

# **PREQUALIFICATION DOCUMENTS**

**(PREQUALIFICATION OF LAB REAGENTS / CHEMICALS FOR FY 2023-24)**

**(MANUFACTURING UNITS AND SOLE AGENTS OF FOREIGN  
PRINCIPALS / MANUFACTURERS)**



**(FINANCIAL YEAR 2023-2024)**

**Directorate General Health Services Punjab**  
24-Cooper Road Lahore.

**Primary & Secondary Healthcare Department**  
**Government of the Punjab**

**INVITATION FOR PREQUALIFICATION**  
**OF LAB REAGENTS / CHEMICALS**  
**FY (2023-24)**

Dear Sir / Madam

Directorate General Health Services Punjab, 24-Cooper Road, Lahore invites sealed bids from the eligible bidders for prequalification of Lab Reagents / chemicals of Directorate General Health Services Punjab for the year 2023-24.

**T. E. NO. PC-LAB REAGENTS/PRE-QUALIFICATION/2023-24**

Sr.	Name of Item	Lab Reagents / chemicals	Estimated Price
1	Lab Reagents / Chemicals	As per list in bidding document	150 Million

<b>Tender Price</b>	<b>Rs. 10,000/- (Non-refundable)</b>
<b>Last date and time of submission of tender</b>	<b>11/09/2023 11:00 A.M.</b>
<b>Date and time of opening of tender</b>	<b>11/09/2023 11:30 A.M.</b>
<b>Venue:</b>	<b>Purchase Cell, Directorate General Health Services Punjab, 24-Cooper Road, Lahore.</b>

Interested eligible bidders may get the Bidding Documents for tender on submission of written application along with tender fee (non-refundable) during office hours till last date & time for submission of bids. However, a copy of the bidding documents and detailed specifications are also available on the websites of Punjab Procurement Regulatory Authority ([www.ppra.punjab.gov.pk](http://www.ppra.punjab.gov.pk)) & Directorate General Health Services, Punjab ([www.dghs.punjab.gov.pk](http://www.dghs.punjab.gov.pk)).

Bidding will be conducted through Single Stage – Two Envelopes bidding procedure as per Rule 38 (2) (a) of Punjab Procurement Rules 2014. (Amended)

Bids must be delivered to Purchase Cell, Directorate General Health Services Punjab, 24–Cooper Road, Lahore. The rate offered will be inclusive of all taxes levied by the Government. Bids will be opened in the presence of the bidders/representatives at Conference Room, Directorate General Health Services Punjab, Lahore. Late bids will be rejected.

**Note:**

1. All assessments and procuring procedure i.e. receiving, opening and awarding etc. shall be governed by the Punjab Procurement Rules 2014 (Amended).
2. Bids / Tenders (Technical and Financial) are required in tape binding with page marking.
3. In case the date of Bid opening or last date of sale of tender is declared public holiday by the Government or non-working day due to any reason, the next official working day shall be deemed to be the date of sale and submission and opening of tenders accordingly. The time and venue shall remain the same.

**DIRECTOR GENERAL HEALTH SERVICES  
PUNJAB**

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## Section I: Instructions to Applicants (ITA)

### A. General

#### 1. Scope of Application

1.1 In connection with the Invitation for Prequalification “as per PPR 2014” the Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab, issues this Prequalification Document (PQD) to applicants interested to prequalify Manufacturing Units & Sole Agents of Foreign Principals / manufacturers for the items contained in the Prequalification Documents. This prequalification will be concluded for DGHS for FY 2023-24.

Prequalification will be carried for the items which comes under the definition of drugs under Drugs Act 1976/DRAP Act 2012/Punjab Drugs Rules 2007/ Punjab Drugs Amendment Act 2017 for Drug items & Medical Devices Rules 2018.

Procuring agency may physically verify firm’s claim regarding submitted documents.

#### 2. Fraud and Corruption

2.1 Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab requires that applicant observe the highest standard of ethics during the submission of application for prequalification and further documents required for prequalification.

