid frequent changes in the software. The administrative rights to amend/modify/change the application software, database structures should be under the control of NHM.
19. Conduct quarterly security audit of complete ERS system from hackers/ viruses/ malwares/ spywares with timely renewal of the security services. The deployment of complete application software and database at the SIHFW, Jaipur with proper provision of Disaster Recovery (DR).

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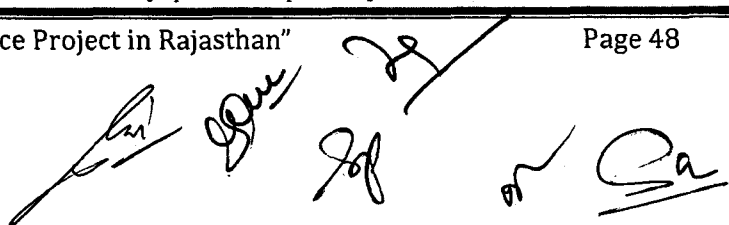






20. Application software, database structures, database, application user-interfaces, user guidelines, flowcharts, training manuals and other information should be provided to RSHS (NHM) which will be the property of RSHS (NHM).
21. Reporting: For performance monitoring of project reporting of each and every instance is necessary. Software should generate various required auto generated reports online/offline/graphical/charts) which are downloadable/ exportable without manual intervention. 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. Software will come with the facility of redesign/customisable the reporting format, graphical format.
- Generation of report will be: daily report, weekly report, monthly report, quarterly report and yearly report. Report will be export in multiple formats like PDF, EXCEL, and WORD. Report fields will be following and they will also customisable:

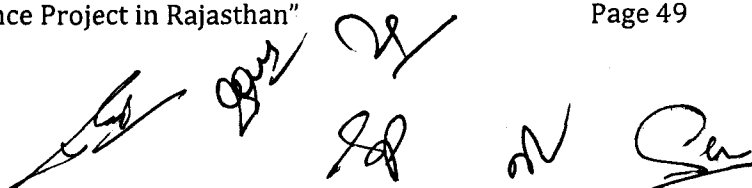
- Serviced Call: type of service availed (108 & 104-JE). Service availed history report: it contains all events like caller details (name, number, location), call taker details (telecaller/call agent), type of service availed, date and time of each event, dispatch, seen arrival, return to base location of ambulance, instance details (type of case wise details).
- Report of not answered/attend call by telecaller within 10 seconds of incoming call.
- Not serviced Call: Full details of call in the category of reason of NOT SERVICED, not answered call by telecaller, Disconnected by caller, Noise disturbance, Misbehave, Duplicate/ repeated call, Prank call, Nuisance call (requested for other services) along with the Call record Data location wise.
- Fleet Management report: Full report of vehicle.
- Reports regarding complaints Received & complaints attended.
- Various MIS reports (detailed/summary) for reporting periodical progress of project.
- The service provider shall have to submit the reports in the form and format desired by the Department/ NHM.
- Virtual PBX Integration, Supporting Multi-user environment, Ability to use common call input screen for Medial, Police, Fire , Ability to automatically check for duplicate calls, Caller Archived Maintained (whenever same caller call then its information automatically display on screen) and nuisance/prank callers should be blocked for 30 days, Inbound/Outbound Calling, Automatic generation of custom caller IDs and trip IDs, Full-featured Advanced Call Distribution (ACD), Adequate number of call queues, Ability to forward information, Call return, Call out (VOIP/PSTN), Conference bridges, Ability to view queues; calls & agents status, Time based, real-time statistics, One-click call monitoring, Customizable fields, functionality, Powerful/Customizable reporting with graphical representation, Real-time queue and agent data reports, Data Import/Export facility, AVLIT integration under MDA application Computer added TRAI protocol equivalent to AMCDS for communication, Agent application medical Protocol for physician application, Business continuity plan compliant [so that services should not hamper],



Single record for an event [end to end], integrated with audio and data, Fleet management system, Single integrated application to administer all users of the ERS system, Mobile application for tracking of vehicles, Reports for response time, kilometers travelled ,trips.

Abbreviations:

1. ERC: Emergency Response Centre
2. GIS: Geographical Information System
3. GPS: Global Positioning System
4. SMS: Short Message Service
5. RSHS: Rajasthan State Health Society
6. NHM: National Health Mission
7. DM&HS: Directorate of Medical and Health Services
8. FIFO: First In First Out
9. USSD: "Unstructured Supplementary Service Data" mobile communication technology
10. CTN: Confirmation Token Number
11. OPD: Out Patient Department
12. IPD: In Patient Department
13. HQ: Head Quarter (NHM, Swasthya Bhawan, C-Scheme, Jaipur)
14. MIS: Management Information system
15. EMT: Emergency Medical Technician
16. MOIC: Medical Officer In-Charge
17. CMHO: Chief Medical & Health Officer
18. PDA: Police Dispatch Agent
19. FDA: Fire Dispatch Agent
20. AMC: Annual Maintenance Contract
21. AED: Automated External Defibrillator
22. UAT: User Acceptance Test
23. ERS: Emergency Response System
24. DR: Disaster Recovery
25. BTR: Beneficiary Track record
26. Institute: Health facility



3.17 Quality assurance in operations

3.17.1 Call Recording and Monitoring

All calls received by the call takers second by second will be recorded using the "state of the art technology", enabling electronic transfer of the recorded calls (*.mp3 files) to the server established at State Head Quarters automatically. These same recorded calls will also be sent to the Department on CD-ROM on monthly basis and as and when required. Such calls will also be used for paramedic training & coaching for which supervisor will listen to calls for improving the performance of paramedics.

3.17.2 Call Verification

Calls will be made available at all times to the Department staff for any necessary due diligence. There will be team from NHM office to monitor the call center as mentioned in clause 3.3.3.. These two teams will monitor the calls received at the call center on day to day basis. These personnel will be Deputed by third party engaged by NHM. Verification of the calls shall be undertaken by this team under supervision of NHM IT team.

3.17.3 IT Infrastructure Audit

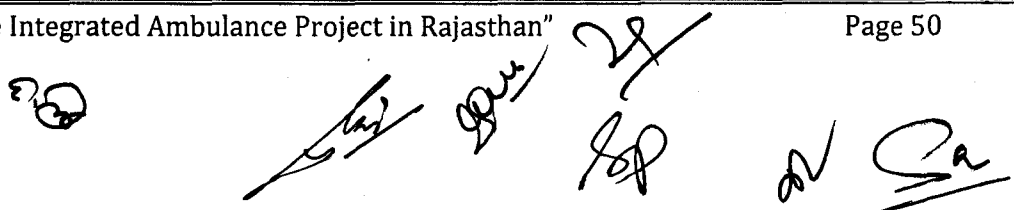
The software developed/customized for the system shall be audited by the agency from a security & controls perspective. Such audit shall also include the IT infrastructure and network deployed for system. Following are the broad activities to be performed by the Agency as part of the security review. The security review shall subject the system for the following activities:-

- Audit of Network, Server and Application security mechanisms
- Assessment of authentication mechanism provided in the application /components/ modules
- Assessment of data encryption mechanisms implemented for the solution
- Assessment of data access privileges, retention periods and archival mechanisms
- Server and Application security features incorporated etc

3.18 Performance Standards

3.18.1 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 all 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/vehicle 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 deductions shall be effected from the claims as per penalty clause.

(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/JE 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
Dessert areas- Bikaner, Barmer and Jaisalmer other than Urban Areas- 40 Mins.
- iv. Urban ,Rural and dessert areas will be defined by the location of the patients/site of emergency. 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.
- (iv) Response time standards may be suspended in case of a multi casualty incident or disaster in case Department calls on the vehicles to aid.
- (v) Response time will be determined based on GPS reports. The proportionate deduction shall be imposed
- (vi) if in any case Manual entry is reported for time of call and scene reach time for the day on which manual entry is made.
- (vii) **GPS tracking in dark Zones:-** Service provider shall ensure installation of dual SIM GPS device in the areas which are with no connectivity or are identified as dark zones. If both SIMs fails to catch signals and GPS remains non-functional due to this then for these areas response time and other related information shall be worked out on the basis of history tracking and replay tracking.
- (d) **Trip Calculation for 104 Janani Express as:**
Minimum cases of 4 (four) per day per Ambulance which would be calculated for the state as a whole for the number of Ambulances deployed. In case if the average cases achieved in a month calculated on State average is less than 4 per day, then proportionate deduction from the service fee for the month shall be made.

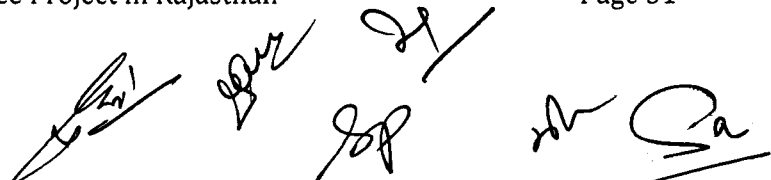
3.19 Call Flow:-

The envisaged call routing of any call coming to the call center is the following:

- 1.A beneficiary dials the “108” or “104” toll free numbe
- 2.The call is received by a call taker within 10 seconds.
- 3.If the beneficiary needs emergency care, the call will be routed to „108” ambulance in case of medical emergency, if 108 ambulance is reported to be busy/not available at that time the call shall be routed to the 104 JE vehicle available for referral transport.
- 4.If call is related to Maternal or Child Health Emergency the call shall be routed to 104 Janani Express. If 104 JE is found busy at that time the call shall be routed to 108 ambulance.
- 5.In case of mass causality/epidemic or any situation like these service provider will have to send both ambulances/vehicles to the site of emergency.

In all the vehicles GPS device should be fitted to capture the movements (from Base Location, to patient location, to hospital and back to base location.

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3.20 Monitoring & Evaluation

- a) The performance will be reviewed by Mission Director, National Health Mission as and when required 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 may be undertaken by National Health Mission.
- e) Regular monitoring of the services shall be undertaken by District / State NHM.

3.21 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, NHM, Government of Rajasthan shall be applicable.

3.22 Force Majeure:

(a) Integrated Ambulance Services as being Emergency 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.

3.23 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.

(d) Handover at the time of exit from the Project:-

The assets will have to be handed over to the Government on completion/termination of the agreement in proper working condition. Service Provider shall ensure to send the detailed information on monthly basis of the assets procured in that particular month.

In case of Ambulances, they have to be handed over back to NHM/Govt. in operative and road worthy condition along with the tools/medical equipments provided by RSHS (NHM) or purchased by the Service Provider during currency of the agreement; 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. In addition to this service provider will be imposed with a penalty @ Rs. 1000/- per day for the number of days the ambulance remain off road due to improper upkeep and handover in non- roadworthy condition.

3.24 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.

3.25 Settlement of Disputes

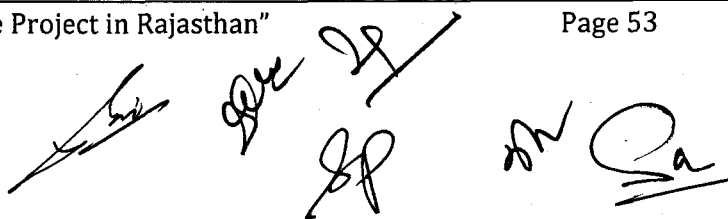
3.25.1 Settlement of Disputes:

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 constituted as below:-

1. Additional Chief Secretary/ Principal Secretary Medical and Health, GoR.
2. Representative of Principal Secretary Finance, GoR.
3. Representative of Principal Secretary Law, GoR.
4. Representative of Principal Secretary IT, GoR.

If either of the party is not satisfied with the decision of above committee it may refer the matter for arbitration as per clause 3.25.2

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3.25.2 Arbitration

If dispute or difference of any kind shall arise between the NHM and the Service Provider in connection with or relating to the agreement, the parties shall make every effort to resolve the same amicably by mutual consultations.

If the parties fail to resolve their dispute or difference by such mutual consultations and even after the decision of Dispute Settlement Committee within thirty days of commencement of meeting of Dispute Settlement Committee, then either the NHM or the Service provider may give notice to the other party of its intention to commence arbitration, as hereinafter provided. The applicable arbitration procedure will be as per the Arbitration and Conciliation Act 1996 of India. In that event, the dispute or difference shall be referred to the sole arbitration of an officer as the arbitrator to be appointed by the NHM. If the arbitrator to whom the matter is initially referred is transferred or vacates his office or is unable to act for any reason, he/she shall be replaced by another person appointed by NHM to act as Arbitrator.

Work under the agreement shall, notwithstanding the existence of any such dispute or difference, continue during arbitration proceedings and no payment due or payable by the NHM or the Service Provider shall be withheld on account of such proceedings unless such payments are the direct subject of the arbitration.

Reference to arbitration shall be a condition precedent to any other action at law.

Venue of Arbitration: The venue of arbitration shall be Jaipur, Rajasthan.

3.26 Right to Accept and Reject any Proposal

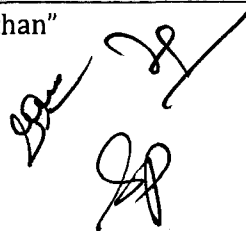
Government reserves the right to accept or reject any proposal at any time without any liability or any obligation for such rejection or annulment and without assigning any reason.

3.27 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 as mentioned in the proposal above.

3.28 Jurisdiction of Court

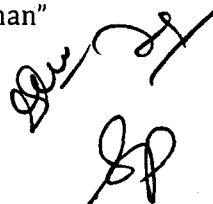
Legal proceedings if any shall be subject to Jaipur (Rajasthan) jurisdiction only.



PART A4

REPORTING

- Generation of daily and monthly reports regarding call received and ambulance dispatch.
- Generation of daily and monthly reports regarding trips, response time and off road- on road ambulances.
- Generation of daily and monthly reports regarding calls Received & calls attended.
- Generation of daily and monthly reports regarding complaints Received & complaints attended.
- Furnishing daily report to the concerned authority for updating the website.
- It shall have feature to generate customized reports as per the requirement
- The daily, weekly, monthly reports shall include the following but not limited to:
 - a. Report on calls handled & call pending,
 - b. Average duration of calls,
 - c. Min. & max duration of calls,
 - d. Number of instances the operator found busy,
 - e. Calls abandoned due to breakdown,
 - f. Calls made / referred to stakeholder institutions.
 - g. Call type etc.
- Submission of quarterly / half yearly / annual progress report to MD, NHM.
- It shall have the facility to host the web portal containing the MIS and call data Captured.
- Senior level officials of the Call Centre operator shall be required to attend status review meetings to be held by, at regular intervals.
- The service provider shall have to submit the reports in the form and format desired /designed by the Department/ NHM as & when required in form of MS Excel, MS word or Audio clips.
- All reporting shall be done as mentioned in Ann. 14 and as and when required by MD, NHM or respective district authorities.

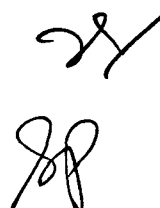


ANNEXURES

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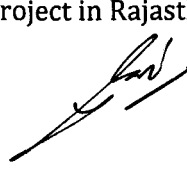
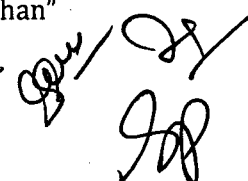




ANNEXURE 1: APPLICATION FORMAT

APPLICATION FORMAT		
1	Proposal submitted for the project	Proposal submitted for the project: "Integrated Ambulance Services" popularly known as "Dial an Ambulance 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 No"s.)	
3	Proposal addressed to:	Mission Director, NHM, 3 rd Floor, Swasthya Bhawan, 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..... For Rs..... 2. Receipt/DD No.....dt..... For Rs..... 3. Receipt/DD No.....dt..... 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- 1) 2) 3) 4) 5) Total pages..... Name and signature of the authorized signatory Seal of the organization Date:	

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ANNEXURE 1A: FORMAT for UNDERTAKING

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.

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.

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:

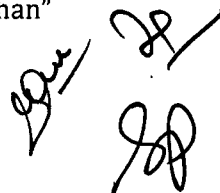
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Date:

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 (BOO)

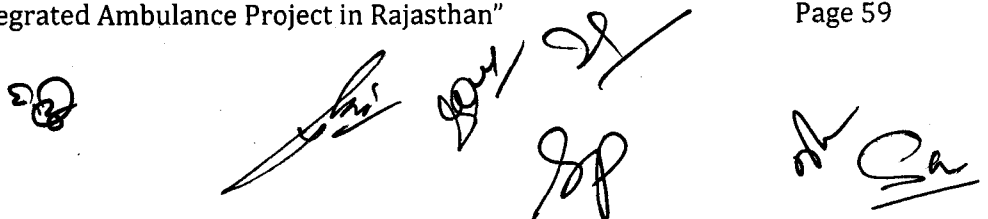
To
The
Department of Health & Family Welfare
Government of Rajasthan

Sub: - Request for Proposal for "Integrated Ambulance Services" popularly known as "Dial an Ambulance 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 equals to the 5% of the Project Cost arrived at on the basis of financial quote before execution of the formal agreement
4. I/We agree to abide by this proposal/bid for a period of 120 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. The Financial Bid shall be inclusive of all the applicable taxes however Service Tax would be extra as applicable and the government will not pay anything over and above the rate quoted in the BOQ.

Yours faithfully
Signature of the authorized signatory

The bottom of the page features several handwritten signatures and initials in black ink. On the left, there is a small, stylized signature. In the center, there are three distinct signatures, with the middle one being the most prominent. On the right, there are two more signatures, one of which appears to be a name like 'Sa'.

ANNEXURE 3: FINANCIAL BID
SCHEDULE OF RATES (BOO)

Implementation of "Advanced Integrated Ambulance Services" popularly known as "Dial an ambulance Service Project" in the State of Rajasthan.

(OPERATING COST PER AMBULANCE PER MONTH) 24x7

(Indian Rupees)

Particulars	Cost/Ambulance/Month + Exclusive of all other applicable taxes in INR
(1) Implementation of Advanced Integrated Ambulance Service project in Rajasthan for: <u>Charges for Operation & maintenance of the 108 ambulance services including:- As per Annexure 29(A)</u>	Single rate to be quoted for all items mentioned in annexure 29 (A)from 1 st to 22 nd Rs (Rupees in words Only). Per 108 ambulance per month.
(2) Implementation of Advanced Integrated Ambulance Service project in Rajasthan for: <u>Charges for Turnkey Basis (Ambulance .Operation & maintenance of the 108 ambulance services including:- As per Annexure 29 (B)</u>	Single rate to be quoted for all items mentioned in annexure 29 (B)from 1 st to 23 rd Rs (Rupees in words Only). Per 108 ambulance per month.(Turnkey Basis)
(3) Implementation of Integrated Ambulance Service project in Rajasthan for: <u>Charges for Operation & maintenance of the 104 Janani Express services including:- As per Annexure 29 (C)</u>	Single rate to be quoted for all items mentioned in annexure 29 (C)from 1 st to 19 rd Rs (Rupees in words Only). Per 104 –JE Ambulance per month

*Service Provider is required to submit the item wise details for hardwares, softwares, servers, voice solutions and all other solutions and equipments etc.

Note:

- Bidders are strictly instructed to quote their rates in BoQ on eproc only.
- Bidders shall not indicate their rates in technical bid/proposal in any form. If found, Bid will be rejected at first instance.

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 "Integrated Ambulance Services" popularly known as "Advanced Integrated 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 "Integrated 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 "Integrated 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)

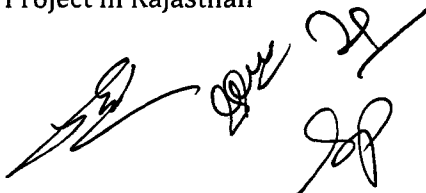
Certified true copy by Company Secretary

(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.

