
A. _____

Centre –in-charge	1
Physiotherapist	2
Occupational Therapist	2
Prosthetist & Orthotist	2
Junior Prosthetist & Orthotist	2
Technicians/Leather Worker	2
Receptionist-cum-DEO	1
Attendants/Sweepers	2 each
TOTAL	16

B. _____

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	<ul style="list-style-type: none">••••••	

		<ul style="list-style-type: none"> • • • •

Bidders should submit the required documents as mentioned above. Bids not conforming to the eligibility criteria and non-submission of required documents as listed above will leads to outright rejection of the bid.

Submission of forged documents will also result in rejection of the bid. Bidders are advised to study all instructions, forms, terms & conditions and other information as mentioned in the tender document. The bids must be complete in all respect, indexed and hard bound. Each page should be numbered and certified by the authorized representative. Failure to comply with the tender requirements will result in outright rejection of the bid.

C. _____

D.

- a)
- b)
- c)
- d)
- e)
- f)
- g)
- h)
- i)
- j)
- k)
- l)
- m)

Any deviation from the prescribed procedures /required information / formats / Conditions shall

result in out-right rejection of the bid.



	<p>A)</p> <p>•</p> <p>•</p> <p>B)</p>	
	<p>•</p>	

	Presentation in support of credentials (30 Minutes) <ul style="list-style-type: none"> a) Company Profile b) Awards, Commendations & Certifications such as ISO. 	20



lowest and competitive bid price



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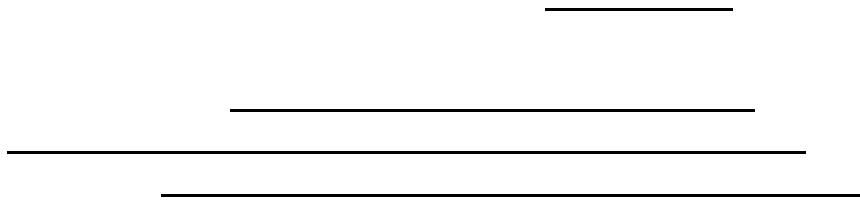
Centre –in-

Receptionist-cum-DEO	1	10+2 with DCA	15,000	• • • •
Attendants/Sweepers	2 each	Class-VIII passed	12,600	
TOTAL	16		6,35,400	

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TOTAL	16

Financial Turnover of the Bidder for the last 5 financial years(*).



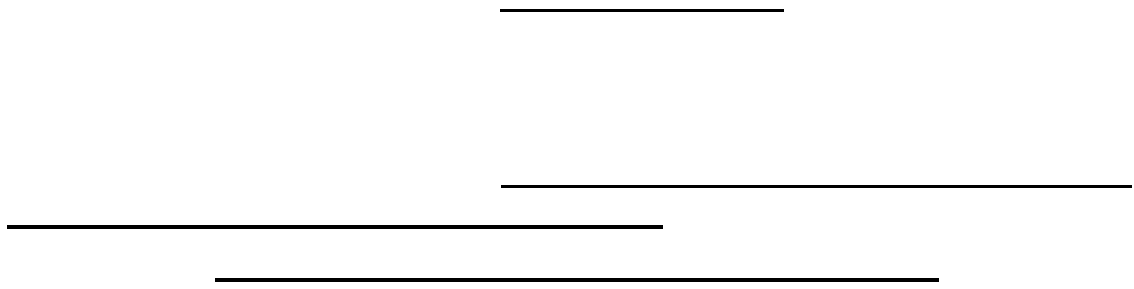
- 1.
- 2.
- 3.
- 4.
- 5.

word]

[Insert amount in figure as well as in

Tender Inviting Authority: Director, SIDR		
Name of Work:		
Contract No:		
Name of the Bidder/ Bidding Firm / Company:		
<u>PRICE SCHEDULE</u>		
Sl. No.	Item Description	Service Charge-Percentage (%) of total wages
1	E-TENDER FOR SELECTION OF OUTSOURCING AGENCY FOR DEPLOYMENT OF MANPOWER	

Notes:



a)

b)

c)

d)

e)

[Authority]

[SERVICEPROVIDER]

[Name and Designation of the Representative with seal]