(a) In pursuance to this, the following terms are defined:

(i) “corrupt practice” is the offering, giving, receiving or soliciting, directly or indirectly, of anything of value to influence improperly the actions of another party;

(ii) “fraudulent practice” is any act or omission, including a misrepresentation, that knowingly or recklessly misleads, or attempts to mislead, a party to obtain a financial or other benefit or to avoid an obligation;

(iii) “collusive practice” is an arrangement between two or more parties designed to achieve an improper purpose, including to influence improperly the actions of another party;

(iv) “coercive practice” is impairing or harming, or threatening to impair or harm, directly or indirectly, any party or the property of the party to influence improperly the actions of a party;

(v) “obstructive practice” is deliberately destroying, falsifying, altering or concealing of evidence material to the investigation or making false statements to investigators in order to materially impede a Bank investigation into allegations of a corrupt, fraudulent, coercive or collusive practice; and/or threatening, harassing or intimidating any party to prevent it from disclosing its knowledge of matters relevant to the investigation or from pursuing the investigation; or

- (b) Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab will reject a proposal for prequalification if it determines that the applicant has directly or through an agent, engaged in corrupt, fraudulent, collusive, coercive or obstructive practices in competing for the prequalification in question;
  
- (c) Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab will declare ineligible, either indefinitely or for a stated period of time, if it, at any time, determines that the firm has, directly or through an agent, engaged in corrupt, fraudulent, collusive, coercive or obstructive practices in competing for prequalification.
  
- (d) The prequalified firms are required to participate in RFP/bidding process announced by any procuring agency under administrative control of Primary & Secondary Healthcare Department. In case of failure to participate, procuring agency may disqualify respective firm (fully or in partially) from pre-qualification 2023-24 and may initiate legal proceeding against the said firm.

- 3. Eligible Applicants**
- 3.1 This Invitation for prequalification is open to all original Manufacturers & Sole Agents of Foreign Principals for supply of goods more specifically described in the Annexure-D, List of Items with Specifications.
- 3.2 If Government of Pakistan prohibits commercial relations with any Country, the firms dealing with such countries are ineligible to apply.
- 3.3 A firm declared disqualified / blacklisted / debarred by Directorate General Health Services, Punjab shall be ineligible for Prequalification
- 3.4 An Applicant can be a private or public entity registered with FBR having NTN & SRTN Registration.

## **B. Contents of the Prequalification Documents**

### **4. Sections of Prequalification Documents**

- 4.1 The documents for the prequalification of Applicants (hereinafter - “prequalification documents”) consists of all the sections indicated below, and should be read in conjunction with any Addendum if issued.
- Section I. Instructions to Applicants (ITA)  
Section II. Prequalification criteria  
Section III. A: Application Form  
                  B: Application affidavit
- 4.2 The “Invitation for Prequalification Applications” (IPA) issued by the Procuring Agency is part of the prequalification documents.
- 4.3 Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of The Punjab accepts no responsibility for the completeness of the prequalification documents and its addenda unless the original receipt of the fee deposit slip is attached with the documents.

- 4.4 The Applicant is expected to examine all instructions, forms, and terms in the Prequalification Documents and to furnish all information or documentation required by the Prequalification Documents.
- 5. Clarification of Prequalification Document**
- 5.1 A prospective Applicant requiring any clarification of the Prequalification Documents shall contact the Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab in writing at the address indicated in the **Invitation for Pre-Qualification of Lab Reagents / Chemicals**. The Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab will respond in writing to any request for clarification provided that such request is received no later than Seven (07) days prior to the deadline for submission of applications. The Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab shall forward copies of its response to all applicants who have acquired the prequalification documents through its official website including a description of the inquiry but without identifying its source. Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab deemed it necessary to amend the prequalification documents as a result of a clarification it shall do under intimation to all the applicants who have obtained the prequalification documents through its official website.
- 6. Amendment of Prequalification Document**
- 6.1 At any time prior to the deadline for submission of applications, the Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab may amend the Prequalification Documents by issuing addenda/Corrigendum.
- 6.2 Any addendum/corrigendum/minutes of pre-application conference issued shall be part of the Prequalification Documents and shall be communicated in writing to all who have obtained the prequalification documents from the Primary & Secondary Healthcare Department. The minutes shall also be uploaded on the official websites of Director General Health Services Punjab and Primary & Secondary Healthcare Department Government of the Punjab
- 6.3 To give prospective Applicants reasonable time to take an addendum/corrigendum into account in preparing their applications, the Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab may, at its discretion, extend the deadline for the submission of applications

### C. Preparation of Applications

- 7. Cost of Applications**
- 7.1 The Applicant shall bear all costs associated with the preparation and submission of its application. Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab will in no case be responsible or liable for those costs, regardless of the conduct or outcome of the prequalification process.
- 7.2 Payment Receipt may be collected from Accounts Branch, Directorate General of Health Services Punjab, 24 Cooper Road, Lahore after submitting fee of Rs:10,000/- with providing request letter on firm's original letter head as per specimen of request letter attached in **Annexure-1**.