2/3





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, 2013, passed the following Resolution:

RESOLVED THAT pursuant to the provisions of the Companies Act, 2013 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 "Integrated Ambulance Project" popularly known as "Dial An Ambulance 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)

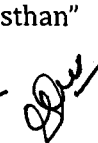
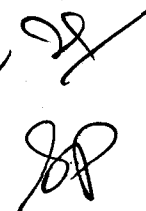
Certified true copy

(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: "Integrated Ambulance Services" popularly known as "Dial an Ambulance 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 BID SECURITY

amount of Rs. _____,

Tender Fee, RISL processing Fee as per the requirements of this RFP. We confirm that our proposal is valid for a period of 120 days from opening of technical proposal.

Yours faithfully,

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

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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 "Integrated Ambulance Services" popularly known as "Dial an ambulance 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)

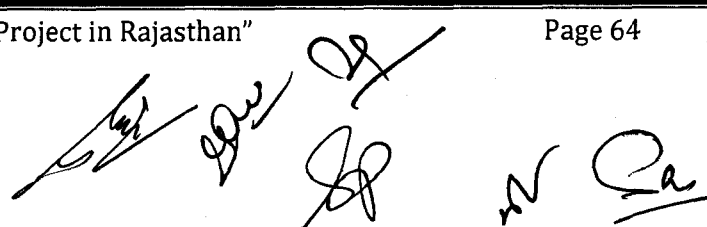
(Name, Title and Address of the Attorney)

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.

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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 "Integrated Ambulance Services" popularly known as "Dial an Ambulance 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 Mission Director, National Health Mission ,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 "Integrated Ambulance Services" popularly known as "Dial an 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 performance 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 and addendums thereof, if any 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.
- (c) The mode of payment will be in accordance with clause 3.14 of the RFP-
9. Agreement period will be for 5 years in two phases .First phase shall be for the period of 3 years and will commence from date of signing of agreement. After two & half years it would be evaluated at state level monitoring committee. If services found satisfactory as per provision of RFP it will be extended for remaining two years

10. 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.

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- (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.

(d) Handover at the time of exit from the Project

The assets will have to be handed over to the Government on completion/termination of the agreement in proper working condition. Service Provider shall ensure to send the detailed information on monthly basis of the assets procured in that particular month.

In case of Ambulances, they have to be handed over back to NHM/Govt. in operative and road worthy condition along with the tools/medical equipments provided by RSHS (NHM) or purchased by the Service Provider during currency of the agreement; 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. In addition to this service provider will be imposed with a penalty @ Rs. 1000/- per day for the number of days the ambulance remain off road due to improper upkeep and handover in non- roadworthy condition.

9. 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.

10. All disputes arising out of this agreement and all questions relating to the interpretation of this agreement shall be decided as specified in RFP document.

In witness whereof the parties hereto have set their hands on theday of.....201.

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

For and on behalf of
The Governor or Rajasthan

Signature of the
approved service provider,

Mission Director,
Signature & Designation

Date:

Date:

Witness No.1.

1. Witness

Witness No.2.

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 Nineteen 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 (NHM) intends to operate a professionally managed "Integrated Ambulance Services" popularly known as "Dial an Ambulance Service Project" for operationalization of existing fleet of 741 Ambulances (108) (actually handed over could be 701), 600 Janani Express and further expansion (if required) with BLS/ JE ambulances as per the directives of Department of Medical Health & Family Welfare.

WHEREAS, the RSHS (NHM) 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 (NHM) 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.

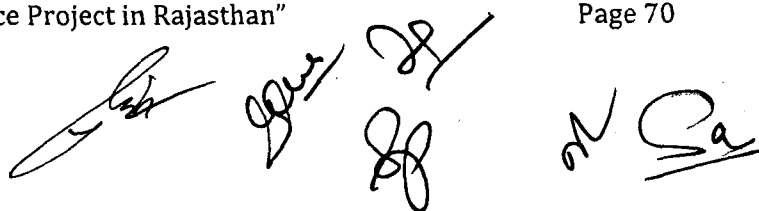
5. Subject to the terms of this Agreement, the share of each Member of the Consortium in the issued equity share capital of the Project Company is/shall be in the following proportion:-

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 thereof 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 favor 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

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The bottom of the page contains several handwritten signatures and initials. From left to right, there is a circular stamp with the number '30' inside. Next to it are several handwritten signatures, including one that appears to be 'S. S.', another that looks like 'S. S.', and a third that is more stylized. To the right of these is a signature that looks like 'M. S.'.

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:

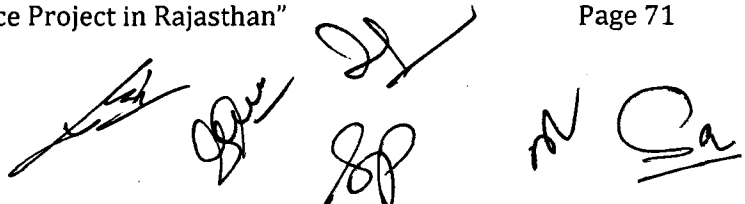
Name:

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 have not been convicted by any court of law for any criminal or civil offences either in the past or in the present. In case of a consortium, the members should not have been declared bankrupt in the past (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) have not been convicted by any court of law for any criminal or civil offences either in the past or in the present, also not have been declared bankrupt in the past by Department of Health & FW, Govt. of Rajasthan/ or any other entity of GoR 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 thisDay 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- 10A1: FORMAT FOR AFFIDAVIT

Format for Affidavit Certifying that Entity/ Promoter(s) /Director(s)/Members of Entity that no investigation statutory body / Govt. investigating Agency of any state Govt./ Central Govt. is undertaken or pending against the bidder for the charge having nature of criminal/economic offence/fraud (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 no investigation statutory body / Govt. investigating Agency of any state Govt./ Central Govt. is undertaken or pending against us or any of our promoter(s) /director(s) for the charge having nature of criminal/economic offence/fraud 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 thisDay 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- 10A2: FORMAT FOR AFFIDAVIT

Format for Affidavit Certifying that Entity/ Promoter(s) /Director(s)/Members of Entity have not been debarred in the past or in the last three years from the date of submission of bid by any Central/ State/ Public Sector undertaking in India **(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) have not been debarred in the past or in the last three years from the date of submission of bid by any Central/ State/ Public Sector undertaking 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 thisDay of....., 20.....

Name of the Applicant

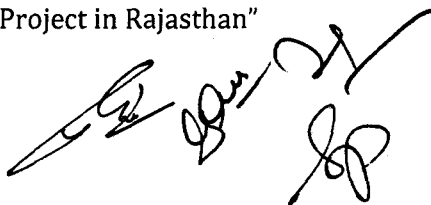
.....
Signature of the Authorized Person

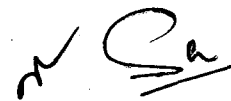
.....
Name of the Authorized Person

Note:

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

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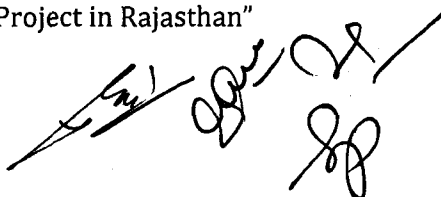
ANNEXURE- 10B: ANTI COLLUSION CERTIFICATE

Anti-Collusion Certificate

We hereby certify and confirm that in the preparation and submission of our Proposal for "Integrated Ambulance Services" popularly known as "Dial an Ambulance 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: DETAILS OF REGISTRATION AND
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)

Details of Organization:		
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		
Relevant Qualification Details Years wise and State Wise	Note 3	
1. State wise		
Name of the State / Province where vehicle (Four wheel motorized) services are/were operational		
Years of experience in Ambulances (Four wheel motorized) operations in that/those State(s)		
Current areas of operation – specify (Names of the Districts)		
	Year 1	Year 2
Number of vehicles operated	Note 4	
Number of vehicles 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 Centre	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 Consortium Members will 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 2.3.2.

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[Handwritten signatures and initials]

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.

Certificate from the Government Authority /Statutory Auditor regarding Qualification experience

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: refer clause of Eligibility Criteria for the same (2.3)

	Year 1	Year 2	Year n
Number of vehicles			
Number of seats at the ERC / Call Centre			
Others as per requirement in clause 2.3			

Signature of the Authorized 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 Authority from the State/Country in which the vehicles are operational.

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ANNEXURE-12: DETAILS OF ELIGIBLE EXPERIENCE

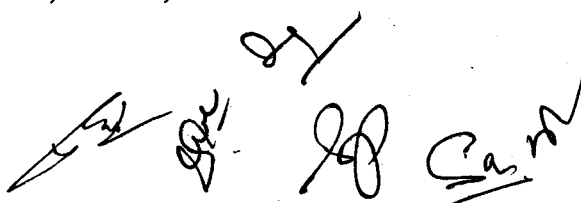
The Bidder should provide the experience details of services provided at each location/ State / Country / undertaken. The experience of the Single Entity's Associate or Consortium Member's Associates (who are not Members of the Consortium) will also be considered.

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.

Name of entity providing support:		Project cost:	
Location: (country, state, districts):		No. of staff by category:	
		Ambulance/vehicle (Four wheel motorized): (per ambulance)	ERC/ Call center:
			Other: (E.g. first Responders etc.)
Duration of ambulance service provision:		Profile of staff: 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.)	
Start Date:	Completion Date:	Name of associates, Consortium members (if any):	
Details of government organization, funding organization or contracting agency for ambulance/vehicle services:			
Name of Senior staff (Project Director, Project Manager) involved and functions performed:			
Narrative description of project and the outcome: (Including number of patients transported per ambulance per annum on an average)			
Brief description of actual services provided:			
Fleet details: • Number of vehicles (Four wheel motorized) operated • Number of ALS ambulance operated • Number of BLS ambulance operated • Number of ambulances owned • Number of ambulances leased			
Emergency Response Centre / Call Centre:			

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- 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.

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[Handwritten signatures and initials]

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.....

Revenue-Expenditure Statement

S.No.	In Rupee, at the end of concerned Financial Year	(In Rs. Lacs)		
		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.	Profit Before Tax I = (A-B-F-G-H)			
10.	Tax Paid (J)			
11.	Profit After Tax (I-J)			

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)

NCrore (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 Turn Over is to be considered	Relationship with Bidding Company* (if any)	Financial Year to be considered for Turn Over	Turn Over (in Rs. Crore) of the Consortium Member Company	Equity Commitment (in %age) in Bidding Consortium	Committed Net Worth (in Rs. Crore)
Company 1						
Total						

* 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)

ANNEXURE- 14: SOFTWARE REPORTING FORMATS

INTEGRATED AMBULANCE SERVICES – RSHS (NRHM), RAJASTHAN

R/1

Call-type-wise summary sheet

Up to reporting month: [..... - 2019]

Print date & time

S.No	Call-type		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	1	Emergency calls – 108 Ambulance	N	$(n/N) \times 100$	p	$(p/P) \times 100$
2	2	Emergency calls – 104 Janani Express (From home to hospital)	M	$(m/N) \times 100$	q	$(q/P) \times 100$
3	3	Non Emergency calls – 104 Janani Express (From hospital to home)	O	$(o/N) \times 100$	r	$(r/P) \times 100$
4	4	104 Janani Express (Referrals)				
5	5	Disconnected calls				
6	6	Follow-up calls				
7	7	Missed calls				
8	8	Noise Disturbance calls				
9	9	Nuisance calls				
10	10	Silent calls				
11	11	Wrong calls				
Total:			N	$(N/N) \times 100$	P	$(P/P) \times 100$

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

INTEGRATED AMBULANCE SERVICES – RSHS (NRHM), RAJASTHAN

R/2

Call-time-wise summary sheet

Up to reporting month: [..... - 2019]

Print date & time

SNo.	Call time in seconds	During the month		Up to the month	
		No. of calls	% of A	No. of calls	% of B
1	0				
2	1 – 30				
3	31 – 60				
4	61 – 120				
5	121 – 300				
6	301 – 1200				
7	More than 1200				
Total		A		B	

INTEGRATED AMBULANCE SERVICES – RSHS (NRHM), RAJASTHAN

R/3

Emergency type-wise summary sheet

Up to reporting month: [..... - 2019]

Print date & time

S.No	Code	Emergency type	during the month		Up to the month	
			No. of cases	% of cases	No. of Cases	% of cases
1	2	3	4	5	6	7
1	1	Medical (exclusively)	n	$(n/N) \times 100$	p	$(p/P) \times 100$
2	2	Police (exclusively)	m	$(m/N) \times 100$	q	$(q/P) \times 100$
3	3	Fire (exclusively)	o	$(o/N) \times 100$	r	$(r/P) \times 100$
4	4	Medical and Police	a	$(a/N) \times 100$	s	$(s/P) \times 100$
5	5	Medical and Fire	b	$(b/N) \times 100$	t	$(t/P) \times 100$
6	6	Medical, Police and Fire	c	$(c/N) \times 100$	u	$(u/P) \times 100$
7	7	Other (if any)				
		Total:	N	$(N/N) \times 100$	P	$(P/P) \times 100$

Note: Col no. 5 & 7 values should be up to 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]

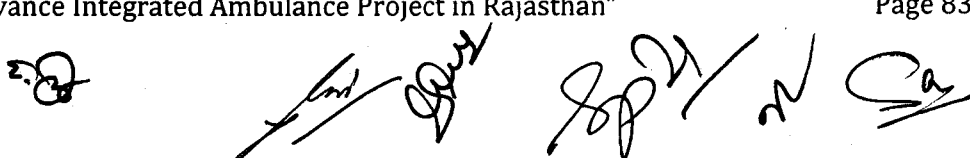
**INTEGRATED AMBULANCE SERVICES –
RSHS (NRHM), RAJASTHAN
R/4**

Closing status-wise summary sheet

**Up to
reporting
month:**

[..... -
2019] Print
date & time

S.No	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		6	7		9
		Availed						
1	1	Emergency calls – 108 Ambulance						
2	2	Emergency calls – 104 Janani Express (From home to hospital)						
3	3	Non Emergency calls – 104 Janani Express (From hospital to home)						
4	4	104 Janani Express (Referrals)						
5	5	Total Availed	n		(n/N)x100	p		(p/P)x100
6	6	Not Availed						
7	7	Emergency calls – 108 Ambulance						
8	8	Emergency calls – 104 Janani Express (From home to hospital)						
9	9	Non Emergency calls – 104 Janani Express (From hospital to home)						
10	10	104 Janani Express (Referrals)						
11	11	Total Not Availed	m		(m/N)x100	q		(q/P)x100
12	12	Vehicle Busy						
13	13	Emergency calls – 108 Ambulance						
14	14	Emergency calls – 104 Janani Express (From home to hospital)						
15	15	Non Emergency calls – 104 Janani Express (From hospital to home)						
16	16	104 Janani Express (Referrals)						
17	17	Total Vehicle Busy	o		(o/N)x100	r		(r/P)x100
		Total	N		(N/N)x100	P		(P/P)x100



**INTEGRATED AMBULANCE SERVICES –
RSHS (NRHM), RAJASTHAN**

R/5

**District-wise 108 Ambulance/ 104 Janani Express utilization
detail [MONTHLY REPORT] for the reporting month: [.... -
2019]**

Print date & time

S.No	Name of District	No. of ambulances in the district	Detail of trips				No. of ambulances			No. of institutional deliveries carried by 108 amb.	No. of deliveries in 108 amb.	No. of neonates (upto 1 year) 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
Total													

R/6

[MONTHLY REPORT] Up to the reporting month: [..... - 2019]

Print date & time

Total				S.No	
				Name of District	
				Name of Block/ Tehsil	
				Registration no. of ambulance	
				Ambulance type	
				Availed no. of trips	during the month of
				Not availed no. of trips	
				Total no. of trips	
				Distance covered for availed trips (In Kms)	
				Distance covered for NOT availed trips (In Kms)	
				Total distance (in Kms)	
				Total no. of beneficiaries	
				No. of institutional deliveries carried by 108 amb.	
				No. of deliveries in 108 amb./104 JE	
				No. of neonates (upto 1 year) carried by 108 amb./ 104 JE	up to the
				Availed no. of trips	
				Not availed no. of trips	
				Total no. of trips	
				Distance covered for availed trips (In Kms)	
				Distance covered for NOT availed trips (In Kms)	
				Total distance (in Kms)	
				Total no. of beneficiaries	
				No. of institutional deliveries carried by 108 amb.	
				No. of deliveries in 108 amb./104 JE	
				No. of neonates (upto 1 year) carried by 108 amb./ 104 JE	

20 ~~21~~ 22 23 24 25

INTEGRATED AMBULANCE SERVICES – RSHS (NRHM), RAJASTHAN

R/7

Details of 108 Ambulance/ 104 Janani Express Real time Off-road [DAILY AND MONTHLY REPORT] For the reporting month: [..... - 2019]

Print date & time

S.No	Name of District	Registration no. of ambulance	Ambulance type	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	9
	Total:							

INTEGRATED AMBULANCE SERVICES – RSHS (NRHM), RAJASTHAN

R/8

Details of 108 Ambulance/ 104 Janani Express trips [DAILY REPORT]

for the reporting month: [..... - 2019]

Print date & time

1	S.No
2	Trip no.
3	District name
4	Block name
5	Base location of amb.
6	Base location type (Urban/ Rural/ Desert)
7	Ambulance type
8	Reg. no. of amb.
9	ERS based.. Call date and time (DD/MM/YYYY HH:MM:SS AM/PM)
10	Service type (Medical/ Fire/ Police/ Other)
11	Call Closing Type (Availed/ Not Availed)
12	Chief complaint
13	Home to Hospital/ Hospital to Home/ Referral
14	Full Name of Caller
15	Caller phone no.
16	Full Name of Patient name
17	Patient Age (in Months/Years)
18	Patient gender (Male/ Female)
19	Patient PCTS ID (In case of pregnant women)
20	Patient contact no.
21	Patient location/ Patient place/ picked from
22	GPS based.. Reaching date & time at patient location/ patient place/ picked from (DD/MM/YYYY HH:MM:SS AM/PM)
23	GPS based....Response Time (in Minutes)
24	GPS based.. Hospital reaching date & time (DD/MM/YYYY HH:MM:SS AM/PM)
25	GPS based.. Reaching date & time back to base location (DD/MM/YYYY HH:MM:SS AM/PM)
26	OPD/ IPD/ Emergency no.
27	GPS based.. Total distance (in Kms)
28	
29	Driver name
30	Driver/crew mobile no.
31	Remarks

INTEGRATED AMBULANCE SERVICES – RSHS (NRHM), RAJASTHAN

R/9

Ambulance-wise detail of medical emergencies handled [DAILY REPORT] Up to reporting date: [DD/MM/YYYY]

Print date & time

Sl. No.	District name/ Block Name/ Base Location/ Type	Amb. Type/ Reg. no. of amb.	Launch date (DD/MM/YYYY)	today							during the month (cumulative up to date)							Up to date (cumulative since the launch date)												
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	27	28	29	30	31
				Avalled no. of trips	Not avalled no. of trips	Total no. of trips	Distance covered for avalled trips (in Kms)	Distance covered for NOT avalled trips (in Kms)	Total distance (in Kms)				Avalled no. of trips	Not avalled no. of trips	Total no. of trips	Distance covered for avalled trips (in Kms)	Distance covered for NOT avalled trips (in Kms)	Total distance (in Kms)				Avalled no. of trips	Not avalled no. of trips	Total no. of trips	Distance covered for avalled trips (in Kms)	Distance covered for NOT avalled trips (in Kms)	Total distance (in Kms)			

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- RSHS (NRHM), RAJASTHAN R/10

No. of trips [MonthlyREPORT] For the month: [.. -

2019]

[illegible]

- RSHS (NRHM), RAJASTHAN R/11

(Km Based) [Monthly REPORT] For the month: [.. - 2019]

[illegible]

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INTEGRATED AMBULANCE SERVICES – RSHS (NHM), RAJASTHAN

R/12

District wise, Vehicle wise, Insurance & Fitness [Monthly REPORT]

(Separate format for each type of vehicle)

For the month: [..... - 2019]

Print date & time

Monthly Statement regarding information of Insurance & Fitness of						
Month.....						
S.No.	District	Ambulance No.	Fitness Due Date	Fitness Done on Date	Insurance Due Date	Insurance Done on Date

Renewed fitness & Insurance Certificate in the current month should follow with report.