- 8. Language of Application** 8.1 The application as well as all correspondence and documents relating to the prequalification exchanged by the Applicant and Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab, shall be written in the language specified in the **Prequalification Documents**. Supporting documents and printed literature that are part of the application may be in another language, provided they are accompanied by an accurate translation of the relevant passages in the language specified in the **Prequalification Documents**, in which case, for purposes of interpretation of the application, the translation shall govern.
- 9. Documents Comprising the Application** 9.1 The application shall comprise the following:
- a. Application Submission Form, in accordance with Information To Applicants (ITA);
  - b. Documentary evidence establishing the Applicant's eligibility to prequalify, in accordance with ITA & Prequalification Criteria;
  - c. Documentary evidence establishing the Applicant's qualifications, in accordance with ITA and & Prequalification Criteria
  - d. Any other document required as specified in the Prequalification Documents.
  - e. **All information, statements and description contained in the Application (hard copy) are in all respect true, correct and complete to the best of our knowledge and belief.**
- 10. Application Submission Form** 10.1 The printed application along with necessary documents shall be submitted (in tape binding) by hand in Purchase Cell Directorate General of Health Services Punjab, 24 Cooper Road, Lahore before date and time mentioned in the advertisement.
- 11. Application Submission** 11.1 To establish its qualifications, the Applicant shall provide the information requested in the corresponding Information Sheets included in Section III, Prequalification Criteria
- 12. Documents Establishing the Qualifications of the Applicant** 12.1 The Applicant shall prepare and submit the application for prequalification as described in ITA & Prequalification Documents. The application shall be typed or written in indelible ink and shall be signed by a person duly authorized to sign on behalf of the Applicant.
- 13. Signing of the Application** 13.1 The Applicant shall prepare and submit the application for prequalification as described in ITA & Prequalification Documents. The application shall be typed or written in indelible ink and shall be signed by a person duly authorized to sign on behalf of the Applicant.

## D. Submission of Applications

- |   |      |   |
|---|------|---|
| <b>14. Sealing and Identification of Applications</b> | 14.1 | The Procuring Agency will accept no responsibility for not processing any envelope that was not identified as required.   |
|   | 14.2 | Applicants will submit their applications (Hard Copy) by hand. Applications shall be received by the Purchase Cell Directorate General of Health Services Punjab, 24 Cooper Road, Lahore at the address and no later than the deadline indicated in the <b>Invitation for Prequalification</b> .  |
| <b>15. Deadline for Submission of Applications</b>    | 15.1 | The Director General of Health Services Punjab Primary & Secondary Healthcare Department may, at its discretion, extend the deadline for the submission of applications by amending the Prequalification Documents in which case all rights and obligations of the Director General of Health Services Punjab, Primary & Secondary Healthcare Department and the Applicants subject to the previous deadline shall thereafter be subject to the deadline as extended. |
|   | 15.2 | Any application received by the Director General of Health Services Punjab, Primary & Secondary Healthcare Department after the deadline for submission of applications will not be entertained as indicated in the <b>Invitation for Prequalification</b> .  |
| <b>16. Late Applications</b>                          | 16.1 | The Director General of Health Services Punjab, Primary & Secondary Healthcare Department shall open all Applications at the date, time and place specified in the <b>Invitation for Prequalification</b> . Late Applications shall be treated in accordance with ITA.  |
| <b>17. Opening of Applications</b>                    | 17.1 | Director General of Health Services Punjab, Primary & Secondary Healthcare Department shall prepare a record of the opening of applications that shall include the name and other details of the Applicant. A copy of the record shall be distributed to all Applicants.  |
|   | 17.2 | Director General of Health Services Punjab, Primary & Secondary Healthcare Department shall prepare a record of the opening of applications that shall include the name and other details of the Applicant. A copy of the record shall be distributed to all Applicants.  |