INTEGRATED AMBULANCE SERVICES – RSHS (NHM), RAJASTHAN
R/13

District wise, Vehicle wise, Accident report [Daily REPORT]

(Separate format for each type of vehicle)

For the month: [..... - 2019]

Print date & time

Daily Accident Report (... ..)									
Date.....									
S.No.	District	Ambulance No.	Location	Accident Place	Type of Accident Fetal/Major/Minor	FIR No.	Police Station	Reason of Accident	Remarks

INTEGRATED AMBULANCE SERVICES – RSHS (NHM), RAJASTHAN
R/14

District wise, Vehicle wise, Accident report [Monthly REPORT]

(Separate format for each type of vehicle)

For the month: [..... - 2019]

Print date & time

Integrated Ambulance Services RSHS (NHM), Rajasthan.									
Monthly Accident Report									
Date.....									
S.No.	District	Ambulance No.	Location	Accident Place	Accident Date	On Road Date	Release dated from Police custody	Total Off road days	Type of Accident Fetal/Major/Minor

INTEGRATED AMBULANCE SERVICES – RSHS (NHM), RAJASTHAN

R/15

Maintenance [Monthly REPORT]

(Separate format for each type of vehicle)

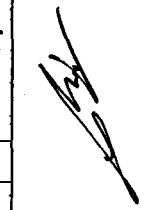
For the month: [..... - 2019]

Print date & time

Oil Change & Major Maintenance Done As per vehicle maintenance schedule											
Month.....											
S.No	District	Ambulance No.	Wheel Greasing			Oil Change (Engine/Gear/Steering/Differential/Power Steering)			Coolant Change		
			Previous wheel greasing done on K.M.	Progressive K.M. of Ambulance	Difference K.M. of 4 & 5	Previous Change K.M.	Progressive K.M.	Difference K.M. of 7 & 8	Previous Change K.M.	Progressive K.M.	Difference K.M. of 11 & 12
1	2	3	4	5	6	7	8	9	10	11	12






INTEGRATED AMBULANCE SERVICES – RSHS (NHM), RAJASTHAN

R/16

Operational Vehicle report [Monthly REPORT]

(Separate format for each type of vehicle)

For the month: [..... - 2019]

Print date & time

Monthly Operational Vehicle report							
Month.....							
S.No.	District	Ambulance No.	Make	Year Modal	On road days	K.M. operated in the Month	Progressive K.M. of Ambulance

Advanced Integrated Ambulance -RSHS,NHM-Rajasthan

R/18

JANANI EXPRESS Physical Progress Report, Cumulative, from..... to Reporting Month

Reporting Month:

S.N	Distri ct	No of JE	No. of JE Function al	Pregnant Women		Children up to 1 Month		No. of sterlization cases transporte d	Referral					Total Home to Hosp. Tranportati on	Total Hosp. to Home Tranportati on	Total Referr al
				Hom e to Hos p.	Hos p. to Ho me	Home to Hosp.	Hos p. to Hom e		No. of Pregn ant wom en	No. of Childr en up to 1 month	No. of Sick newbo rn	No. of SAM Childr en	No. of Childre n identi fied in RBSK			
STATE TOTAL		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Average Response time		
Urban	Rural	Desert Area

ANNEXURE- 15**Medical/ Non-medical Consumables in 108-Ambulances to be provided by Service Provider**

S.No.	DRESSING MATERIAL	Unit	Quantity
1	BANDAIDS	No"s	20
2	BETADINE SOLUTION 500ml	Bottle	1
3	COTTON ROLL 500GM	No's	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"	No"s	2
15	SURGICAL SPIRIT BOTTLE 500ML	Bottle	1
SURGICAL			
1	AIRWAYS (NASOPHARYNGEAL)-SIZE 6.5MM	No"s	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) 3 ply with elastic.	Box	Pack of 100
22	I V CANULA-SIZE 16	No's	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 (if along with glucometer disposable lancet present then no requirement of separate lancet).	"	50
31	MACKINTOSH (1 X 2 MTS)	"	1
32	MUCOUS SUCKER (Both adult & Pediatrics)	"	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

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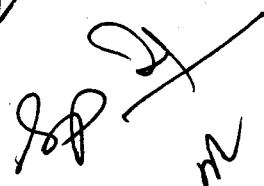
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46	STRIP GLUCOMETER	"	1
47	SUCTION CATHETER 12	"	5
48	SUCTION CATHETER 16	"	5
49	SUCTION CONNECTOR	"	1
50	SURGICAL GLOVES (1 OF 100 PIECES)	Box	Pack of 100
51	STERILISED SILK SUTURE WITH CURVED CUTTING NEEDLE 1/0,2/0,3/0	No"s	one each type
52	URINE PAN (PLASTIC)	"	1
MEDICINE			
1	GLUCOSE 100GM	No"s	2
2	I V FLUID DEXTROSE 25%	Bottle	5
3	I V FLUID NORMAL SALINE(Both 250 & 500 ml)	"	10
4	I V FLUID RINGER (RL) 500 ML	"	10
5	I V FLUID 5% GNS	"	5
6	INJ ADRENALINE 1ML	No"s	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

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23	INJ METACLOPRAMIDE	"	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 (500 mg)	Strip	1
31	TAB CLOPIDOGREL (500 mg)	"	1
32	TAB DISPRIN/ASPRIN (500 mg)	"	1
33	TAB PARACETAMOL (500 mg)	"	1
34	TAB ISOSORBRITE DINITRATE 5MG SUBLINGUAL	"	1 Strip
35	XYLOCAINE (WOCAINE GEL) 2% 30GM JELLY	No's	1 tube
NON-MEDICAL			
1	LIQUID MOSQUITO REFIL	No's	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





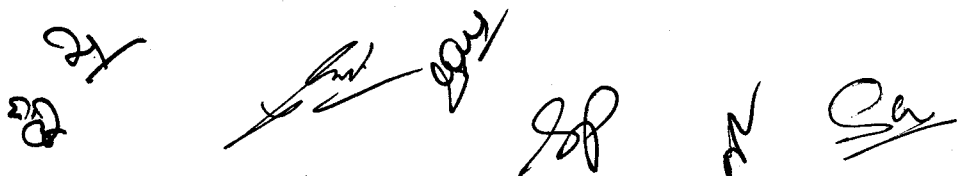

18	TISSUE PAPERS	“	1
19	YELLOW CLOTH	“	5
OTHER ITEMS			
1	BED SHEETS	No"s	1
2	PLASTIC BUCKETS	“	1
3	PLASTIC JAR MEDIUM 500ML	“	5
4	PLASTIC JAR SMALL 250ML	“	17
5	PLASTIC MUG	“	1
6	RAIN COAT	“	2
7	TRAY PLASTIC	“	2
STATIONARY			
1	ACCIDENT INFORMATION FORM	No"s	1
2	ATTENDANCE RECORD REGISTER	“	1
3	BINDER PIN (1 BOX)	Box	1
4	BLANK REGISTER	No"s	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	ERCP 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

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20	PATIENT RECEIVING RECORD REGISTER	"	1
21	PCR BOOK	"	2
22	PENCIL	"	2
23	PLASTIC BOX SQUARE TYPE	"	1
24	POSTERS / 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	No's	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 BREAKDOWN REGISTER	"	1
45	Copy of Valid Fitness Certificate		
46	Copy of Valid Insurance Policy of the Vehicle		
47	Copy of Valid Pollution Under Control (PUC)		
MEDICAL EQUIPMENTS			
1	AMBU BAG- CHILD (BAG VALUE MASK)	No's	1
2	AMBU BAG- ADULT (BAG VALUE MASK)	"	1

Handwritten signatures and initials at the bottom of the page.

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
32	Automated External Defibrillator (AED) to be mounted at each NHM Ambulances (Subject to approval from Gol) and in Turnkey ambulances it has be provided by Service provider.		



TOOLS			
1	ALLEN KEY 14MM	No"s	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]	No"s	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 2NO"S	"	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

Handwritten signatures and initials are present at the bottom of the page, including a large signature on the left, a signature in the center, and several initials on the right.

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 ADJUSTABLE 12" OPEN END	"	1

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ANNEXURE- 16: STAFF DEPLOYMENT & TRAINING

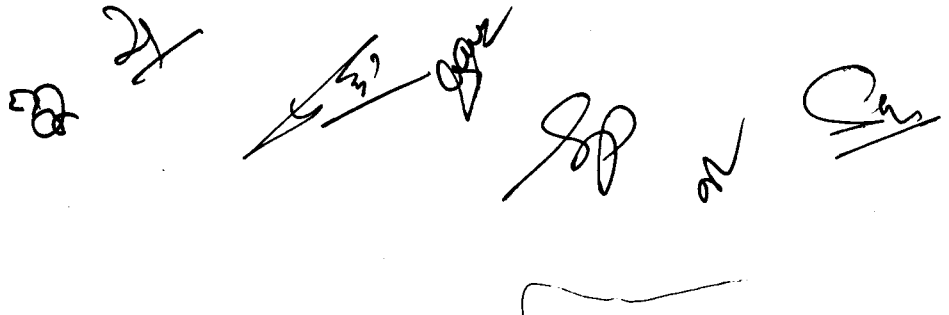
AMBULANCE STAFF:

Ambulance Drivers (As in Government for driving of light (HCV) vehicles)

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

Emergency Medical Technician training (EMT)

- 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

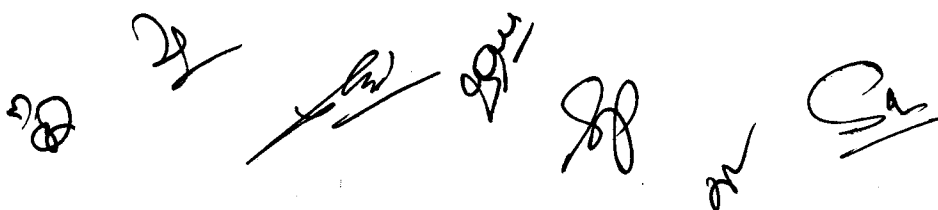
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ANNEXURE- 17: CHECK LIST OF DOCUMENTS

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

S.No.	List of documents	Y/N	Page no.
1	To demonstrate annual turnover/ gross receipts in this segment of at least Rs.25 (Twenty Five) Crores in each of the last 3 (three) financial years, the bidder shall submit audited annual accounts for last 3 years		
2	In case of a Consortium, Audited Annual Reports and financial statements of all the Members of Consortium		
3	Board resolutions {as per Annexure-3A(i) & 3A (ii)}		
4	Joint Bidding Agreement (as per Annexure-9).		
5	Anti-Collusion Certificate (as per Annexure-10B).		
6	Financial Capability of the bidder duly certified by C.A. (as per Annexure-13 & 13A).		

1	DD for cost of RFP of Rs. 2,00,000/- in favor of Rajasthan State Health Society, payable at Jaipur (Nonrefundable) Scanned copy with online proposal		
2	DD towards RISL Processing fees for Rs. 1000/- in favor of M.D. RISL payable at Jaipur (Non-refundable) Scanned copy with online proposal		
3	"Bid security DD/Bankers Cheque/ Bank Guarantee/FDR for Rs. 13.68 crores (Thirteen Crores and Sixty eight Lakhs only) in favor of "Rajasthan State Health society". Scanned copy with online proposal.		
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,10A1,10A2.		
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.		
19	Certificate of existing Call centre capacity of 50 seats.		

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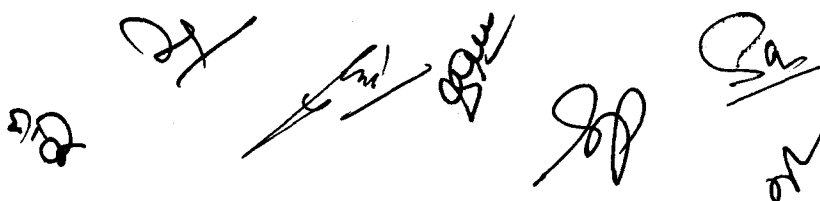
ANNEXURE 18

Details of Ambulances/ Vehicles to be operationalized under Advanced Integrated Ambulance Project

Details of 108 Ambulance kilometers of vehicles			
Sr No	Model Year	Make	Count of Year Modal
1	2008	Tata 407	28
2	2009	Tata 407	19
3	2009	Tata 410	1
4	2010	Tata 407	38
5	2010	Tata 410	1
6	2011	Force	1
7	2011	Tata 407	73
8	2011	Tata Winger	115
9	2013	Force	98
10	2013	Tata 410	33
11	2013	Tata Winger	2
12	2014	Tata 410	128
13	2015	Tata 410	64
14	2017	Force	100
Grand Total			701

Details of 104 Ambulance kilometers of vehicles			
Sr. No.	Model Year	Make	Count of Year Modal
1	2007	Tata Sumo	1
2	2012	Maruti Omni	364
3	2012	Tata Sumo	1
4	2013	Maruti Eeco	39
5	2013	Maruti Omni	23
6	2013	Tata Sumo	1
7	2014	Maruti Eeco	52
8	2014	Maruti Omni	9
9	2014	Tata Sumo	90
10	2015	Tata Sumo	1
Grand Total			581

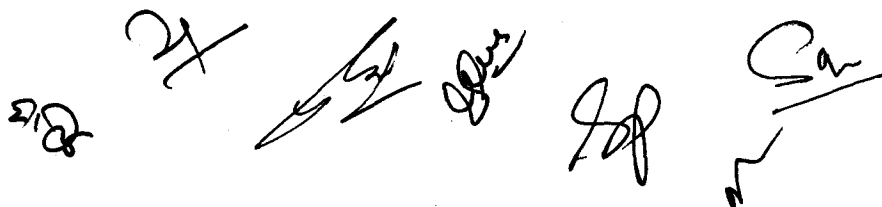
Details of other Ambulances to be introduced in fleet of 104 JE			
Sr. no.	Model Year	Make	Count of Ambulance
1	2013	Tata Winger	138
2	2014	Tata Winger	49
3	2015	Tata Winger	1
4	2016	Tata Winger	1
Grand Total			189



Annexure- 19

Details of Equipments to be kept in Other Ambulances

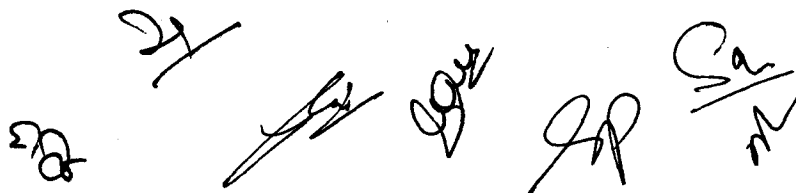
1. Manual Suction machine
2. O2 Cylinder with complete MASK System
3. Pulse Oxymeter
4. BP Apparatus
5. Stethoscope
6. First Aid Kit
7. Medicine Kit

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Annexure 20

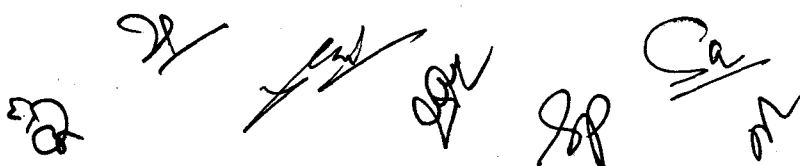
Time Schedule for taking over the project

S. No.	Activity	Timeline															
1	Agreement Signing	First Day (Day one)															
2	Taking over the call center (108 and 104)	Hardware in seven days															
3	Installation of software (108 and 104)	By 15th day															
4	Test Check (108 and 104)	By 20 th to 25 th day															
5	Full taking over of call center (108 and 104)	By 30 th Day															
6	Taking over 50% of fleet of ambulances (108 and 104-JE)	Within 30 days of agreement signing															
7	Taking over remaining ambulances (108,104 JE)	In next 30 days but total within 60 days from the date of agreement signing															
8	Vehicles to be run on Turnkey Basis (108Ambulances)	Whole fleet of Ambulances to be operational within 120 days from date of signing of agreement. if not, then Penalty shall be imposed:- <table><tr><th>S . N o .</th><th>Time Period started from date of signing of Agreement</th><th>No. Of Ambulances have to be operational</th></tr><tr><td>1</td><td>45 days</td><td>30</td></tr><tr><td>2</td><td>60 days</td><td>40</td></tr><tr><td>3</td><td>90 days</td><td>60</td></tr><tr><td>4</td><td>120 days</td><td>74</td></tr></table> as per mentioned in point no.9 of Clause 3.13 (Operational Parameter and Penalty Clauses)	S . N o .	Time Period started from date of signing of Agreement	No. Of Ambulances have to be operational	1	45 days	30	2	60 days	40	3	90 days	60	4	120 days	74
S . N o .	Time Period started from date of signing of Agreement	No. Of Ambulances have to be operational															
1	45 days	30															
2	60 days	40															
3	90 days	60															
4	120 days	74															



Annexure 21
Details of Hardware and Software at 108 call center
Summary Sheet

S.No	Item Description	Total Quantity
1	Cisco Router	1
2	Actura 48210	1
3	Brocade Fiber Switch	2
4	Call Pilot Server	1
5	Canon M145	1
6	CC TV Equipment System	1
7	Cisco Firewall	1
8	Dell Latitude E5400	15
9	Dell Optiplex 330 Desktop	100
10	Dell P1950 Server	15
11	Dell P2950 Server	2
12	Dell SAN Storage	1
13	Dell TL 4000 Backup Device	1
14	HP Color Laser jet 1515N	1
15	HP Laser Jet 1522	1
16	HP-Laptop	2
17	Nortel EPABX	1
18	Nortel Phone M3904	50
19	Projector Sanyo	3
20	Scanner	
21	Switch	5
22	Techroute	1
23	UPS LN 3300 Model	2
24	Verint VAM Server	1
25	VIDEO CONFERENCING MACHINE	1
26	Xerox Printer	
Grand Total		210



Details of computer hardware, equipment, network, voice solution and software @ 108 Call Center

S.No	Item Description	Specification	Quantity	Purchase Date	Status (Working/ Not Working)
1	Dell P1950 Server	Xeon 2.33GHz,4GB RAM, 300GB HDD	1	Procured in b/w May 2008 to Sept 2008)	Working
2	Dell P1950 Server	Xeon 2.33GHz,4GB RAM, 300GB HDD	1	-do-	Working
3	Dell P1950 Server	Xeon 2.33GHz,2GB RAM, 300GB HDD	1	-do-	Working
4	Dell P1950 Server	Xeon 2.33GHz,2GB RAM 300GB HDD	1	-do-	Working
5	Dell P1950 Server	Xeon 2.33GHz,24GB RAM, 300GB HDD	1	-do-	Working
6	Dell P1950 Server	Xeon 2.33GHz,4GB 300GB HDD	1	-do-	Working
7	Dell P1950 Server	Xeon 2.33GHz,2GB RAM 300GB HDD	1	-do-	Working
8	Dell P1950 Server	Xeon 2.33GHz,2GB RAM 300GB HDD	1	-do-	Working
9	Dell P1950 Server	Xeon 2.33GHz,4GB RAM 300GB HDD	1	-do-	Working
10	Dell P2950 Server	Xeon 1.90GHz,4GB RAM,300GB HDD	1	-do-	Working
11	Dell P1950 Server	Xeon 2.33GHz,4GB RAM 300GB HDD	1	-do-	Working
12	Dell P2950 Server	Xeon 1.90GHz,4GB RAM,300GB HDD	1	-do-	Working
13	Dell P1950 Server	Xeon 2.33GHz,300GB HDD	1	-do-	Working
14	Dell P1950 Server	Xeon 2.33GHz,4GB RAM300GB HDD	1	-do-	Working
15	Dell P1950 Server	Xeon 2.33GHz,300GB HDD, 2GB RAM	1	-do-	Working
16	Dell P1950 Server	Xeon 2.33GHz,4GB RAM 300GB HDD	1	-do-	Working
17	Dell P1950 Server	Xeon 2.33GHz,300GB HDD	1	-do-	Working

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18	Verint VAM Server	Celeon 1.33GHz, 80GB HDD, 1GB RAM	1	-do-	Working
19	Nortel Phone M3904	Nortel	50	-do-	Working
20	Nortel EPABX	Nortel CS1000	1	-do-	Working
21	Actura 48210	Emersion FCBC Power Supply	1	-do-	Working
22	Dell TL 4000 Backup Device		1	-do-	Working
23	Dell SAN Storage	1TB*11, 300GB*10 HDD	1	-do-	Working
24	Brocade Fiber Switch		1	-do-	Working
25	Brocade Fiber Switch		1	-do-	Working
26	Cisco Firewall	ASA 5510	1	-do-	Working
27	Cisco Router	1800 Series	1	-do-	Working
28	Techroute	TR1725	1	-do-	Working
29	Call Pilot Server	Intel P-4, 3.0Ghz 512 MB RAM, 80 GB	1	-do-	Working
30	Dell Latitude E5400	C2D 2 GHz, 1GB, 80 GB, 15.4"	1	-do-	Working
31	Dell Latitude E5400	C2D 2 GHz, 1GB, 80 GB, 14"	1	-do-	Working
32	Dell Latitude E5400	C2D 2 GHz, 1GB, 80 GB, 14"	1	-do-	Working
33	Dell Latitude E5400	C2D 2 GHz, 1GB, 80 GB, 14"	1	-do-	Working
34	Dell Latitude E5400	C2D 2 GHz, 1GB, 80 GB, 14"	1	-do-	Working
35	Dell Latitude E5400	C2D 2 GHz, 1GB, 80 GB, 14"	1	-do-	Working
36	Dell Latitude E5400	C2D 2 GHz, 1GB, 80 GB, 14"	1	-do-	Working
37	Dell Latitude E5400	C2D 2 GHz, 1GB, 80 GB, 14"	1	-do-	Working
38	Dell Latitude E5400	C2D 2 GHz, 1GB, 80 GB, 14"	1	-do-	Working
39	Dell Latitude E5400	C2D 2 GHz, 1GB, 80 GB, 14"	1	-do-	Working
40	Dell Latitude E5400	C2D 2 GHz, 1GB, 80 GB, 14"	1	-do-	Working
41	Dell Latitude E5400	C2D 2 GHz, 2GB, 80 GB, 14"	1	-do-	Working
42	Dell Latitude E5400	C2D 2 GHz, 1GB, 80 GB, 14"	1	-do-	Working
43	Dell Latitude E5400	C2D 2 GHz, 1GB, 80 GB, 14"	1	-do-	Working
44	Dell Latitude E5400	C2D 2 GHz, 1GB, 80 GB, 14"	1	-do-	Working
45	HP-Laptop	C2D 2 GHz, 2GB, 80 GB, 14"	1	-do-	Working
46	HP-Laptop	C2D 2 GHz, 1GB, 80 GB, 14"	1	-do-	Working
47	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
48	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 2GB, 160 GB, 17"	1	-do-	Working
49	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 2GB, 160 GB, 17"	1	-do-	Working
50	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
51	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
52	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
53	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 2GB, 160 GB, 17"	1	-do-	Working
54	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 2GB, 160 GB, 17"	1	-do-	Working

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96	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
97	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
98	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
99	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
100	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
101	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
102	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
103	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
104	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
105	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
106	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
107	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
108	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
109	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 2GB, 160 GB, 17"	1	-do-	Working
110	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
111	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
112	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
113	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
114	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 2GB, 160 GB, 17"	1	-do-	Working
115	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
116	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
117	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
118	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
119	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
120	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
121	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
122	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
123	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
124	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
125	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
126	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
127	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
128	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
129	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
130	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
131	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
132	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
133	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
134	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
135	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
136	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
137	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working

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138	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
139	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
140	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
141	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
142	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
143	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
144	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
145	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
146	Dell Optiplex 330 Desktop	C2D 2.4 GHz, 1GB, 160 GB, 17"	1	-do-	Working
147	HP Laser Jet 1522		1	-do-	Not working
148	HP Color Laser jet 1515N		1	-do-	Not working
149	Canon M145		1	-do-	Not working
150	VIDEO CONFERENCING MACHINE	Life Size	1	-do-	Working
151	CC TV Equipment System	LG	1	-do-	Working
152	Projector Sanyo	Sanyo	3	-do-	Not working
153	Scanner			-do-	Working
154	Xerox Printer	Xerox 5225		-do-	Working
155	Switch	24 Port Switch	1	-do-	Working
156	Switch	48 Port Switch	1	-do-	Working
157	Switch	48 Port Switch	1	-do-	Working
158	Switch	48 Port Switch	1	-do-	Working
159	Switch	48 Port Switch	1	-do-	Working
160	UPS LN 3300 Model	40kva*2 Nos DB Make UPS System	2	-do-	Working

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**Details of Hardware and Software at 104 call center
Summary Sheet**

Sr. No.	Item Description	Total Quantity
1	Desktop Computer Dell bundle pack with CPU processor Intel Core 2 Duo 2.93 Ghz RAM -2GB DDR 3, Hard Drive 500GB SATA3, DVD N series Monitor Dell 18.5" E1910H FLATE PANEL DISPLAY, KeyBoard Dell KB212-B USB, Mouse Dell MS111 USB Optical, Software Ubuntu	20
2	IBM Server IBM -processor Intel(R) Xeon(R) CPU E5-24070 @ 2.20GHz RAM 8GB Hard Drive 1TB Software Suse viciBox	2
Total		22

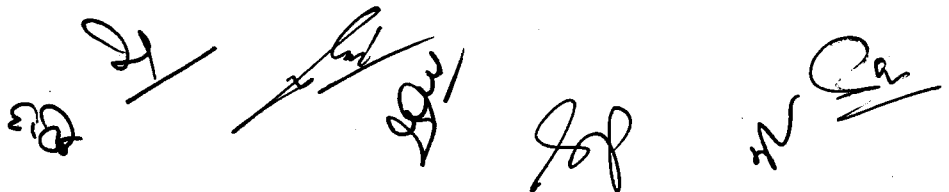
Other Hardware Details

Sr. No.	Item	Description
1	Security Camera	DVR 4 Channel. Two Camera located in 104 Call Center and One Camera in Corridor
2	HeadPhone & MIC	Accutone Headphone with Mic
3	Dial Pad (for call)/Number Keypad	Accutone T3 Dial Pad
4	Employee Attendance System	Through log in reports of the application server system

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Annexure- 22
Required Enclosures with the Invoice for 108 & 104

1. Computer Log sheet of the Vehicle.
2. Off road statement of Vehicles.
3. GPS statement of Vehicles.
4. No. of available vehicle/ working vehicle/ working days.
5. PCR/BTR form certificate certified by BCMO.



Annexure - 23
Technical Specifications/requirements of GPS device to be installed in all vehicles
(108 ambulances, Janani Express)

Minimum Hardware Specifications of VTS/ GPS Device Components

Environmental

- Operating temperature: -30 to +80 °C
- Storage: -40 to +85 °C

Power Supply

- Supply voltage range: 6 to 32V DC
- Current consumption during transmission: less than 150mA
- Device should have internal battery (4 – 6 hours backup) to support uninterrupted service while disconnection of main power supply.

GSM/ GPRS

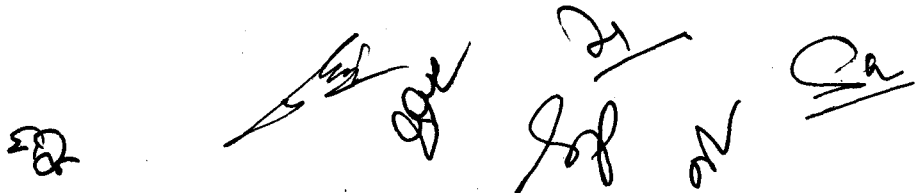
- Built-in GSM antenna: Quad Band
- 6 MB flash memory for embedded application: 2 MB RAM
- Frequency band: 850/ 1900 MHz and 900/1800 MHz

GPS

- Built-in antenna
- CE, ROHS & FCC Certified

Compulsory requirements:

- „Make In India“ GPS device.
- GPS devices compatible with RAAS (Rajasthan accountability & Assurance system)
- Vendor lock free GPS device
- Information of transmission protocol, IMEI No., SIM No., GPS device Make/ Model should be provided to the department for integration with RAAS (Rajasthan Assurance Accountability System) developed by DoIT&C.
- SOS/ ALERT Button facility to capture the movement and various locations of trip (Base (Start) location, Patient location, Hospital location, Base Location after drop) to calculate GPS based Response Time between Base location and Patient location.
- SMS Integration – SMS will be sent to Caller as soon as the ambulance is dispatched, as per above statement.
- One operational sample GPS device (of each type) need to be deposited to NHM along with the information to IMEI No., SIM No., GPS device make/model.
- A dedicated team (not less than 2 nos) of GPS Service Provider should be deployed at SIHFWJaipur for trouble shooting, correction or amendments in reports, user-management, vehicle-management, master data management, response time etc.



BTR form(Beneficiary Trip record)

Incident/ Case ID*

A. Driver Details

Zone :

Date : *

City/Town/Village :

Vehicle Location :

Ambulance registration no.* :-

Trip paid : Yes / No (☒)

Amount of trip(if any) :-

Trip No :-*

Pilot ID* :

Pilot Name :

B. Beneficiary/Patients Details

Patient Name* :

Age* :

Sex :

Insurance :

Yes / No

Mobile no*..:

Aadhar /Ration Card / Other Id no :

Identification Marks :

Height :

Weight :

Res. Address* & Pin code :

Chief Complaint* :-

Vehicle Type : 104- janani Express / Others(☒)

Area : Urban/Rural/Tribal

Incident Location :

City/Town/Village :

Tehsil :

District :

Father/Spouse Name :

Callers Contact no. :

other Contact no.(If available) :

Attendant Name :

Relationship :

Mention if Aid reached at scene
before vehicle arrival:-

I received above mentioned articles
of patients/ Beneficiary(If Any):- *

C. Response time Details*

:-

Odometer reading

Time (hh:mm)

Call received at ambulance

Vehicle departure from location

Vehicle arrival at scene

Reaching victim

Vehicle departure from scene

Enroute to hospital

[Handwritten signatures and initials]

Arrival at hospital
Handed over victim to hospital
Departure from hospital
Back to base

Delay in reaching victim :
Reason if not proceeded :
Reason for not serving victim after reaching site :

D. Hospital / Facility Details* :-

Destination Hospital Name *:-
Comments of the receiving
hospital* :-

Telephone no. :

Arrival time at hospital
*:-

MLC No.

Name & Sign (Doctor / incharge) :*

Designation :

Hospital Seal *:

Patient/Attendant Sign* :

Date :

Time :

Extrication details if available :

Name of good samaritan :

Address :

Contact no. :

A series of handwritten signatures and initials in black ink, including a large 'Ca' on the right, a '26' in the middle, and several other stylized marks on the left.

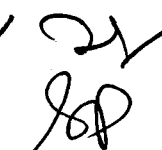
Annexure – 25

Details of 108 Ambulance kilometers of vehicles				
S. No.	Ambulance No.	Make	Year Modal	Progressive K.M. Of Ambulance
1	RJ14PB0085	Tata 407	2008	315167
2	RJ14PB1031	Tata 407	2009	382840
3	RJ14PB5139	Tata 407	2010	314739
4	RJ14PB6194	Tata 407	2010	301433
5	RJ14PB8343	Tata Winger	2011	212863
6	RJ14PB7105	Tata 407	2011	288422
7	RJ14PB8332	Tata Winger	2011	289712
8	RJ14PB8963	Tata Winger	2011	277498
9	RJ14PB7111	Tata 407	2011	478327
10	RJ14PB8134	Tata Winger	2011	243687
11	RJ14PB8361	Tata Winger	2011	377745
12	RJ14PB8338	Tata Winger	2011	265388
13	RJ14PB6832	Tata 407	2011	334960
14	RJ14PB6652	Tata 407	2011	343985
15	RJ14PB8123	Tata Winger	2011	342665
16	RJ14PB8966	Tata Winger	2011	214638
17	RJ14PC7277	Tata 410	2013	253608
18	RJ14PC5264	Force	2013	212173
19	RJ14PC7694	Tata 410	2014	267962
20	RJ14PC7540	Tata 410	2014	230828
21	RJ14PC9995	Tata 410	2014	188446
22	RJ14PD0372	Tata 410	2015	255878
23	RJ14PD0586	Tata 410	2015	105220
24	RJ14PD7014	Force	2017	59609
25	RJ14PD7058	Force	2017	57608
26	RJ14PD7012	Force	2017	67233
27	RJ14PD7013	Force	2017	103196
28	RJ14PD7029	Force	2017	182379
29	RJ14PB0142	Tata 407	2008	625329
30	RJ14PB1042	Tata 407	2009	427100
31	RJ14PB1030	Tata 407	2009	394263
32	RJ14PB6181	Tata 407	2010	420357
33	RJ14PB5128	Tata 407	2010	244860
34	RJ14PB6183	Tata 407	2010	361876
35	RJ14PB5116	Tata 407	2010	292603
36	RJ14PB7133	Tata Winger	2011	225239
37	RJ14PB8355	Tata Winger	2011	323201
38	RJ14PB6649	Tata 407	2011	544744
39	RJ14PB6646	Tata 407	2011	394486
40	RJ14PB7158	Force	2011	253494

Handwritten signatures and initials are present at the bottom of the page, including a large signature on the left, a signature in the center, and initials 'Ca' on the right.

41	RJ14PB6850	Tata 407	2011	526150
42	RJ14PB7304	Tata Winger	2011	446367
43	RJ14PB7423	Tata Winger	2011	342962
44	RJ14PB6828	Tata 407	2011	476161
45	RJ14PB7281	Tata Winger	2011	272724
46	RJ14PB7410	Tata Winger	2011	322111
47	RJ14PB6647	Tata 407	2011	249635
48	RJ14PB6654	Tata 407	2011	561445
49	RJ14PB7302	Tata Winger	2011	287391
50	RJ14PC5251	Force	2013	547798
51	RJ14PC5250	Tata Winger	2013	515091
52	RJ14PC5445	Tata Winger	2013	411928
53	RJ14PC5446	Force	2013	444682
54	RJ14PC7294	Tata 410	2013	153844
55	RJ14PC7286	Tata 410	2013	109618
56	RJ14PC7296	Tata 410	2013	400376
57	RJ14PC5248	Force	2013	375509
58	RJ14PC5249	Force	2013	375317
59	RJ14PC7707	Tata 410	2014	350897
60	RJ14PC9996	Tata 410	2014	271586
61	RJ14PD7021	Force	2017	247855
62	RJ14PD7103	Force	2017	209852
63	RJ14PD7061	Force	2017	183078
64	RJ14PD7074	Force	2017	154354
65	RJ14PD7060	Force	2017	136042
66	RJ14PB5115	Tata 407	2010	277498
67	RJ14PB5138	Tata 407	2010	458661
68	RJ14PB6185	Tata 407	2010	301306
69	RJ14PB6307	Tata 407	2010	346880
70	RJ14PB7405	Tata Winger	2011	236890
71	RJ14PB7290	Tata Winger	2011	242285
72	RJ14PB7399	Tata Winger	2011	344337
73	RJ14PC5061	Force	2013	282883
74	RJ14PC9997	Tata 410	2014	262121
75	RJ14PC7681	Tata 410	2014	311407
76	RJ14PC7709	Tata 410	2014	209010
77	RJ14PD0618	Tata 410	2015	246974
78	RJ14PD0373	Tata 410	2015	280802
79	RJ14PD7030	Force	2017	148897
80	RJ14PD7069	Force	2017	196414
81	RJ14PD7091	Force	2017	122337
82	RJ14PD7033	Force	2017	167589
83	RJ14PD7032	Force	2017	116297
84	RJ14PD7034	Force	2017	108570




85	RJ14PB6173	Tata 407	2010	373291
86	RJ14PB6648	Tata 407	2011	350627
87	RJ14PB7131	Tata Winger	2011	230048
88	RJ14PB6831	Tata 407	2011	393280
89	RJ14PB6852	Tata 407	2011	397732
90	RJ14PB6658	Tata 407	2011	516700
91	RJ14PB7297	Tata Winger	2011	404085
92	RJ14PC5062	Force	2013	347617
93	RJ14PC7711	Tata 410	2014	308958
94	RJ14PC7538	Tata 410	2014	199257
95	RJ14PC9998	Tata 410	2014	324424
96	RJ14PD0587	Tata 410	2015	240391
97	RJ14PD0374	Tata 410	2015	195813
98	RJ14PD7067	Force	2017	123106
99	RJ14PD7057	Force	2017	153762
100	RJ14PB1037	Tata 407	2009	352036
101	RJ14PB5133	TATA 407	2010	464363
102	RJ14PB5130	Tata 407	2010	395140
103	RJ14PB7446	TATA 407	2011	369883
104	RJ14PB7457	Tata 407	2011	424051
105	RJ14PB8365	Tata Winger	2011	429055
106	RJ14PC5253	Force	2013	423087
107	RJ14PC7264	Tata 410	2013	400036
108	RJ14PC5257	Force	2013	380515
109	RJ14PC5259	Force	2013	389847
110	RJ14PC5256	Force	2013	267831
111	RJ14PC5261	Force	2013	379501
112	RJ14PC5064	Force	2013	355485
113	RJ14PC5254	Force	2013	192410
114	RJ14PC5260	Force	2013	270190
115	RJ14PC5237	Force	2013	277485
116	RJ14PC5262	Force	2013	325434
117	RJ14PC5063	Force	2013	265174
118	RJ14PC5255	Force	2013	303105
119	RJ14PC5258	Force	2013	353470
120	RJ14PC7266	Tata 410	2013	155336
121	RJ14PC9894	Tata 410	2014	268610
122	RJ14PC7429	Tata 410	2014	278964
123	RJ14PC7425	Tata 410	2014	224965
124	RJ14PD0033	Tata 410	2014	169844
125	RJ14PC7539	Tata 410	2014	150118
126	RJ14PD0385	Tata 410	2015	206694
127	RJ14PD0619	Tata 410	2015	197637
128	RJ14PD7092	Force	2017	108470