## **E. Procedures for Evaluation of Applications**

- |                            |      |   |
|----------------------------|------|---|
| <b>18. Confidentiality</b> | 18.1 | From the deadline for submission of applications to the time of notification of the results of the prequalification, any Applicant that wishes to contact the Director General of Health Services Punjab, Primary & Secondary Healthcare Department on any matter related to the prequalification process, may do so but only in writing. |
|----------------------------|------|---|

- 18.2 To assist in the evaluation of applications, the Director General of Health Services Punjab, Primary & Secondary Healthcare Department may, at its discretion, ask any Applicant for a clarification of its application (b hard copy) which shall be submitted within a stated reasonable period of time. Any request for clarification and all clarifications shall be in writing.
- 19. Clarification of Applications** 19.1 If an Applicant does not provide clarifications of the information requested by the deadline, the application shall be evaluated based on the information and documents available at the time of evaluation of the application.
- 19.2 All applications not responsive to the requirements of the prequalification document shall be rejected.
- 20. Responsiveness of Applications** 20.1 A margin of preference for domestic bidders shall not apply in the bidding process resulting from this prequalification.
- 21. Domestic Bidder Preference** 21.1 A margin of preference for domestic bidders shall not apply in the bidding process resulting from this prequalification.

#### **F. Evaluation of Applications and Prequalification of Applicants**

- 22. Evaluation of application** 22.1 The Prequalification will be item wise/section wise/firm wise, however in case of any addition in the formulary, the qualification against prequalification section will be considered and in certain cases where any principal of procurement will going to be violated, the procuring agency may invite open competitive bidding in best public interests.
- 22.2 The Director General of Health Services Punjab, Primary & Secondary Healthcare Department reserves the right to accept or reject all the applications, and to annul the prequalification process, without thereby incurring any liability to Applicants.
- 23. Right to accept or reject the applications** 23.1 All Applicants whose applications have met the specified requirements will, to the exclusion of all others, be prequalified by DGHS the Primary & Secondary Healthcare Department.
- 24. prequalification of applicants** 24.1 Once the Director General of Health Services Punjab, Primary & Secondary Healthcare Department has completed the evaluation of the applications it shall notify all Applicants in writing/through Official websites of DGHS & P&SHD indicating their Section/Item wise status as to prequalified or disqualified or ineligible.
- 25. Notification of prequalification** 25.1 The Pre-Qualification shall be valid for FINANCIAL YEAR 2023-24
- 26. Validity of Pre-Qualification** 26.1 For FY 2023-24.

**Annex-1-(On firm's Original Letter Head)**

**Request Application for Prequalification Documents (2023-24)  
Non-Drugs/Medical Devices**

Ref.No/

Dated:

The Director General Health Services Punjab,  
Primary & Secondary Health Care Department  
Govt. of The Punjab.

Subject: **Request Application for Prequalification Documents (2023-24) Non-Drugs/Medical Devices**

Dear Sir,

With reference to your advertisement regarding prequalification of Drugs & Non-Drugs/Medical Devices (2023-24) advertised on dated -----in the Daily -----Newspaper, it is requested to provide the Prequalification Documents against the following categories.

**(Tick Appropriate Box)**

**1. Local Manufacturers ((Non-Drugs/Medical Devices)**

**2. Sole Agents (Non-Drugs/Medical Devices)**

M/s \_\_\_\_\_ hereby authorizes Mr./Ms. \_\_\_\_\_

Designation \_\_\_\_\_ CNIC No. \_\_\_\_\_

Official Email \_\_\_\_\_ (For Login I.D), Mobile No. \_\_\_\_\_ (for sms alerts) to fill/complete/submit the prequalification application

Firm's NTN: \_\_\_\_\_

Firm's STN: \_\_\_\_\_

**Authorized By**

Name \_\_\_\_\_

Signature \_\_\_\_\_

Designation \_\_\_\_\_

Contact No. \_\_\_\_\_

Stamp \_\_\_\_\_

## PREQUALIFICATION KNOCKDOWN CRITERIA

### COMPULSORY PARAMETERS

- a. Original Prequalification Purchase Receipt obtained by Depositing Rs. 10,000/- (Non-Refundable) to Cashier, Accounts Branch, DGHS.
- b. Valid establishment license (for local manufacturers /for Sole Agents )
- c. In case of sole agent, bidder will submit the valid sole agency agreement from the foreign principals / manufacturers.
- d. Valid Drug Sale License (Where applicable)
- e. Valid Device Enlistment Certificate, as per Medical Devices Rules 2017 of the quoted product issued by DRAP Pakistan. (exemption wherever applicable under rules)
- f. Valid ISO 13485 of the manufacturer.
- g. The firm shall provide/attach the product's valid CE/JMHLW/US FDA approval certificate or prequalification by WHO. Certificates provided by the firm on its own letter head are not acceptable, CE marked by conformity assessment bodies (CABs) notified in NANDO database under the relevant European directive for medical devices of European Union shall be accepted only.
- h. The firm undertakes that currently it is not declared Blacklisted / Debarred by Director General Health Services, Punjab on valid Rs.100 stamp paper duly verified by notary public.
- i. National Tax Number (NTN) and General Sales Tax Number with documentary proof shall have to be provided by the bidder(s).
- j. Applicant shall clearly mention country of origin with catalogue/model number on the PQ cover sheet.
- k. The offered specifications of the quoted item must comply with the advertised technical specifications. Incomplete offer will straightaway be rejected. Firm will also submit documentary evidence of complete specification along with affidavit on 100 Rupees stamp paper that it will fulfill all requirements mentioned in the advertised specifications if declared successful in the subsequent bidding process.
- l. Cumulative financial turnover of three financial years (i.e. 2019-2020,2020-21 & 2021-22)/ calendar year (i.e. 2020,2021,2022) must be equivalent or above Rs. 300 Million. Applicant shall provide FBR income tax return/sales Tax return for the financial year 2019-2020, 2020-21 & 2021-22 or in case of calendar year 2020, 2021, and 2022.

**Note:** Income Tax/Sales Tax return for the FY 2021-22 shall be supported with bank statement (FY-

2021-22) of the title account of the applicant firm only. Both Tax return and Bank statement must be equivalent or above of total estimated cost of quoted item(s). (Firm shall attach bank statement signed and stamped from concerned bank along with FBR income tax/sales tax return) and same for calendar year-2022. (Joint venture, consortium and subsidiary shall not be accepted.)

- m. Quoted product must be tried and tested in local environment for at least one year (Financial year) since July 2019 onward till closing date of submission of PQ application submission. (Firm must attach copy of purchase order(s) of Public Sector Institution anywhere in Pakistan issued on the name of bidder). Any false claim shall lead to disqualification/blacklisting of firm.
- n. The applicant will submit an affidavit on Rs. 100/- stamp paper (Notarized) stating the applicant accepts all the terms and conditions as mentioned in Prequalification Documents.
- o. The firm shall undertake on Rs.100/- stamp paper legally notarized that the Information provided by the firm at Annexures & Bid Forms and any other information provided by the firm are in accordance with terms & conditions of the prequalification documents.

**In case of failure to comply with any above-mentioned parameter, the bidder will be declared as “NOT PREQUALIFIED”:**

To establish its qualification, the firm shall provide the information requested in the respective annexures and requirements with documentary proof:

**Note:** The firm will be prequalified for the particular item/ brand along with pack size.RFP/Bidding process shall be called only from prequalified firms against specific item as per item list mentioned in this PQD.

**GENERAL FIRM’S INFORMATION**

(Non-Drugs/ Medical Devices Manufacturer)

**I. Company Profile.**

1. Name of company : \_\_\_\_\_

Year established : \_\_\_\_\_

Form of company :  Individual  
 Partnership  
 Corporation  
 Other (specify)

Legal status : \_\_\_\_\_

Trade registers number : \_\_\_\_\_

NTN &amp; Sales Tax number (If applicable): : \_\_\_\_\_

Mfg. License Number : \_\_\_\_\_

(attach valid copy)

2. Address : \_\_\_\_\_

Telephone : \_\_\_\_\_ Telefax: \_\_\_\_\_

E-mail: : \_\_\_\_\_

**3. Employees:**

S.No.	Category	Quantity
1	Management	
2	R &D	
3	Sales	
4	Administrative	
5	Production and quality control	
6	Others (specify)	
	<b>Total</b>	

Please attach the company organizational chart

**II. Product Information**

1. Are all manufacturing operations (processing, packaging, labeling) carried out internally?

YES  NO

If “No,” attach a list of pharmaceuticals and/or raw materials manufactured by other companies and marketed by you. Please give the names of the companies, for each item.