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129	RJ14PD7095	Force	2017	102227
130	RJ14PB0127	Tata 407	2008	382629
131	RJ14PB0187	Tata 407	2008	423184
132	RJ14PB0909	Tata 407	2009	588222
133	RJ14PB1029	Tata 407	2009	475877
134	RJ14PB6842	Tata 407	2011	372352
135	RJ14PB8356	Tata Winger	2011	374667
136	RJ14PB7104	Tata 407	2011	294024
137	RJ14PB8340	Tata Winger	2011	280852
138	RJ14PB7097	Tata 407	2011	335677
139	RJ14PB7424	Tata Winger	2011	402666
140	RJ14PC5066	Force	2013	265965
141	RJ14PC5447	Force	2013	215250
142	RJ14PC7297	Tata 410	2013	243138
143	RJ14PC5448	Force	2013	302211
144	RJ14PC7285	Tata 410	2013	232397
145	RJ14PC5065	Force	2013	409717
146	RJ14PC7675	Tata 410	2014	231930
147	RJ14PC7678	Tata 410	2014	294193
148	RJ14PC7436	Tata 410	2014	562187
149	RJ14PC7546	Tata 410	2014	250215
150	RJ14PD0002	Tata 410	2014	238388
151	RJ14PD7090	Force	2017	71922
152	RJ14PD7068	Force	2017	162878
153	RJ14PB0910	Tata 407	2009	420579
154	RJ14PB6197	Tata 407	2010	445782
155	RJ14PB6192	Tata 407	2010	333369
156	RJ14PB7300	Tata Winger	2011	351173
157	RJ14PB8152	Tata Winger	2011	255962
158	RJ14PB7101	Tata 407	2011	215693
159	RJ14PB7311	Tata Winger	2011	334699
160	RJ14PB7108	Tata 407	2011	404529
161	RJ14PB8348	Tata Winger	2011	254214
162	RJ14PB6834	Tata 407	2011	343839
163	RJ14PB7445	Tata 407	2011	245078
164	RJ14PB6657	Tata 407	2011	333096
165	RJ14PB8122	Tata Winger	2011	219375
166	RJ14PB8150	Tata Winger	2011	213910
167	RJ14PB8964	Tata Winger	2011	184418
168	RJ14PB8139	Tata Winger	2011	201338
169	RJ14PB6844	Tata 407	2011	391163
170	RJ14PB8138	Tata Winger	2011	342680
171	RJ14PC5067	Force	2013	182001
172	RJ14PC7551	Tata 410	2014	210121

22

[Handwritten signatures]

[Handwritten signature]

[Handwritten signature]

173	RJ14PD0003	Tata 410	2014	271284
174	RJ14PD0375	Tata 410	2015	152092
175	RJ14PD7015	Force	2017	77038
176	RJ14PD7017	Force	2017	45746
177	RJ14PD7016	Force	2017	123216
178	RJ14PB1035	Tata 407	2009	438911
179	RJ14PB5125	Tata 407	2010	495202
180	RJ14PB6642	Tata 407	2011	353937
181	RJ14PB7132	Tata Winger	2011	256667
182	RJ14PB8098	Tata Winger	2011	290174
183	RJ14PB6835	Tata 407	2011	472802
184	RJ14PB8328	Tata Winger	2011	364363
185	RJ14PC5068	Force	2013	350021
186	RJ14PC5238	Force	2013	412550
187	RJ14PC7271	Tata 410	2013	428292
188	RJ14PC5069	Force	2013	415633
189	RJ14PD0004	Tata 410	2014	233608
190	RJ14PC7542	Tata 410	2014	301933
191	RJ14PD0616	Tata 410	2015	144125
192	RJ14PD0590	Tata 410	2015	203763
193	RJ14PD0617	Tata 410	2015	228532
194	RJ14PD0588	Tata 410	2015	259922
195	RJ14PD0376	Tata 410	2015	248886
196	RJ14PD7022	Force	2017	111237
197	RJ14PD7097	Force	2017	138464
198	RJ14PB7121	Tata 407	2011	310792
199	RJ14PB8967	Tata Winger	2011	252850
200	RJ14PB7286	Tata Winger	2011	327304
201	RJ14PB7416	Tata Winger	2011	324586
202	RJ14PB7418	Tata Winger	2011	272178
203	RJ14PC5449	Force	2013	200402
204	RJ14PC5071	Force	2013	282231
205	RJ14PC5070	Force	2013	273445
206	RJ14PD0005	Tata 410	2014	134051
207	RJ14PD0378	Tata 410	2015	208588
208	RJ14PD7035	Force	2017	70258
209	RJ14PB1064	Tata 407	2009	392356
210	RJ14PB6186	Tata 407	2010	268628
211	RJ14PB5122	Tata 407	2010	363917
212	RJ14PB6189	Tata 407	2010	277473
213	RJ14PB6640	Tata 407	2011	404874
214	RJ14PB7109	Tata 407	2011	210591
215	RJ14PB7306	Tata Winger	2011	306687
216	RJ14PB7106	Tata 407	2011	412541

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217	RJ14PB7307	Tata Winger	2011	171853
218	RJ14PB6639	Tata 407	2011	338312
219	RJ14PB6848	Tata 407	2011	252955
220	RJ14PC7278	Tata 410	2013	150335
221	RJ14PC7088	Tata 410	2013	108086
222	RJ14PD0006	Tata 410	2014	165192
223	RJ14PC7562	Tata 410	2014	323887
224	RJ14PC7541	Tata 410	2014	142822
225	RJ14PC7557	Tata 410	2014	278758
226	RJ14PC7554	Tata 410	2014	149627
227	RJ14PB7305	Tata Winger	2011	309533
228	RJ14PB8133	Tata Winger	2011	332675
229	RJ14PB8350	Tata Winger	2011	281287
230	RJ14PC5266	Force	2013	362730
231	RJ14PC7292	Tata 410	2013	274397
232	RJ14PC7553	Tata 410	2014	243061
233	RJ14PC7690	Tata 410	2014	235598
234	RJ14PC7526	Tata 410	2014	277634
235	RJ14PD0008	Tata 410	2014	151493
236	RJ14PC7676	Tata 410	2014	218814
237	RJ14PC7530	Tata 410	2014	306663
238	RJ14PD0379	Tata 410	2015	205846
239	RJ14PD0591	Tata 410	2015	147457
240	RJ14PD0380	Tata 410	2015	284185
241	RJ14PD0382	Tata 410	2015	190956
242	RJ14PD7025	Force	2017	224850
243	RJ14PD7082	Force	2017	80894
244	RJ14PD7038	Force	2017	147992
245	RJ14PD7065	Force	2017	136385
246	RJ14PD7024	Force	2017	156010
247	RJ14PD7023	Force	2017	138218
248	RJ14PD7037	Force	2017	109891
249	RJ14PB5118	Tata 407	2010	370272
250	RJ14PB6196	Tata 407	2010	459366
251	RJ14PB5134	Tata 407	2010	442377
252	RJ14PB7278	Tata Winger	2011	299600
253	RJ14PC7275	Tata 410	2013	356729
254	RJ14PC5263	Force	2013	294621
255	RJ14PC7547	Tata 410	2014	330810
256	RJ14PC7437	Tata 410	2014	342226
257	RJ14PD0010	Tata 410	2014	230398
258	RJ14PD0592	Tata 410	2015	241917
259	RJ14PD0620	Tata 410	2015	388163
260	RJ14PD0593	Tata 410	2015	351722

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261	RJ14PD0621	Tata 410	2015	385090
262	RJ14PB7107	Tata 407	2011	234073
263	RJ14PB6843	Tata 407	2011	360062
264	RJ14PB7298	Tata Winger	2011	296181
265	RJ14PC5072	Force	2013	302803
266	RJ14PC5073	Force	2013	508051
267	RJ14PD0012	Tata 410	2014	333586
268	RJ14PD7041	Force	2017	136647
269	RJ14PD7040	Force	2017	186585
270	RJ14PB7312	Tata Winger	2011	255554
271	RJ14PB7406	Tata Winger	2011	284908
272	RJ14PB8346	Tata Winger	2011	187326
273	RJ14PB6836	Tata 407	2011	284375
274	RJ14PC5074	Force	2013	259866
275	RJ14PC7279	Tata 410	2013	371032
276	RJ14PD0013	Tata 410	2014	280861
277	RJ14PC7544	Tata 410	2014	183964
278	RJ14PD0381	Tata 410	2015	241236
279	RJ14PD7045	Force	2017	50590
280	RJ14PD7079	Force	2017	179737
281	RJ14PD7044	Force	2017	63277
282	RJ14PD7047	Force	2017	137656
283	RJ14PB6182	Tata 407	2010	377558
284	RJ14PB8141	Tata Winger	2011	390072
285	RJ14PB7451	Tata 407	2011	382455
286	RJ14PB8146	Tata Winger	2011	336404
287	RJ14PB7462	Tata 407	2011	355104
288	RJ14PB7443	Tata 407	2011	453873
289	RJ14PB8147	Tata Winger	2011	336299
290	RJ14PB8148	Tata Winger	2011	288474
291	RJ14PC7281	Tata 410	2013	233127
292	RJ14PC7710	Tata 410	2014	342552
293	RJ14PD0014	Tata 410	2014	275470
294	RJ14PC7424	Tata 410	2014	380113
295	RJ14PD0613	Tata 410	2015	181950
296	RJ14PD7098	Force	2017	187444
297	RJ14PD7027	Force	2017	80123
298	RJ14PD7026	Force	2017	46882
299	RJ14PD7051	Force	2017	138723
300	RJ14PD7049	Force	2017	191853
301	RJ14PB7452	Tata 407	2011	382373
302	RJ14PB7454	Tata 407	2011	360175
303	RJ14PB8358	Tata Winger	2011	365672
304	RJ14PB6851	Tata 407	2011	397565

[Handwritten signatures and initials]

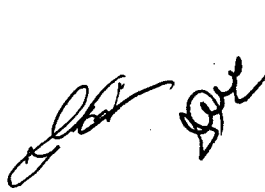
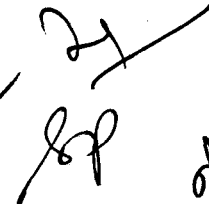
305	RJ14PB7124	Tata 407	2011	357606
306	RJ14PB8359	Tata Winger	2011	443258
307	RJ14PC7273	Tata 410	2013	214098
308	RJ14PC7691	Tata 410	2014	309524
309	RJ14PD0016	Tata 410	2014	233967
310	RJ14PC7680	Tata 410	2014	425048
311	RJ14PD0594	Tata 410	2015	282779
312	RJ14PD0383	Tata 410	2015	280355
313	RJ14PD7076	Force	2017	111547
314	RJ14PD7036	Force	2017	135446
315	RJ14PD7056	Force	2017	205180
316	RJ14PD7028	Force	2017	148298
317	RJ14PD7099	Force	2017	142358
318	RJ14PD7059	Force	2017	123434
319	RJ14PA9853	Tata 407	2008	351861
320	RJ14PA9849	Tata 407	2008	366996
321	RJ14PB5129	Tata 407	2010	397330
322	RJ14PB6180	Tata 407	2010	396095
323	RJ14PB7241	Tata Winger	2011	269296
324	RJ14PB7461	Tata 407	2011	474708
325	RJ14PB7191	Tata Winger	2011	367074
326	RJ14PB7113	Tata 407	2011	385027
327	RJ14PC7693	Tata 410	2014	296582
328	RJ14PC7426	Tata 410	2014	209288
329	RJ14PC7679	Tata 410	2014	208949
330	RJ14PC7685	Tata 410	2014	138655
331	RJ14PC7689	Tata 410	2014	191779
332	RJ14PC7695	Tata 410	2014	190813
333	RJ14PC7706	Tata 410	2014	224158
334	RJ14PC7692	Tata 410	2014	228055
335	RJ14PD0017	Tata 410	2014	243066
336	RJ14PC7684	Tata 410	2014	226013
337	RJ14PC7433	Tata 410	2014	238125
338	RJ14PD0595	Tata 410	2015	161415
339	RJ14PD0596	Tata 410	2015	229757
340	RJ14PD7042	Force	2017	40952
341	RJ14PD7039	Force	2017	35730
342	RJ14PD7101	Force	2017	186215
343	RJ14PA9708	Tata 407	2008	359191
344	RJ14PA9972	Tata 407	2008	404191
345	RJ14PA9852	Tata 407	2008	309742
346	RJ14PB7162	Tata Winger	2011	282360
347	RJ14PB7110	Tata 407	2011	363485
348	RJ14PB7119	Tata 407	2011	495323

349	RJ14PB7159	Tata Winger	2011	350685
350	RJ14PC7265	Tata 410	2013	331513
351	RJ14PC7682	Tata 410	2014	227555
352	RJ14PC7427	Tata 410	2014	228917
353	RJ14PC7705	Tata 410	2014	198653
354	RJ14PD0018	Tata 410	2014	218584
355	RJ14PC7686	Tata 410	2014	211194
356	RJ14PC7696	Tata 410	2014	169718
357	RJ14PC7697	Tata 410	2014	225152
358	RJ14PC7559	Tata 410	2014	217166
359	RJ14PD0598	Tata 410	2015	160063
360	RJ14PD0599	Tata 410	2015	151731
361	RJ14PD0384	Tata 410	2015	181800
362	RJ14PD0597	Tata 410	2015	134988
363	RJ14PD7018	Force	2017	104753
364	RJ14PD7020	Force	2017	102591
365	RJ14PD7019	Force	2017	72420
366	RJ14PB0141	Tata 407	2008	361255
367	RJ14PB0140	Tata 407	2008	356525
368	RJ14PB7287	Tata Winger	2011	331986
369	RJ14PB7425	Tata Winger	2011	313513
370	RJ14PB7465	TATA 407	2011	310381
371	RJ14PB8125	Tata Winger	2011	323536
372	RJ14PC5075	Force	2013	256121
373	RJ14PC7290	Tata 410	2013	182073
374	RJ14PC5252	Force	2013	296443
375	RJ14PC5450	Force	2013	430107
376	RJ14PC7289	Tata 410	2013	178845
377	RJ14PD0019	Tata 410	2014	204287
378	RJ14PD0393	Tata 410	2015	224660
379	RJ14PB6191	Tata 407	2010	163551
380	RJ14PB6177	Tata 407	2010	215355
381	RJ14PB8344	Tata Winger	2011	217400
382	RJ14PB7444	Tata 407	2011	238726
383	RJ14PB7115	Tata 407	2011	278420
384	RJ14PB8360	Tata Winger	2011	238030
385	RJ14PB8353	Tata Winger	2011	228390
386	RJ14PC5076	Force	2013	120951
387	RJ14PC5077	Force	2013	148692
388	RJ14PC7430	Tata 410	2014	143469
389	RJ14PC7548	Tata 410	2014	103976
390	RJ14PC7560	Tata 410	2014	153304
391	RJ14PD0020	Tata 410	2014	111263
392	RJ14PD0601	Tata 410	2015	122919

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393	RJ14PD0386	Tata 410	2015	132800
394	RJ14PD0387	Tata 410	2015	145532
395	RJ14PD7066	Force	2017	80156
396	RJ14PD7072	Force	2017	42270
397	RJ14PD7064	Force	2017	67757
398	RJ14PD7052	Force	2017	40292
399	RJ14PA9712	Tata 407	2008	344387
400	RJ14PB7240	Tata Winger	2011	270526
401	RJ14PB7246	Tata Winger	2011	484440
402	RJ14PB7294	Tata Winger	2011	324135
403	RJ14PB7116	Tata 407	2011	415974
404	RJ14PC5239	Force	2013	253841
405	RJ14PC7276	Tata 410	2013	261686
406	RJ14PC5451	Force	2013	357513
407	RJ14PC7522	Tata 410	2014	278799
408	RJ14PC7524	Tata 410	2014	300196
409	RJ14PC7525	Tata 410	2014	419753
410	RJ14PC7523	Tata 410	2014	255838
411	RJ14PC7529	Tata 410	2014	211560
412	RJ14PD0022	Tata 410	2014	394117
413	RJ14PC7521	Tata 410	2014	365038
414	RJ14PC7528	Tata 410	2014	378887
415	RJ14PD0606	Tata 410	2015	208204
416	RJ14PD7071	Force	2017	119492
417	RJ14PD7078	Force	2017	127934
418	RJ14PD7070	Force	2017	170086
419	RJ14PB0098	Tata 407	2008	307431
420	RJ14PB8142	Tata Winger	2011	267034
421	RJ14PB8131	Tata Winger	2011	294899
422	RJ14PB7098	Tata 407	2011	168898
423	RJ14PB8364	Tata Winger	2011	305273
424	RJ14PB8342	Tata Winger	2011	298287
425	RJ14PC5455	Force	2013	341310
426	RJ14PC5452	Force	2013	306211
427	RJ14PC5265	Force	2013	343074
428	RJ14PC5453	Force	2013	324504
429	RJ14PC7702	Tata 410	2014	266527
430	RJ14PD0023	Tata 410	2014	133124
431	RJ14PC7703	Tata 410	2014	183772
432	RJ14PD0388	Tata 410	2015	244723
433	RJ14PD0389	Tata 410	2015	135798
434	RJ14PD7085	Force	2017	75841
435	RJ14PD7080	Force	2017	85540
436	RJ14PD7046	Force	2017	171746

437	RJ14PD7043	Force	2017	119759
438	RJ14PD7093	Force	2017	50723
439	RJ14PD7081	Force	2017	74580
440	RJ14PD7084	Force	2017	86547
441	RJ14PA9818	Tata 407	2008	559711
442	RJ14PA9881	Tata 407	2008	521236
443	RJ14PA9850	Tata 407	2008	451634
444	RJ14PA9846	Tata 407	2008	344912
445	RJ14PB0139	Tata 407	2008	523024
446	RJ14PA9845	Tata 407	2008	234358
447	RJ14PA9858	Tata 407	2008	355604
448	RJ14PB1040	Tata 407	2009	487392
449	RJ14PB5123	Tata 407	2010	535007
450	RJ14PB7458	Tata 407	2011	380351
451	RJ14PB7023	Tata Winger	2011	252101
452	RJ14PB7122	Tata 407	2011	347905
453	RJ14PB7459	Tata 407	2011	350593
454	RJ14PB7293	Tata Winger	2011	341046
455	RJ14PB8114	Tata Winger	2011	221707
456	RJ14PB8132	Tata Winger	2011	201468
457	RJ14PB8362	Tata Winger	2011	246642
458	RJ14PB8354	Tata Winger	2011	332556
459	RJ14PC5240	Force	2013	318986
460	RJ14PC5079	Force	2013	463123
461	RJ14PC5078	Force	2013	220440
462	RJ14PC5241	Force	2013	247822
463	RJ14PC7267	Tata 410	2013	265123
464	RJ14PC5242	Force	2013	250586
465	RJ14PC5456	Force	2013	318665
466	RJ14PC7284	Tata 410	2013	333078
467	RJ14PC7537	Tata 410	2014	273933
468	RJ14PC7687	Tata 410	2014	330523
469	RJ14PC7561	Tata 410	2014	200557
470	RJ14PD0024	Tata 410	2014	187047
471	RJ14PC7712	Tata 410	2014	114343
472	RJ14PC7698	Tata 410	2014	302646
473	RJ14PC7699	Tata 410	2014	253080
474	RJ14PD0390	Tata 410	2015	283831
475	RJ14PD0602	Tata 410	2015	385178
476	RJ14PD0392	Tata 410	2015	174195
477	RJ14PD0391	Tata 410	2015	185684
478	RJ14PD7102	Force	2017	118143
479	RJ14PB1019	Tata 407	2009	317032
480	RJ14PB1043	Tata 407	2009	395286



481	RJ14PB8341	Tata Winger	2011	195769
482	RJ14PB6853	Tata 407	2011	325459
483	RJ14PC5080	Force	2013	335076
484	RJ14PC5081	Force	2013	451388
485	RJ14PC5457	Force	2013	163140
486	RJ14PD0026	Tata 410	2014	234911
487	RJ14PD0394	Tata 410	2015	275472
488	RJ14PD0395	Tata 410	2015	142094
489	RJ14PD0603	Tata 410	2015	271732
490	RJ14PD0604	Tata 410	2015	268892
491	RJ14PD7087	Force	2017	138706
492	RJ14PD7086	Force	2017	136849
493	RJ14PA9879	Tata 407	2008	263889
494	RJ14PA9836	Tata 407	2008	228627
495	RJ14PA9816	Tata 407	2008	235106
496	RJ20PA2398	Tata 407	2008	247425
497	RJ14PA9791	Tata 407	2008	366977
498	RJ14PA9844	Tata 407	2008	227017
499	RJ14PB6198	Tata 407	2010	384433
500	RJ14PB7100	Tata 407	2011	439007
501	RJ14PB6845	Tata 407	2011	401751
502	RJ14PC5458	Force	2013	224430
503	RJ14PC5477	Force	2013	306735
504	RJ14PC5082	Force	2013	403529
505	RJ14PD0027	Tata 410	2014	253595
506	RJ14PC7549	Tata 410	2014	184749
507	RJ14PC7438	Tata 410	2014	282622
508	RJ14PD0605	Tata 410	2015	201173
509	RJ14PD7088	Force	2017	70714
510	RJ14PB0901	Tata 407	2009	198392
511	RJ14PB5127	Tata 407	2010	248306
512	RJ14PB5120	Tata 407	2010	369123
513	RJ14PB5119	Tata 407	2010	366513
514	RJ14PB6659	Tata 407	2011	400762
515	RJ14PB8143	Tata Winger	2011	333982
516	RJ14PB8103	Tata Winger	2011	232042
517	RJ14PB6637	Tata 407	2011	467304
518	RJ14PB8101	Tata Winger	2011	235446
519	RJ14PB7118	Tata 407	2011	407345
520	RJ14PB8349	Tata Winger	2011	377436
521	RJ14PC7269	Tata 410	2013	100369
522	RJ14PC5460	Force	2013	333333
523	RJ14PC7270	Tata 410	2013	198684
524	RJ14PC5461	Force	2013	188389

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525	RJ14PC7288	Tata 410	2013	194108
526	RJ14PC5463	Force	2013	283147
527	RJ14PC5464	Force	2013	217232
528	RJ14PC5462	Force	2013	397858
529	RJ14PC5465	Force	2013	229516
530	RJ14PC7282	Tata 410	2013	222848
531	RJ14PC7531	Tata 410	2014	228392
532	RJ14PC7435	Tata 410	2014	344382
533	RJ14PC7535	Tata 410	2014	219593
534	RJ14PD0028	Tata 410	2014	153090
535	RJ14PC7431	Tata 410	2014	155613
536	RJ14PC7533	Tata 410	2014	230250
537	RJ14PD0377	Tata 410	2015	157287
538	RJ14PD7053	Force	2017	84459
539	RJ14PD7111	Force	2017	88158
540	RJ14PD7112	Force	2017	87985
541	RJ14PB1038	Tata 410	2009	245601
542	RJ14PB6187	Tata 407	2010	333027
543	RJ14PB5140	Tata 410	2010	286950
544	RJ14PB6830	Tata 407	2011	374085
545	RJ14PB7403	Tata Winger	2011	223041
546	RJ14PB6826	Tata 407	2011	242864
547	RJ14PB6829	Tata 407	2011	486313
548	RJ14PB7280	Tata Winger	2011	243373
549	RJ14PC5466	Force	2013	130610
550	RJ14PC7283	Tata 410	2013	270890
551	RJ14PC5468	Force	2013	247410
552	RJ14PC5467	Force	2013	253947
553	RJ14PC7287	Tata 410	2013	296644
554	RJ14PC7291	Tata 410	2013	211227
555	RJ14PC7556	Tata 410	2014	173514
556	RJ14PD0029	Tata 410	2014	166230
557	RJ14PC7534	Tata 410	2014	197084
558	RJ14PC7701	Tata 410	2014	255682
559	RJ14PD0037	Tata 410	2014	345134
560	RJ14PC7543	Tata 410	2014	171447
561	RJ14PD0607	Tata 410	2015	185247
562	RJ14PD0608	Tata 410	2015	168265
563	RJ14PD0396	Tata 410	2015	229353
564	RJ14PD7075	Force	2017	68758
565	RJ14PD7054	Force	2017	193212
566	RJ14PD7055	Force	2017	82899
567	RJ14PB7408	Tata Winger	2011	184124
568	RJ14PB6638	Tata 407	2011	266414

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569	RJ14PB7422	Tata Winger	2011	176867
570	RJ14PC5084	Force	2013	266912
571	RJ14PC5244	Force	2013	253067
572	RJ14PC5243	Force	2013	154124
573	RJ14PC5469	Force	2013	325784
574	RJ14PC5083	Force	2013	140329
575	RJ14PD0030	Tata 410	2014	190715
576	RJ14PD0398	Tata 410	2015	183895
577	RJ14PD0609	Tata 410	2015	218901
578	RJ14PD0399	Tata 410	2015	111680
579	RJ14PD7073	Force	2017	81851
580	RJ14PB1056	Tata 407	2009	386071
581	RJ14PB6651	Tata 407	2011	486424
582	RJ14PB7160	Tata Winger	2011	266150
583	RJ14PB7283	Tata Winger	2011	433910
584	RJ14PC5471	Force	2013	238508
585	RJ14PC5470	Force	2013	324882
586	RJ14PC7550	Tata 410	2014	249086
587	RJ14PD0031	Tata 410	2014	270730
588	RJ14PC7423	Tata 410	2014	326559
589	RJ14PD0400	Tata 410	2015	262234
590	RJ14PD7089	Force	2017	137265
591	RJ14PD7063	Force	2017	107900
592	RJ14PD7141	Force	2017	179574
593	RJ14PB1018	Tata 407	2009	263563
594	RJ14PB7292	Tata Winger	2011	221082
595	RJ14PB7102	Tata 407	2011	176268
596	RJ14PB7242	Tata Winger	2011	179415
597	RJ14PC5245	Force	2013	234350
598	RJ14PC5086	Force	2013	289552
599	RJ14PC5085	Force	2013	312058
600	RJ14PC5246	Force	2013	256253
601	RJ14PC5472	Force	2013	238170
602	RJ14PC7263	Tata 410	2013	145216
603	RJ14PC5473	Force	2013	305744
604	RJ14PD0032	Tata 410	2014	206476
605	RJ14PC7428	Tata 410	2014	283795
606	RJ14PC7558	Tata 410	2014	192171
607	RJ14PD0612	Tata 410	2015	164961
608	RJ14PD7096	Force	2017	130148
609	RJ14PB1025	Tata 407	2009	414742
610	RJ14PB0896	Tata 407	2009	616495
611	RJ14PB6193	Tata 407	2010	472979
612	RJ14PB5135	Tata 407	2010	365762

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613	RJ14PB7299	Tata Winger	2011	406310
614	RJ14PB8334	Tata Winger	2011	354535
615	RJ14PB7099	Tata 407	2011	408039
616	RJ14PB6840	Tata 407	2011	288185
617	RJ14PB8336	Tata Winger	2011	364862
618	RJ14PB8093	Tata Winger	2011	355774
619	RJ14PB8102	Tata Winger	2011	498384
620	RJ14PB8097	Tata Winger	2011	522305
621	RJ14PC5476	Force	2013	265275
622	RJ14PC5087	Force	2013	326851
623	RJ14PC5088	Force	2013	540715
624	RJ14PC5474	Force	2013	455750
625	RJ14PC7432	Tata 410	2014	248520
626	RJ14PC9999	Tata 410	2014	304473
627	RJ14PC7434	Tata 410	2014	321794
628	RJ14PC7532	Tata 410	2014	394795
629	RJ14PC7439	Tata 410	2014	446360
630	RJ14PD0610	Tata 410	2015	292297
631	RJ14PD7048	Force	2017	94499
632	RJ14PD7062	Force	2017	141250
633	RJ14PD7154	Force	2017	119923
634	RJ14PD7050	Force	2017	207398
635	RJ14PB0165	Tata 407	2008	194877
636	RJ14PB7309	Tata Winger	2011	185011
637	RJ14PB8127	Tata Winger	2011	204751
638	RJ14PB7421	Tata Winger	2011	250496
639	RJ14PB7310	Tata 407	2011	182982
640	RJ14PB7466	Tata 407	2011	258274
641	RJ14PC5089	Force	2013	226694
642	RJ14PC5478	Force	2013	147849
643	RJ14PC5459	Force	2013	134494
644	RJ14PC5479	Force	2013	234480
645	RJ14PC7704	Tata 410	2014	195585
646	RJ14PD0034	Tata 410	2014	97934
647	RJ14PC7552	Tata 410	2014	162786
648	RJ14PD0401	Tata 410	2015	136936
649	RJ14PD0611	Tata 410	2015	150710
650	RJ14PD7083	Force	2017	78244
651	RJ14PB6179	Tata 407	2010	552836
652	RJ14PB8119	Tata Winger	2011	208287
653	RJ14PB8330	Tata Winger	2011	235656
654	RJ14PB7120	Tata 407	2011	258704
655	RJ14PC5247	Force	2013	150391
656	RJ14PC5481	Force	2013	297730

657	RJ14PC5482	Force	2013	371957
658	RJ14PC5090	Force	2013	492955
659	RJ14PC5483	Force	2013	416017
660	RJ14PC7268	Tata 410	2013	529481
661	RJ14PC7295	Tata 410	2013	259160
662	RJ14PC5091	Force	2013	335755
663	RJ14PC5480	Force	2013	302882
664	RJ14PC7688	Tata 410	2014	287876
665	RJ14PD0035	Tata 410	2014	177348
666	RJ14PD0615	Tata 410	2015	116926
667	RJ14PD0614	Tata 410	2015	186260
668	RJ14PD7143	Force	2017	100145
669	RJ14PD7153	Force	2017	101416
670	RJ14PA9876	Tata 407	2008	269369
671	RJ14PB1063	Tata 407	2009	408084
672	RJ14PB1039	Tata 407	2009	501903
673	RJ14PB6190	Tata 407	2010	324799
674	RJ14PB6174	Tata 407	2010	481787
675	RJ14PB8126	Tata Winger	2011	222590
676	RJ14PB8352	Tata Winger	2011	516254
677	RJ14PB7414	Tata Winger	2011	391364
678	RJ14PB7401	Tata Winger	2011	197518
679	RJ14PB7112	Tata 407	2011	198609
680	RJ14PB7420	Tata Winger	2011	358683
681	RJ14PB8140	Tata Winger	2011	266116
682	RJ14PB7238	Tata Winger	2011	281797
683	RJ14PB7415	Tata Winger	2011	435081
684	RJ14PB7411	Tata Winger	2011	226061
685	RJ14PB7396	Tata Winger	2011	419045
686	RJ14PB7402	Tata Winger	2011	286222
687	RJ14PB7296	Tata Winger	2011	231499
688	RJ14PC5502	Force	2013	184888
689	RJ14PC5484	Force	2013	215150
690	RJ14PC7280	Tata 410	2013	251867
691	RJ14PC7545	Tata 410	2014	221190
692	RJ14PC7683	Tata 410	2014	324980
693	RJ14PC7700	Tata 410	2014	283083
694	RJ14PD0025	Tata 410	2014	230950
695	RJ14PD0418	Tata 410	2015	228213
696	RJ14PD7094	Force	2017	136731
697	RJ14PD7144	Force	2017	155109
698	RJ14PD7142	Force	2017	122852
699	RJ14PD7145	Force	2017	80054
700	RJ14PD7146	Force	2017	125605

701	RJ14PD7100	Force	2017	70986
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Details of 104 Ambulance kilometers of vehicles

S. No.	Ambulance No.	Make	Year Modal	Progressive K.M. Of Ambulance
1	RJ01PA2242	Maruti Omni	2012	272671
2	RJ01PA2230	Maruti Omni	2012	170726
3	RJ01PA2236	Maruti Omni	2012	169706
4	RJ01PA2235	Maruti Omni	2012	200745
5	RJ01PA2237	Maruti Omni	2012	164243
6	RJ01PA2229	Maruti Omni	2012	265602
7	RJ01PA2241	Maruti Omni	2012	182438
8	RJ01PA2228	Maruti Omni	2012	161954
9	RJ01PA2234	Maruti Omni	2012	165063
10	RJ01PA2239	Maruti Omni	2012	104068
11	RJ01PA2232	Maruti Omni	2012	146275
12	RJ01PA2233	Maruti Omni	2012	104068
13	RJ01PA2238	Maruti Omni	2012	132069
14	RJ01PA2240	Maruti Omni	2012	165960
15	RJ01PA2231	Maruti Omni	2012	206009
16	RJ48PA0012	Maruti Eeco	2014	324087
17	RJ36PA2036	Maruti Eeco	2014	193028
18	RJ36PA2053	Maruti Eeco	2014	270865
19	RJ01PA3091	Maruti Eeco	2014	244284
20	RJ01PA3094	Maruti Eeco	2014	238112
21	RJ01PA3244	Maruti Eeco	2014	187079
22	RJ02PA2619	Maruti Omni	2012	259666
23	RJ02PA2628	Maruti Omni	2012	153055
24	RJ02PA2630	Maruti Omni	2012	171695
25	RJ02PA2621	Maruti Omni	2012	115778
26	RJ02PA2626	Maruti Omni	2012	175181
27	RJ02PA2625	Maruti Omni	2012	178660
28	RJ02PA2627	Maruti Omni	2012	170699
29	RJ02PA2634	Maruti Omni	2012	145922
30	RJ02PA2635	Maruti Omni	2012	153544
31	RJ02PA2631	Maruti Omni	2012	191362
32	RJ02PA2636	Maruti Omni	2012	178908
33	RJ02PA2622	Maruti Omni	2012	101576
34	RJ02PA2632	Maruti Omni	2012	162283
35	RJ02PA2624	Maruti Omni	2012	203613
36	RJ02PA2629	Maruti Omni	2012	126874
37	RJ02PA2620	Maruti Omni	2012	213429
38	RJ02PA2633	Maruti Omni	2012	249325

39	RJ02PA2623	Maruti Omni	2012	152497
40	RJ02PA3085	Maruti Eeco	2013	196324
41	RJ02PA3086	Maruti Eeco	2013	218104
42	RJ02PA3083	Maruti Eeco	2013	240658
43	RJ02PA3084	Maruti Eeco	2013	186899
44	RJ02PA3082	Maruti Eeco	2013	264523
45	RJ02PA3087	Maruti Eeco	2013	232442
46	RJ02PA3079	Maruti Eeco	2013	210803
47	RJ02PA3081	Maruti Eeco	2013	181432
48	RJ03PA2437	Tata Sumo	2012	154278
49	RJ03PA2438	Maruti Omni	2012	210647
50	RJ03PA2439	Maruti Omni	2012	284916
51	RJ03PA2442	Maruti Omni	2012	171423
52	RJ03PA2443	Maruti Omni	2012	254697
53	RJ03PA2444	Maruti Omni	2012	310428
54	RJ03PA2445	Maruti Omni	2012	181498
55	RJ03PA2446	Maruti Omni	2012	242054
56	RJ03PA2447	Maruti Omni	2012	155253
57	RJ03PA2448	Maruti Omni	2012	112228
58	RJ03PA2440	Maruti Omni	2012	141223
59	RJ03PA2441	Maruti Omni	2012	179076
60	RJ03PA2449	Maruti Omni	2012	221018
61	RJ03PA3147	Tata Sumo	2014	258651
62	RJ03PA3146	Tata Sumo	2014	91338
63	RJ03PA3148	Tata Sumo	2014	269197
64	RJ03PA3149	Tata Sumo	2014	247440
65	RJ03PA3150	Tata Sumo	2014	200316
66	RJ03PA3151	Tata Sumo	2014	174994
67	RJ03PA3152	Tata Sumo	2014	165076
68	RJ28PA0788	Maruti Omni	2012	128143
69	RJ28PA0782	Maruti Omni	2012	116187
70	RJ28PA0785	Maruti Omni	2012	203087
71	RJ28PA0787	Maruti Omni	2012	145940
72	RJ28PA0783	Maruti Omni	2012	155875
73	RJ28PA0790	Maruti Omni	2012	170941
74	RJ28PA0784	Maruti Omni	2012	181980
75	RJ28PA0781	Maruti Omni	2012	237131
76	RJ28PA0780	Maruti Omni	2012	349230
77	RJ28PA0789	Maruti Omni	2012	310248
78	RJ28PA1030	Maruti Omni	2014	234152
79	RJ28PA1035	Tata Sumo	2014	220910
80	RJ28PA1033	Tata Sumo	2014	211611
81	RJ28PA1034	Maruti Omni	2014	369059
82	RJ28PA1031	Tata Sumo	2014	230988

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83	RJ28PA1032	Tata Sumo	2014	208141
84	RJ28PA1029	Tata Sumo	2014	261487
85	RJ28PA1028	Maruti Omni	2014	356820
86	RJ04UA0641	Tata Sumo	2007	470531
87	RJ04PA2715	Maruti Omni	2012	215753
88	RJ04PA2723	Maruti Omni	2012	285865
89	RJ04PA2710	Maruti Omni	2012	308896
90	RJ04PA2719	Maruti Omni	2012	264188
91	RJ04PA2720	Maruti Omni	2012	208005
92	RJ04PA2711	Maruti Omni	2012	294677
93	RJ04PA2712	Maruti Omni	2012	257262
94	RJ04PA2716	Maruti Omni	2012	251007
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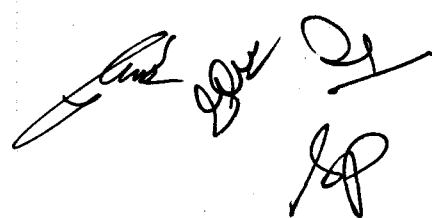
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475	RJ30EA1242	Maruti Omni	2012	160645
476	RJ30EA1243	Maruti Omni	2012	155579
477	RJ30EA1251	Maruti Omni	2012	138863
478	RJ30EA1248	Maruti Omni	2012	153620

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479	RJ30EA1249	Maruti Omni	2012	136336
480	RJ30EA1245	Maruti Omni	2012	147499
481	RJ30EA1246	Maruti Omni	2012	157820
482	RJ30EA1247	Maruti Omni	2012	257056
483	RJ30EA1581	Tata Sumo	2014	225290
484	RJ30EA1576	Tata Sumo	2014	250505
485	RJ30EA1577	Tata Sumo	2014	302497
486	RJ30EA1579	Tata Sumo	2014	238648
487	RJ30EA1580	Tata Sumo	2014	256835
488	RJ25PA1100	Maruti Omni	2012	130578
489	RJ25PA1102	Maruti Omni	2012	147431
490	RJ25PA1103	Maruti Omni	2012	155431
491	RJ25PA1104	Maruti Omni	2012	112460
492	RJ25PA1105	Maruti Omni	2012	133890
493	RJ25PA1098	Maruti Omni	2012	171807
494	RJ25PA1099	Maruti Omni	2012	141282
495	RJ25PA1096	Maruti Omni	2012	148228
496	RJ25PA1097	Maruti Omni	2012	133508
497	RJ25PA1448	Maruti Eeco	2013	175149
498	RJ25PA1447	Maruti Eeco	2013	191260
499	RJ25PA1449	Maruti Eeco	2013	144813
500	RJ25PA1446	Maruti Eeco	2013	174996
501	RJ25PA1444	Maruti Eeco	2013	139702
502	RJ23PA5690	Maruti Omni	2012	206939
503	RJ23PA5692	Maruti Omni	2012	174252
504	RJ23PA5687	Maruti Omni	2012	216371
505	RJ23PA5682	Maruti Omni	2012	122640
506	RJ23PA5685	Maruti Omni	2012	167541
507	RJ23PA5693	Maruti Omni	2012	179572
508	RJ23PA5691	Maruti Omni	2012	152392
509	RJ23PA5686	Maruti Omni	2012	231136
510	RJ23PA5689	Maruti Omni	2012	205119
511	RJ23PA5684	Maruti Omni	2012	146692
512	RJ23PA5683	Maruti Omni	2012	179902
513	RJ23PA6774	Maruti Eeco	2013	301312
514	RJ23PA6772	Maruti Eeco	2013	294165
515	RJ24PA3121	Maruti Omni	2013	148528
516	RJ24PA3115	Maruti Omni	2013	165347
517	RJ24PA3116	Maruti Omni	2013	159486
518	RJ24PA3119	Maruti Omni	2013	122109
519	RJ24PA3117	Maruti Omni	2013	165190
520	RJ24PA3120	Maruti Omni	2013	245912
521	RJ24PA3118	Maruti Omni	2013	221599
522	RJ24PA3122	Maruti Omni	2013	160222