S.No.	Product Name	Manufacturer	Address
1.			
2.			
3.			

If any products are repackaged, attach a list of such products with the name and address of the manufacturer for each product:

S.No.	Product Name	Manufacturer	Address
1.			
2.			
3.			

### III. QUALITY DEPARTMENT

1. Do you maintain your own quality control laboratory?

YES  NO (if NO please provide details of alternate arrangements)

2. Number of specialized personnel working in your quality control, quality assurance and microbiological laboratory/ies (excluding administrative personnel). Provide their academic and professional details on a separate sheet.

Pharmacists : \_\_\_\_\_

Chemists : \_\_\_\_\_

Others : \_\_\_\_\_

3. List of Equipment installed in quality control, quality assurance and microbiological laboratory/ies for quality assurance as per BP/USP.

\_\_\_\_\_

\_\_\_\_\_

4. Are these equipment calibrated & validated.

YES  NO

5. Are all raw materials completely tested prior to use or is a Certificate of Analysis accepted?

YES  NO  Certificate of Analysis



6. Are control samples of each batch retained?

YES

NO

7. Name and title of the authorized person (s) responsible for batch release:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Experience in pharmaceuticals: \_\_\_\_\_ years

8. Name and qualification of the head of the Quality Control department:

Name: \_\_\_\_\_

Qualification: \_\_\_\_\_

Experience in pharmaceuticals: \_\_\_\_\_ years

9. Describe your storage facilities:

\_\_\_\_\_  
\_\_\_\_\_

The firm will provide logistics/distribution network in Punjab.

The firm will provide human resource regarding logistics/distribution network in Punjab.



**5. Employees:**

S.No.	Category	Quantity
1	Management	
2	R &D	
3	Sales	
4	Administrative	
5	Production and quality control	
6	Others (specify)	
	<b>Total</b>	

**6. Capital value of the company (specify currency)**

(a) Authorized capital: \_\_\_\_\_

(b) Paid up capital: \_\_\_\_\_

(c) Administration: \_\_\_\_\_

**7. Annual sales turnover in the previous one year. Mention Private Sector and Public Sector sales separately (in Pak Rupees)**

(In Million)

Annual turnover	Open market sales	Public Sector Sale	Year

Arbitration History (if any): \_\_\_\_\_

**Authorized Distributor On Behalf Of Registered Firms**  
(Medical Devices/Non Drug items)

Product applied for:

S.No. of the item	Name of Item	Name of Manufacturer	Country of Origin	Quality Compliance standards

Name of firm \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_ URL http://www. \_\_\_\_\_

Type of firm:  Sole Proprietor  Partner Ship  Limited

Other \_\_\_\_\_ Date of establishment \_\_\_\_\_

List of Board of Directors, Partners, Key Management Personnel (both Technical, Sales & Management - include position, professional qualification, experience).

\_\_\_\_\_

Total area of the firm premises \_\_\_\_\_  Owned  Rented

Total Area of ware house \_\_\_\_\_

Facilities in ware house \_\_\_\_\_

\_\_\_\_\_

Total no. of Employees: Technical \_\_\_\_\_ Non - Technical \_\_\_\_\_

National Tax Number \_\_\_\_\_ Date \_\_\_\_\_

General Tax Number \_\_\_\_\_ Date \_\_\_\_\_

Registrations / Prequalification with other departments: \_\_\_\_\_

\_\_\_\_\_

**Detail of Head / Branch Office / Workshop (s):**

Address: \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

**Sales / Marketing Staff:**

Name	Designation / Responsibility	Qualification	Total Experience	Experience with Current Firm	Training Detail (Local & abroad)

**Technical Staff:**

Name	Designation / Responsibility	Qualification	Total Experience	Experience with Current Firm

Name & Capacity of the Authorized Contact Person: \_\_\_\_\_

Signature of the Authorized Contact Person: \_\_\_\_\_

Date: \_\_\_\_\_ Stamp of the Firm: \_\_\_\_\_

**DOCUMENTS TO BE ATTACHED (COPIES)**

The firm must attached relevant documents

**NAME OF APPLICANT FIRM (Local Manufacturer/Sole Agent)-Non-Drugs/Medical Devices\_\_\_\_\_**

Item Code	Generic Name	Section	Quoted Brand	Quoted strength/size	pack Size	Country of Origin	Mfg By	Mfg for	MRP (Rs)	Quality Compliance Standards	Required Storage tempt (quoted item)	Valid Sole Agency Agreement/ Authorization letter	Date of Sole agency agreement/ authorization letter
1													
2													