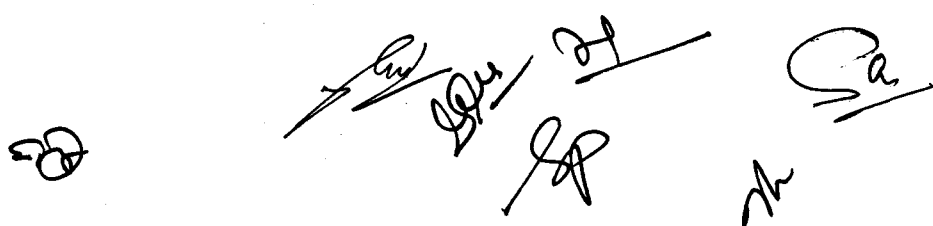
523	RJ24PA3294	Tata Sumo	2014	281694
524	RJ24PA3295	Tata Sumo	2014	205818
525	RJ24PA3297	Tata Sumo	2014	170164
526	RJ24PA3296	Tata Sumo	2014	212987
527	RJ24PA3299	Tata Sumo	2014	179941
528	RJ24PA3298	Tata Sumo	2014	210144
529	RJ26PA0696	Maruti Omni	2012	176121
530	RJ26PA0697	Maruti Omni	2012	100895
531	RJ26PA0694	Maruti Omni	2012	223728
532	RJ26PA0690	Maruti Omni	2012	153081
533	RJ26PA0691	Maruti Omni	2012	174313
534	RJ26PA0692	Maruti Omni	2012	148309
535	RJ26PA0693	Maruti Omni	2012	115756
536	RJ26PA0688	Maruti Omni	2012	129312
537	RJ26PA0689	Maruti Omni	2012	129731
538	RJ26PA0698	Maruti Omni	2012	138171
539	RJ26PA0699	Maruti Omni	2012	155129
540	RJ26PA0898	Maruti Eeco	2014	169485
541	RJ26PA0903	Maruti Eeco	2014	262148
542	RJ26PA0904	Maruti Eeco	2014	216652
543	RJ26PA0899	Maruti Eeco	2014	188284
544	RJ26PA0900	Maruti Eeco	2014	164375
545	RJ26PA0902	Maruti Eeco	2014	228425
546	RJ26PA0901	Maruti Eeco	2014	158361
547	RJ27PA4512	Maruti Omni	2012	202106
548	RJ27PA4487	Maruti Omni	2012	204308
549	RJ27PA4497	Maruti Omni	2012	224688
550	RJ27PA4482	Maruti Omni	2012	305766
551	RJ27PA4508	Maruti Omni	2012	162756
552	RJ27PA4493	Maruti Omni	2012	203445
553	RJ27PA4510	Maruti Omni	2012	259510
554	RJ27PA4502	Maruti Omni	2012	217927
555	RJ27PA4504	Maruti Omni	2012	241356
556	RJ27PA4506	Maruti Omni	2012	190408
557	RJ27PA4485	Maruti Omni	2012	164248
558	RJ27PA4501	Maruti Omni	2012	121652
559	RJ27PA4503	Maruti Omni	2012	131310
560	RJ27PA4505	Maruti Omni	2012	116896
561	RJ27PA4490	Maruti Omni	2012	300800
562	RJ27PA4494	Maruti Omni	2012	142644
563	RJ27PA4509	Maruti Omni	2012	183415
564	RJ27PA4507	Maruti Omni	2012	149053
565	RJ27PA4495	Maruti Omni	2012	137167
566	RJ27PA4484	Maruti Omni	2012	164466

[Handwritten signatures and initials]

567	RJ27PA4492	Maruti Omni	2012	295355
568	RJ27PA4486	Maruti Omni	2012	248423
569	RJ27PA4496	Maruti Omni	2012	182633
570	RJ27PA4498	Maruti Omni	2012	292398
571	RJ27PA6063	Tata Sumo	2014	181551
572	RJ27PA6044	Tata Sumo	2014	229868
573	RJ27PA6057	Tata Sumo	2014	320441
574	RJ27PA6064	Tata Sumo	2014	261172
575	RJ27PA6028	Tata Sumo	2014	276237
576	RJ27PA6046	Tata Sumo	2014	263807
577	RJ27PA6042	Tata Sumo	2014	204163
578	RJ27PA6043	Tata Sumo	2014	153478
579	RJ27PA6045	Tata Sumo	2014	222810
580	RJ27PA6037	Tata Sumo	2014	263390
581	RJ27PA6027	Tata Sumo	2014	181855

Details of other Ambulance to be introduced in fleet of 104 JE

S. No.	Ambulance No.	Make	Year Modal	Progressive K.M. Of Ambulance
1	RJ14PC5883	Tata Winger	2013	64452
2	RJ14PC5896	Tata Winger	2013	152340
3	RJ14PC5897	Tata Winger	2013	102745
4	RJ36PA1977	Tata Winger	2013	203190
5	RJ42PA0066	Tata Winger	2013	153997
6	RJ01PA2962	Tata Winger	2013	77490
7	RJ01PA3066	Tata Winger	2014	61450
8	RJ14PC5887	Tata Winger	2013	78268
9	RJ14PC5886	Tata Winger	2013	172102
10	RJ14PC5895	Tata Winger	2013	92773
11	RJ14PC5893	Tata Winger	2013	39860
12	RJ14PC5957	Tata Winger	2013	349502
13	RJ14PC5974	Tata Winger	2013	184096
14	RJ14PC5966	Tata Winger	2013	128044
15	RJ14PC5972	Tata Winger	2013	104094
16	RJ14PC5967	Tata Winger	2013	95374
17	RJ14PC5970	Tata Winger	2013	80758
18	RJ14PC5971	Tata Winger	2013	27350
19	RJ14PC5994	Tata Winger	2013	106449
20	RJ14PC6000	Tata Winger	2013	98379
21	RJ14PC6001	Tata Winger	2013	140919
22	RJ14PC6007	Tata Winger	2013	217156
23	RJ14PC6008	Tata Winger	2013	118995
24	RJ14PC5881	Tata Winger	2013	59814
25	RJ14PC5888	Tata Winger	2013	99214



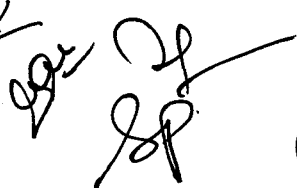
26	RJ14PC5882	Tata Winger	2013	126235
27	RJ14PC5894	Tata Winger	2013	64881
28	RJ03PA2971	Tata Winger	2013	66277
29	RJ03PA2969	Tata Winger	2013	101374
30	RJ03PA2967	Tata Winger	2013	110389
31	RJ03PA2968	Tata Winger	2013	40310
32	RJ03PA2966	Tata Winger	2013	222694
33	RJ03PA2972	Tata Winger	2013	80418
34	RJ03PA2970	Tata Winger	2013	117567
35	RJ03PA2998	Tata Winger	2013	196885
36	RJ14PC5912	Tata Winger	2013	101414
37	RJ14PC5911	Tata Winger	2013	155112
38	RJ14PC5946	Tata Winger	2013	91910
39	RJ14PC5945	Tata Winger	2013	118955
40	RJ04PA3369	Tata Winger	2014	89819
41	RJ05PA2481	Tata Winger	2013	201020
42	RJ05PA2476	Tata Winger	2013	64307
43	RJ05PA2477	Tata Winger	2013	111315
44	RJ05PA2483	Tata Winger	2013	70460
45	RJ05PA2484	Tata Winger	2013	66314
46	RJ05PA2478	Tata Winger	2013	111159
47	RJ05PA2485	Tata Winger	2013	103321
48	RJ05PA2482	Tata Winger	2013	250081
49	RJ05PA2479	Tata Winger	2013	90657
50	RJ05PA2480	Tata Winger	2013	67978
51	RJ14PC5878	Tata Winger	2013	58762
52	RJ14PC5885	Tata Winger	2013	112714
53	RJ06PA4189	Tata Winger	2013	104049
54	RJ06PA4207	Tata Winger	2013	41615
55	RJ06PA4216	Tata Winger	2013	132396
56	RJ06PA4262	Tata Winger	2014	32125
57	RJ06PA4260	Tata Winger	2014	68105
58	RJ06PA4263	Tata Winger	2014	131875
59	RJ06PA4264	Tata Winger	2014	47462
60	RJ07PA6633	Tata Winger	2013	125071
61	RJ07PA6796	Tata Winger	2014	99308
62	RJ07PA6937	Tata Winger	2014	77305
63	RJ07PA8399	Tata Winger	2015	174720
64	RJ50PA0185	Tata Winger	2016	207411
65	RJ08PA1309	Tata Winger	2013	193142
66	RJ14PC5876	Tata Winger	2013	75412
67	RJ14PC5879	Tata Winger	2013	97332
68	RJ14PC5877	Tata Winger	2013	225660
69	RJ14PC5892	Tata Winger	2013	140978

70	RJ09PA3169	Tata Winger	2013	242034
71	RJ09PA3222	Tata Winger	2014	73489
72	RJ14PC6006	Tata Winger	2013	147256
73	RJ10PA5072	Tata Winger	2013	186670
74	RJ10PA5089	Tata Winger	2013	216470
75	RJ44PA0061	Tata Winger	2013	260189
76	RJ44PA0063	Tata Winger	2013	165125
77	RJ44PA0064	Tata Winger	2013	159409
78	RJ10PA5151	Tata Winger	2014	179427
79	RJ44PA0071	Tata Winger	2014	229024
80	RJ29PA1720	Tata Winger	2013	131752
81	RJ29PA1722	Tata Winger	2013	114923
82	RJ29PA1726	Tata Winger	2013	96351
83	RJ29PA1727	Tata Winger	2013	164191
84	RJ29PA1734	Tata Winger	2013	290435
85	RJ14PC5880	Tata Winger	2013	70964
86	RJ11PA0814	Tata Winger	2013	62813
87	RJ11PA0821	Tata Winger	2013	69868
88	RJ11PA0823	Tata Winger	2013	95341
89	RJ11PA0836	Tata Winger	2014	77570
90	RJ11PA0839	Tata Winger	2014	112318
91	RJ11PA0859	Tata Winger	2014	59412
92	RJ12PA1960	Tata Winger	2013	80672
93	RJ12PA1962	Tata Winger	2013	153244
94	RJ12PA1966	Tata Winger	2013	31518
95	RJ12PA1964	Tata Winger	2013	39263
96	RJ12PA1967	Tata Winger	2013	45905
97	RJ12PA2033	Tata Winger	2013	117768
98	RJ12PA2193	Tata Winger	2014	72615
99	RJ13PA4909	Tata Winger	2013	227633
100	RJ13PA4908	Tata Winger	2013	109416
101	RJ13PA4930	Tata Winger	2014	269587
102	RJ13PA4929	Tata Winger	2014	222244
103	RJ13PA5231	Tata Winger	2014	67029
104	RJ49PA0053	Tata Winger	2013	130613
105	RJ49PA0055	Tata Winger	2013	193094
106	RJ31PA3439	Tata Winger	2013	205630
107	RJ31PA3440	Tata Winger	2013	110234
108	RJ14PC5913	Tata Winger	2013	148106
109	RJ14PC5965	Tata Winger	2013	100657
110	RJ52PA0014	Tata Winger	2013	251500
111	RJ32PA2250	Tata Winger	2013	139721
112	RJ14PC6397	Tata Winger	2013	183483
113	RJ14PC7299	Tata Winger	2013	99689

The bottom of the page features several handwritten signatures and initials. On the left, there is a circular stamp with a signature inside. To its right, there are three distinct handwritten signatures: one that appears to be 'SP', another that is more stylized, and a third that looks like 'Sa'.

114	RJ15PA1756	Tata Winger	2014	47105
115	RJ16PA2816	Tata Winger	2013	36607
116	RJ16PA2820	Tata Winger	2013	55252
117	RJ46PA0036	Tata Winger	2013	36824
118	RJ46PA0053	Tata Winger	2014	24053
119	RJ46PA0109	Tata Winger	2014	86987
120	RJ17PA1221	Tata Winger	2013	147440
121	RJ17PA1236	Tata Winger	2013	119443
122	RJ17PA1276	Tata Winger	2014	146509
123	RJ17PA1284	Tata Winger	2014	41658
124	RJ17PA1320	Tata Winger	2014	167166
125	RJ18PA6041	Tata Winger	2013	104291
126	RJ18PA6114	Tata Winger	2013	123989
127	RJ18PA6118	Tata Winger	2013	80104
128	RJ18PA6146	Tata Winger	2013	183624
129	RJ18PA6159	Tata Winger	2014	93096
130	RJ19PA8265	Tata Winger	2013	90361
131	RJ43PA0055	Tata Winger	2013	364156
132	RJ19PA8316	Tata Winger	2013	42173
133	RJ19PA8411	Tata Winger	2013	72435
134	RJ19PA8502	Tata Winger	2014	17229
135	RJ19PA8512	Tata Winger	2014	10897
136	RJ34PA1538	Tata Winger	2013	175270
137	RJ34PA1544	Tata Winger	2013	124542
138	RJ34PA1543	Tata Winger	2014	73264
139	RJ20PA7013	Tata Winger	2014	155251
140	RJ20PA7030	Tata Winger	2014	74387
141	RJ20PA7031	Tata Winger	2014	105275
142	RJ14PC5884	Tata Winger	2013	74999
143	RJ21PA1958	Tata Winger	2013	171128
144	RJ37PA1596	Tata Winger	2013	69514
145	RJ37PA1598	Tata Winger	2013	71170
146	RJ37PA1599	Tata Winger	2013	130154
147	RJ37PA1603	Tata Winger	2013	75018
148	RJ21PA1977	Tata Winger	2014	50947
149	RJ21PA1986	Tata Winger	2014	217593
150	RJ37PA1630	Tata Winger	2014	201910
151	RJ22PA2943	Tata Winger	2013	32890
152	RJ22PA2940	Tata Winger	2013	36268
153	RJ22PA2942	Tata Winger	2013	45777
154	RJ22PA2941	Tata Winger	2013	74367
155	RJ22PA2974	Tata Winger	2014	34933
156	RJ35PA0295	Tata Winger	2013	136153
157	RJ35PA0296	Tata Winger	2013	101017







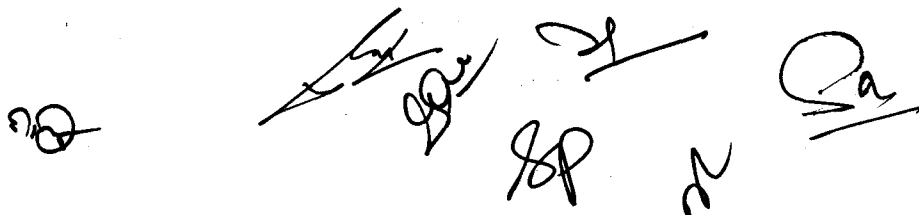
158	RJ30EA1543	Tata Winger	2014	179841
159	RJ30EA1561	Tata Winger	2014	65280
160	RJ30EA1562	Tata Winger	2014	77136
161	RJ30EA1542	Tata Winger	2014	260912
162	RJ14PC6398	Tata Winger	2013	87399
163	RJ14PC6395	Tata Winger	2013	111022
164	RJ14PC6394	Tata Winger	2013	92168
165	RJ23PA6766	Tata Winger	2013	195080
166	RJ23PA6832	Tata Winger	2014	69252
167	RJ38PA0197	Tata Winger	2013	15140
168	RJ24PA3249	Tata Winger	2014	128217
169	RJ38PA0214	Tata Winger	2014	66839
170	RJ38PA0215	Tata Winger	2014	28086
171	RJ24PA3280	Tata Winger	2014	25255
172	RJ26PA0868	Tata Winger	2013	116830
173	RJ26PA0870	Tata Winger	2013	106007
174	RJ26PA0871	Tata Winger	2013	194937
175	RJ26PA0879	Tata Winger	2013	135642
176	RJ26PA0881	Tata Winger	2013	252963
177	RJ27PA5828	Tata Winger	2013	51405
178	RJ27PA5849	Tata Winger	2013	46542
179	RJ27PA5854	Tata Winger	2013	53441
180	RJ27PA5856	Tata Winger	2013	81870
181	RJ27PA5857	Tata Winger	2013	48084
182	RJ27PA5861	Tata Winger	2013	98420
183	RJ27PA5862	Tata Winger	2013	92593
184	RJ27PA5863	Tata Winger	2013	38715
185	RJ27PA5946	Tata Winger	2014	157486
186	RJ27PA5960	Tata Winger	2014	106076
187	RJ27PA5976	Tata Winger	2014	113783
188	RJ27PA6041	Tata Winger	2014	78504
189	RJ27PA6125	Tata Winger	2014	36818

Handwritten signatures and initials are present at the bottom of the page, including a large signature on the left and several smaller initials and signatures on the right.

Annexure – 26 (A)
Inspection Parameter of A-IAP Vehicles :-

108 ambulance services (penalty check list)

1. Condition of outer body of ambulance is good (stickering and displaying correct information about scheme and services). [Yes/ No]
2. Functioning of driver's mobile app –verify it through last trip entry . [Yes/ No]
3. General cleanliness' is good. [Yes/ No]
4. Siren, Mike, Light bar, Lights (Head light, Tail light, Side light) are available and working properly. [Yes/ No]
5. All four tyres and stepney are in good condition. [Yes/ No]
6. Infection control through antiseptic solutions cleaning is maintained. [Yes/ No]
7. Functional vehicle tool kit is available(As per Annexure-15). [Yes/ No]
8. Medical equipment's are functional (as per the annexure-15). [Yes/ No]
9. Functional and filled oxygen cylinder (both D-Type and Portable) [Yes/ No]
10. Air conditioner is functioning properly. [Yes/ No]
11. Condition of inner body of ambulance is good (floor and foot step). [Yes/ No]
12. Ambulance battery, wiring, all switches and plugs are functional. [Yes/ No]
13. EMT has knowledge and training to operate medical equipment. [Yes/ No]
14. Medications / drugs given as per patient conditions verify through PCR & entry in drug register . [Yes/ No]
15. Collection & disposal of bio-medical waste as per norms. [Yes/ No]
16. Vehicle is self start. [Yes/ No]
17. Functional wheel chair and stretchers (all three types) [Yes/ No]
18. Medical/ non medical consumables are stored hygienically. [Yes/ No]
19. Medical/ non medical consumables are available (As per Annexure-15). [Yes/ No]
20. Ambulance staff found in uniform. [Yes/ No]
21. Staff / Beneficiary records are maintained properly.
 - A.Attendance Register of EMT & Pilot (Check Duty roster- rotation-wise & Marking of daily attendance)--- [Yes/ No]
 - B.Certified PCR forms (Random check 2 or 3 forms) --- [Yes/ No]
 - C.Valid Driving license
22. Availability of vehicles valid certificate. [Yes/ No]
 - A Valid Insurance certificate
 - B Valid fitness certificate.
 - C Valid pollution under control(PUC)
 - D Valid Job card & verify entry of maintenance in last months



Annexure – 26 (B)

104 Janani Express (penalty check list)

1. Condition of outer body of ambulance is good (stickering and displaying correct information about scheme and services). [Yes/ No]
2. Functioning of driver's mobile app –verify it through last trip entry . [Yes/ No]
3. General cleanliness' is good. [Yes/ No]
4. Siren, Mike, Light bar, Lights (Head light, Tail light, Side light) are available and working properly. [Yes/ No]
5. All four tyres and stepney are in good condition. [Yes/ No]
6. Infection control through antiseptic solutions cleaning is maintained. [Yes/ No]
7. Functional vehicle tool kit is available. [Yes/ No]
8. First aid KIT are available & Functional. [Yes/ No]
9. Condition of inner body of ambulance is good (floor and foot step). [Yes/ No]
10. Vehicle is self-start. [Yes/ No]
11. Ambulance staff found in uniform. [Yes/ No]
12. Staff / Beneficiary records are maintained properly.
 - A. Certified BTR(Beneficiary Trip Records) forms (Random check 2 or 3 forms) --- [Yes/ No]
 - B. Valid Driving License
13. Availability of Vehicles Valid Certificates-----[Yes/ No]
 - A. Valid Insurance certificate
 - B. valid fitness certificate
 - C. Valid pollution under control(PUC)
 - D. valid Job card & verify entry of maintenance in last months

20

Signature

SP

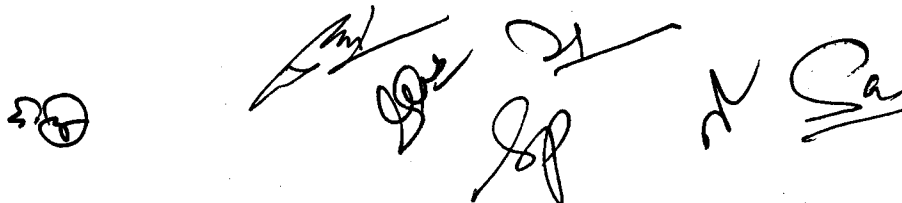
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Annexure – 27
Repair Maintenance Schedule:-

S. No.	Nature of complaint and nature of repair (to be verified and certified by the CMHO)	Tentative Up time Period
MINOR REPAIR		
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 Days
7	Engine and Gearbox Minor repair job	1 Days
8	Engine overhauling	7 Days
9	Self Starter failures	1 Days
10	Clutch Repair Job	1 Days
PREVENTIVE MAINTENANCE		
11	Schedule Service	2 Days
MAJOR REPAIR		
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.