**LIST OF ITEMS**

SR#	NAME OF THE ITEMS WITH DETAIL SPECIFICATIONS
<b>A</b>	<p><b>Basic Chemistry</b></p> <ol style="list-style-type: none"> <li><b>1. Liver function tests (LFT)</b> <ol style="list-style-type: none"> <li>i. Alanine Transaminase (ALT) Kit</li> <li>ii. Aspartate Amino Transferase (AST) Kit</li> <li>iii. Total Bilirubin Kit</li> <li>iv. Alkaline Phosphatase (ALP) kit</li> </ol> </li> <li><b>2. Renal Function Tests (RFT)</b> <ol style="list-style-type: none"> <li>i. Urea kit</li> <li>ii. Creatinine kit</li> </ol> </li> <li>3. Blood Sugar test kit</li> <li>4. Uric acid test kit</li> <li>5. Calcium test kit</li> </ol>
<b>B</b>	<p><b>Complete Blood Count (CBC) test</b></p> <ol style="list-style-type: none"> <li>i. Reagents / chemicals for CBC test</li> </ol> <p><b>Note:</b> There are following three types of systems/Machines for CBC test present in health facilities under the administrative control of P&amp;SCHD, Punjab.</p> <ol style="list-style-type: none"> <li>i. Sysmex</li> <li>ii. Diatron</li> <li>iii. Medonic</li> <li>iv. Any other system / machine installed in health facilities of P&amp;SCHD, Punjab.</li> </ol>
<b>C</b>	<p><b>PT/aPTT (Prothrombin time/activated Partial thromboplastin Time) test</b></p> <ol style="list-style-type: none"> <li>i. PT/aPTT kit</li> </ol>

1. Any further information can be obtained from the office of Purchase Cell, Directorate General Health services, Punjab, 24-Cooper Road Lahore.

### Section III: Application Forms

## Application Submission Form

Date: \_ \_/ \_ \_/2023

To

**Director General Health Services Punjab  
Government of the Punjab  
Primary & Secondary Healthcare Department.**

I/we, the undersigned, apply to be prequalified for the referenced Pre-qualification and declare that:

- (a) I/we have examined and have no reservations to the Prequalification Documents, including Addendum(s). (if any) issued in accordance with Instructions to Applicants (ITA) *[insert the number and issuing date of each addendum]*.
- (b) I/we, have nationalities from eligible countries, in accordance with ITA *[insert the nationality of the Applicant, including that of all partners in case of a Joint Venture /Consortium if applicable]*;
- (c) I/we, for any part of the application resulting from this prequalification, do not have any conflict of interest;
- (d) I/we for any part of the contract resulting from this prequalification, have not been declared disqualified / blacklisted by any of the public organization of the Procuring Agency's country
- (e) I/we understand that you may cancel the prequalification process at any time, the prequalification does not bound the procuring agency to call for the bids from the prequalified firms.
- (f) All information, statements and description contained in the Application (hard copy) are in all respect true, correct and complete to the best of our knowledge and belief and there is no difference in information provided and submitted in hard copy.

Signed *[insert signature(s) of an authorized representative(s) of the Applicant]* Name *[insert full name of person signing the application]*

In the Capacity of *[insert capacity of person signing the application]*

Duly authorized to sign the application for and on behalf  
of: Applicant's Name *[insert full name of Applicant]*

Address *[insert street number/town or city/country/ address]*

Dated on \_ \_/ \_ \_/2023



## **Affidavit**

(Pak Rs.100/-)

*a) Applicants signed affidavit on PKR 100.00 paper confirming not having been declared ineligible by Directorate General Health Services,Punjab in Pakistan, as described in the documents.*

*b) Applicants confirming not having been involved in any litigation during last three years.*

*Signed [insert signature(s) of an authorized representative(s) of the Applicant] Name [insert full name of person signing the application]*

*In the Capacity of [insert capacity of person signing the application]*

*Duly authorized to sign the application for and on behalf of: Applicant's Name [insert full name of Applicant]*

*Address [insert street number/town or city/country/ address]*

*Dated on \_ -/\_ -\_/2023*