- Total fleet of Ambulances (108 Ambulances NHM & Turnkey) and (104 –JE) should be operational all the time, In any condition no ambulance shall be off-road at any point of time. It shall be the duty of Service provider to keep the reserve ambulances to replace the off-road ambulances in case it is not done so, Penalty will be imposed as per clause 3.13 (6).



ANNEXURE-28
Certificate (On Letter Head of CA)

This is to certify that I have verified the Books of Account and relevant documents of M/s.....having its registered office at District & State..... The total turnover as per Books of Accounts produced before me for verification is as follows:-

S.No.	Financial Year	Annual Turnover
1.	2016-17	
2.	2017-18	
3.	2018-19	
	Average Turnover in the last three Years.	

According to above information average annual turnover is Rs...../-

Sign & Seal of(In blue ink only)

Chartered Accountant

Date:-

Reg. No.:-



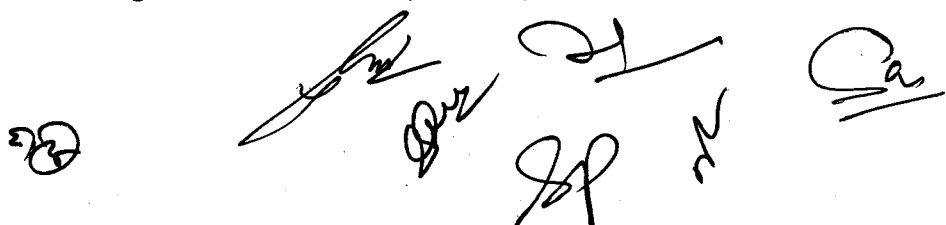
ANNEXURE-29
FINANCIAL BID

(A) Implementation of Integrated Ambulance Service project in Rajasthan: Charges for Operation & maintenance quoted in BOQ of the 108 ambulance services will include following:-

1. Salary & allowances of the personnel deployed
2. IT teams at call center and State Head office of Service Provider
3. Personnel at zonal Head quarters
4. Recruitment & training
5. Staff insurance & others
6. Fuel
7. Installation of GPS in all handed over ambulances approximately 701.
8. Comprehensive maintenance charges of ambulances
9. Ambulance comprehensive insurance (from Government agency/ Government Insurance company)
10. Uniforms
11. Ambulance mobile phones and Tablets
12. All the stipulations of the RFP
13. Conveyance & traveling
14. Asset insurance
15. Telephone, Mobile, PRI line, internet services
16. Rent of buildings, electricity & water
17. Housekeeping
18. Upgradation of existing hardwares, softwares, servers, voice solutions and all other solutions and equipments etc.*
19. Maintenance of hardwares, softwares, servers, voice solutions and all other solutions and equipments etc.*
20. Postage & courier, printing and stationary
21. Medical and non-medical consumables(as per Annexure 15) in every ambulance
22. All other miscellaneous expenses & Charges

(B) Implementation of Integrated Ambulance Service project in Rajasthan: Charges for Rent ,Operation & maintenance quoted in BOQ of the 108 ambulance services on turnkey basis will include following:-

1. Rent of Ambulances
2. Salary & allowances of the personnel deployed
3. IT teams at call center and State HQ
4. Personnel at zonal Head quarters
5. Recruitment & training
6. Staff insurance & others
7. Fuel
8. Installation of GPS in all handed over ambulances approximately 204.
9. Comprehensive maintenance charges of ambulances
10. Ambulance comprehensive insurance (from Government agency/ Government Insurance company)
11. Uniforms
12. Ambulance mobile phones and Tablets
13. Conveyance & traveling
14. Asset insurance
15. Telephone, Mobile, PRI line, internet services
16. Rent of buildings, electricity & water
17. Housekeeping
18. Upgradation of existing hardwares, softwares, servers, voice solutions and all other solutions and equipments etc.*



19. Maintenance of hardwares, softwares, servers, voice solutions and all other solutions and equipments etc.*
20. Postage & courier, printing and stationary
21. Medical and non-medical consumables(as per Annexure 15) in every ambulance
22. All other miscellaneous expenses & Charges
23. All the Stipulations of the RFP

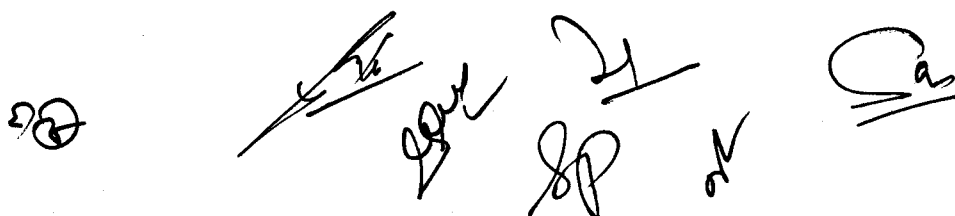
(C) Implementation of Integrated Ambulance Service project in Rajasthan: Charges for Operation & maintenance quoted in BoQ of the 104 Janani Express services will include following:-

1. Salary & allowances of the personnel deployed
2. Recruitment & training
3. Staff Insurance & Others
4. Fuel
5. Installation of GPS in all 581 Janani Express Ambulances
6. Comprehensive maintenance charges of ambulances
7. Ambulance comprehensive insurance (from Government agency/ Government Insurance company)
8. Uniforms
9. Ambulance mobile phones and Tablets
10. Conveyance & travelling
11. Asset insurance
12. Telephone, Mobile, PRI line, internet services
13. Rent of buildings, electricity & water
14. Housekeeping
15. Upgradation of existing hardwares, softwares, servers, voice solutions and all other solutions and equipments etc.*
16. Maintenance of hardwares, softwares, servers, voice solutions and all other solutions and equipments etc.*
17. Postage & courier, printing and stationary
18. All other miscellaneous expenses & Charges
19. All the stipulations of the RFP

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ABBREVIATIONS

AMC	Annual Maintenance Contract
AVLT	Automated Vehicle Location Tracking
BG	Bank Guarantee
BLSA	Basic Life Support Ambulances
BoQ	Bill of Quantity
BTR	Beneficiary Trip records
CO	Communication Officer
DAA Project	Dial an Ambulance Project
DO	Dispatch Officer
DR	Disaster Recovery
BID SECURITY	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
IAP	Integrated Ambulance Project
IEC	Information, Education, Communication
IMR	Infant Mortality Rate
MD, NHM	Mission Director, National Health Mission
MDA	Model Driven Architecture
MDG	Millennium Development Goals
MIS	Management Information System
MMR	Maternal Mortality Ratio
NHM	National 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

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Annexure A : Compliance with the Code of Integrity and No Conflict of Interest

Any person participating in a procurement process shall -

- (a) not offer any bribe, reward or gift or any material benefit either directly or indirectly in exchange for an unfair advantage in procurement process or to otherwise influence the procurement process;
- (b) not misrepresent or omit that misleads or attempts to mislead so as to obtain a financial or other benefit or avoid an obligation;
- (c) not indulge in any collusion, Bid rigging or anti-competitive behavior to impair the transparency, fairness and progress of the procurement process;
- (d) not misuse any information shared between the procuring Entity and the Bidders with an intent to gain unfair advantage in the procurement process;
- (e) not indulge in any coercion including impairing or harming or threatening to do the same, directly or indirectly, to any party or to its property to influence the procurement process;
- (f) not obstruct any investigation or audit of a procurement process;
- (g) disclose conflict of interest, if any; and
- (h) disclose any previous transgressions with any Entity in India or any other country during the last three years or any debarment by any other procuring entity.

Conflict of Interest:-

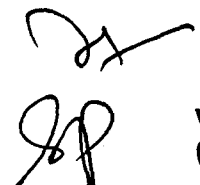
The Bidder participating in a bidding process must not have a Conflict of Interest.

A Conflict of Interest is considered to be a situation in which a party has interests that could improperly influence that party's performance of official duties or responsibilities, contractual obligations, or compliance with applicable laws and regulations.

i. A Bidder may be considered to be in Conflict of Interest with one or more parties in a bidding process if, including but not limited to:

- a. have controlling partners/ shareholders in common; or
- b. receive or have received any direct or indirect subsidy from any of them; or
- c. have the same legal representative for purposes of the Bid; or
- d. have a relationship with each other, directly or through common third parties, that puts them in a position to have access to information about or influence on the Bid of another Bidder, or influence the decisions of the Procuring Entity regarding the bidding process; or
- e. the Bidder participates in more than one Bid in a bidding process. Participation by a Bidder in more than one Bid will result in the disqualification of all Bids in which the Bidder is involved. However, this does not limit the inclusion of the same subcontractor, not otherwise participating as a Bidder, in more than one Bid; or
- f. the Bidder or any of its affiliates participated as a consultant in the preparation of the design or technical specifications of the Goods, Works or Services that are the subject of the Bid; or
- g. Bidder or any of its affiliates has been hired (or is proposed to be hired) by the Procuring Entity as engineer-in-charge/ consultant for the contract.

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Annexure B : Declaration by the Bidder regarding Qualifications

Declaration by the Bidder

In relation to my/our Bid submitted to for procurement of in response to their Notice Inviting Bids No..... Dated..... I/we hereby declare under Section 7 of Rajasthan Transparency in Public Procurement Act, 2012, that:

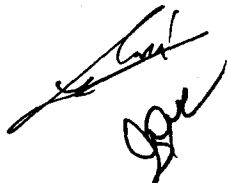
1. I/we possess the necessary professional, technical, financial and managerial resources and competence required by the Bidding Document issued by the Procuring Entity;
2. I/we have fulfilled my/our obligation to pay such of the taxes payable to the Union and the State Government or any local authority as specified in the Bidding Document;
3. I/we are not insolvent, in receivership, bankrupt or being wound up, not have my/our affairs administered by a court or a judicial officer, not have my/our business activities suspended and not the subject of legal proceedings for any of the foregoing reasons;
4. I/we do not have, and our directors and officers not have, been convicted of any criminal offence related to my/our professional conduct or the making of false statements or misrepresentations as to my/our qualifications to enter into a procurement contract within a period of three years preceding the commencement of this procurement process, or not have been otherwise disqualified pursuant to debarment proceedings;
5. I/we do not have a conflict of interest as specified in the Act, Rules and the Bidding Document, which materially affects fair competition;

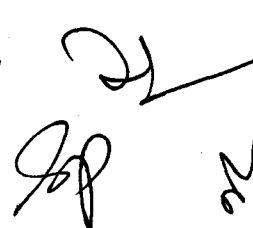
Date:
Place:

Signature of bidder
Name :
Designation:
Address:

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Annexure C: Grievance Redressal during Procurement Process

The designated and address of the First Appellate Authority is PRINCIPAL SECRETARY, MEDICAL AND HEALTH.

The designation and address of the Second Appellate Authority is EXECUTIVE COMMITTEE, STATE HEALTH SOCIETY.

1) Filing an Appeal

If any Bidder or prospective Bidder is aggrieved that any decision, action or omission of the Procuring Entity is in contravention to the provisions of the Act or the Rules or the Guidelines issued thereunder, he may file an appeal to First Appellate Authority, as specified in the Bidding Document within a period of ten days from the date of such decision or action, omission, as the case may be, clearly giving the specific ground or grounds on which he feels aggrieved:

Provided that after the declaration of a Bidder as successful the appeal may be filed only by a Bidder who has participated in procurement proceedings:

Provided further that in case a Procuring Entity evaluates the Technical Bids before the opening of the Financial Bids, an appeal related to the matter of Financial Bids may be filed only by a Bidder whose Technical Bid is found to be acceptable.

- 2) The officer to whom an appeal is filed under Para (I) shall deal with the appeal as expeditiously as possible and shall endeavor to dispose it of within thirty days of the appeal.

If the officer designated under Para (I) fails to dispose of the appeal filed within the period specified in para (2), or if the Bidder or prospective Bidder or Procuring Entity is aggrieved by the order passed by the First Appellate Authority, the Bidder or prospective Bidder or Procuring Entity as the case may be, may file a second appeal to Second Appellate Authority specified in the Bidding Document in this behalf within fifteen days from the expiry of the period specified in Para (2) or of the date of receipt of the order passed by the First Appellate Authority, as the case may be.

3) Appeal not to lie in certain cases

No appeal shall lie against any decision of the Procuring Entity relating to the following matters, namely:

- a. Determination of the need of procurement;
- b. Provisions limiting participation of Bidders in the Bid process;
- c. The decision of whether or not to enter into negotiations;
- d. Cancellation of a procurement process;
- e. Applicability of the provisions of confidentiality.

4) Form of Appeal

- a. An appeal under Para (I) OR (3) above shall be in the annexed Form along with as many copies as there respondents in the appeal.
- b. Every appeal shall be accompanied by an order appealed against, if any, affidavit verifying the facts states in the appeal and proof of payment of fee.

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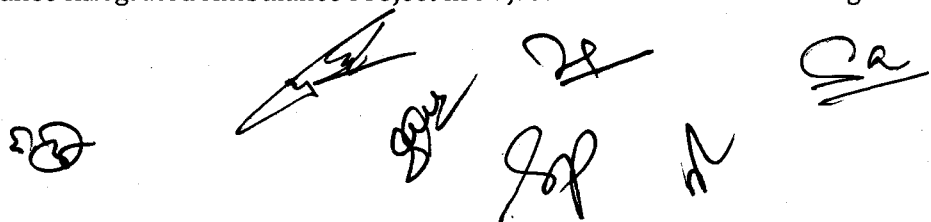
- c. Every appeal may be presented to First Appellate Authority or Second Appellate Authority.

5) Fee for filing Appeal

- a. Fee for the first appeal shall be rupees two thousand five hundred and for second appeal shall be rupees ten thousand, which shall be non-refundable.
- b. The fee shall be paid in the form of bank demand draft or banker's cheque of a Scheduled Bank in India payable in the name of Appellate Authority concerned.

6) Procedure for Disposal of Appeal

- a. The First Appellate Authority or Second Appellate Authority, as the case may be up on filing of appeal, shall issue notice accompanied by copy of appeal, affidavit and documents, if any, to the respondents and fix date of hearing.
- b. On the date fixed for hearing, the First Appellate Authority or Second Appellate Authority, as the case may be, shall,-
- i. Hear all the parties to appeal present before him; and
- ii. Pursue or inspect documents, relevant records or copies thereof relating to the matter.
- c. After hearing the parties, perusal or inspection of documents and relevant records or copies thereof relating to the matter, the Appellate Authority concerned shall pass an order in writing and provide the copy of order to the parties to appeal free of cost.
- d. The order passed under sub-clause (c) above shall also be placed on the State Public Procurement Portal.

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Memorandum of Appeal under the Rajasthan Transparency in Public Procurement Act, 2012

Appeal No.....of.....

Before the.....(First/Second Appellate Authority)

1. Particulars of Appellant:

- i. Name of the appellant:
- ii. Official address, if any:
- iii. Resident address:

2. Name and address of the respondent(s):

- i.
- ii.
- iii.

3. Number and date of order appealed against

And name and designation of the officer/ authority

Who passed the order (enclosed copy), or a

Statement of a decision, action or omission of

The Procurement Entity in contravention to the provisions

of the Act by which the appellant is aggrieved:

4. If the Appellant proposes to be represented

by a representative, the name and postal address

of the representative:

5. Number of affidavits and documents enclosed with the appeal:

6. Grounds of appeal:

.....

.....

.....

.....

.....(Supported by an affidavit)

7. Prayer:

.....

.....

.....

.....

Place.....

Date.....

Appellant's Signature

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Annexure D : Additional Conditions of Contract

1. Correction of arithmetical errors

Provided that a Financial Bid is substantially responsive, the Procuring Entity will correct arithmetical errors during evaluation of Financial Bids on the following basis:

- i. if there is a discrepancy between the unit price and the total price that is obtained by multiplying the unit price and quantity, the unit price shall prevail and the total price shall be corrected, unless in the opinion of the Procuring Entity there is an obvious misplacement of the decimal point in the unit price, in which case the total price as quoted shall govern and the unit price shall be corrected;
- ii. if there is an error in a total corresponding to the addition or subtraction of subtotals, the subtotals shall prevail and the total shall be corrected; and
- iii. if there is a discrepancy between words and figures, the amount in words shall prevail, unless the amount expressed in words is related to an arithmetic error, in which case the amount in figures shall prevail subject to (i) and (ii) above.

If the Bidder that submitted the lowest evaluated Bid does not accept the correction of errors, its Bid shall be disqualified and its Bid Security shall be forfeited or its Bid Securing Declaration shall be executed.

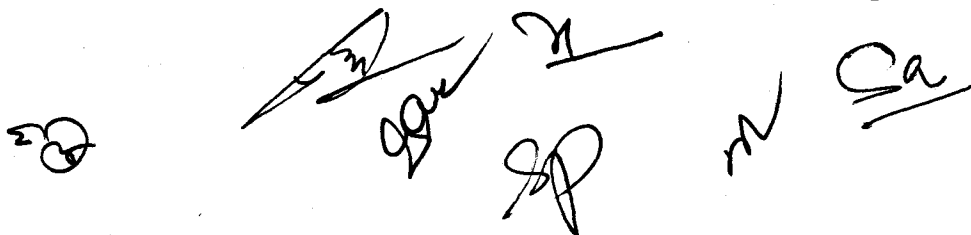
2. Procuring Entity's Right to Vary Quantities

(i) At the time of award of contract, the quantity of Goods, works or services originally specified in the Bidding Document may be increased or decreased by a specified percentage, but such increase or decrease shall not exceed twenty percent, of the quantity specified in the Bidding Document. It shall be without any change in the unit prices or other terms and conditions of the Bid and the conditions of contract.

(ii) If the Procuring Entity does not procure any subject matter of procurement or procures less than the quantity specified in the Bidding Document due to change in circumstances, the Bidder shall not be entitled for any claim or compensation except otherwise provided in the Conditions of Contract.

(iii) In case of procurement of Goods or services, additional quantity may be procured by placing a repeat order on the rates and conditions of the original order. However, the additional quantity shall not be more than 25% of the value of Goods of the original contract and shall be within one month from the date of expiry of last supply. If the Supplier fails to do so, the Procuring Entity shall be free to arrange for the balance supply by limited Bidding or otherwise and the extra cost incurred shall be recovered from the Supplier.

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