

**HAFFKINE BIO-PHARMACEUTICAL CORPORATION LIMITED****(Procurement Cell)****(A Government of Maharashtra Undertaking)****Regd. Office: Acharya Donde Marg, Parel, Mumbai 400 012. (INDIA)****Phone No : 022 – 24129320 - 23****Managing Director : 022-24150628****General Manager-(Procurement Cell):  
022-24100478****Website : http://www.vaccinehaffkine.com****E-mail : procurementcell@haffkinemumbai.com****No. १५७५/Haffkine/Procurement Cell/ DMER/ C-149/  
RT-4175/ 2 ACT (Adult)Kit(2020-2021)****Date:- / / 2022****(प्र.मा.निधी - ११३.५९ कोटी/-)****(2020-2021)****05-20-9-2022****To,****M/s.UNICURE INDIA LTD.****UNIT-1 C-21, 22&23, SECTOR-3,****NOIDA-201 301, DISTT. G.B.NAGAR (U.P)****UNIT-2 46-B, VILLAGE RAIPUR,****ROORKEE DEHRADUN ROAD,****BHAGWANPUR-247661 ROORKEE****(DISTT.HARIDWAR) U.K****Email ID: - [unicure@airtelmail.in](mailto:unicure@airtelmail.in)****Sub: - Supply of 2 ACT (Adult)Kit****Ref: - 1. Tender No. RT-4175/Medicines (Retendered) 2020-2021****2. Sanction of Tender Approval Committee Meeting Dated: 05/04/2022****3. प्रशासकीय मान्यता:- शासन निर्णय क्रमांक:-वैशिवि -२०२० / प्र.क्र. २२७ /  
प्रशासन-२, दिनांक:- ०३ नोव्हेंबर, २०२०, (प्र.मा.निधी - ११३.५९ कोटी/-)****4. प्रशासकीय मान्यता:- शासन निर्णय क्रमांक:-वैशिवि -२०२० / प्र.क्र. २२७ /  
प्रशासन-२, दिनांक:- २३.१२. २०२१, (प्र.मा.निधी - ११३.५९ कोटी/-)****5. सुधारित प्रशासकीय मान्यता - शासन निर्णय क्रमांक : - वैशिवि -२०२०/ प्र.क्र.२२७/  
प्रशासन-२ दिनांक:-२५.०८.२०२२, (प्र.मा.निधी - ११३.५९ कोटी/-)**

With reference to the tender cited under reference no 1 your online bid has been accepted. Accordingly you are requested to supply the following goods as per details mentioned below to consignee list enclosed with this order.

Tender & Item No.	Name of the item	Specification of item	Quantity (DMER)	Unit Rate including all taxes (Rs.)*	Total Amount including all taxes (Rs.)*
RT-4175 (32)	Kit 2 ACT (Adult)	WHITE COLOR Total dose of Artesunate-600 mg divided over three days,Sulphadoxine pyremethamine-(1500+75)mg single dose Each Combi Blister Pack containing 3 Tablets of Artesunate(each 200 mg)and 2 Tablets of Sulphadoxine pyremethamine-(750+25)mg each or 3 Tablets of Sulphadoxine pyremethamine(500+25)mg each Each row-No.of Tablets: First Row(Day 1):One Tablet of Artesunate(200mg)and two Tablets of Sulphadoxine pyremethamine-(750+37.5)mg each or three Tablets of Sulphadoxine pyremethamine-(500+25)mg each Second Row(Day 2):One Tablet of Artesunate(200mg) Third Row(Day 3):One Tablet of Artesunate(200mg) -for adults i.e 15 years&above Tablet Artesunate:Two years Tablet Sulphadoxine pyremethamine Two years. Each pack will bear shelf life of 2 years on the pack with manufacturing and expiry date.	316	42.99/- (Per Strip)	13,585/-

**Total amount in words- Thirteen Thousand Five Hundred Eighty Five Only/-**

- Packing & Forwarding:** As Per Annexure-C of Tender Document enclosed herewith &Forwarding Free on Road Destination. i.e. door delivery basis
- Delivery Period:** 45 days from the date of receipt of order by the supplier to the consignee attached.
- Risk purchase clause:** If the bidder fails to supply the stores within the stipulated delivery period inclusive of period with penalty, the order will stand cancelled. Undersigned shall be entitled to purchase such stores from any other source at such price which ordinarily should not be more than 10% of the tender price, unless

**RT-4175/ Item Name: - 2 ACT (Adult)Kit**

otherwise properly satisfied by purchasing officer. The extra expenditure in such cases shall be recovered by Managing Director, Haffkine Bio Pharmaceutical Corporation Ltd. (Procurement Cell), Mumbai from the Supplier inclusive of recovery by Revenue recovery procedure.

4. **Payment Terms:** 100 % Payment shall be paid on receipt & acceptance of stores in good conditions by the consignee
5. **Labeling:** The word “**For use of GOVERNMENT OF MAHARASHTRA NOT FOR SALE**” should be printed on each unit pack in readable Purple or Green Colours. Bar-coding should be on boxes of Supplied item at Consignee level.
6. **Acceptance & Receipt:** In prescribed format enclosed .It should be submitted in Original Certificate copy to the purchasing authority along with triplicate copies of the Invoice.
7. **The Consignees upon Receipt of the material should issue acceptance certificate within 7 days of receipt of material in two copies. One copy should handed over to Supplier and One Copy should be sent to Haffkine Bio-Pharma(Procurement Cell)By mail or email. (Email ID- procurementcell@haffkinemumbai.com)**
8. **Invoice copies should be submitted triplicate consignee wise with one consolidated invoice. Analysis Report** Manufactures should submit copy of Drugs analysis report to each consignee for each batch supplied with copy of the same along with invoice to Managing Director, Haffkine Bio Pharmaceutical Corporation Ltd. (Procurement Cell), Mumbai.
9. **Delivery Challan** – Should be sent in the name of consignee in duplicate. It should specify Name of Drugs/ Mfg. by / Expiry Date / packing & quantity.  
**Invoice Copy** – Should be sent in triplicate on the Name of Managing Director, Haffkine Bio Pharmaceutical Corporation Ltd. (Procurement Cell), Mumbai
10. **Other Terms:** As per Tender terms & conditions  
**Fall Clause:** It is a condition of the contract that all through the currency thereof, the price at which you will the supply stores should not exceed the lowest price charged by you to any customer during the currency of the rate contract and that in the event of the prices going down below the rate contract prices you shall promptly furnish such information to us to enable to amend the contract rates for subsequent supplies.
11. You are requested to submit following within 15 days from receipt of this letter.
  1. Sign and submit the agreement attached herewith on Stamp paper.
  2. Submit the Bank Guarantee of **Rs. 408/- (3% of total value)** from Nationalized /Scheduled commercial bank in favor of Haffkine Bio-Pharmaceutical Corporation Ltd, Procurement Cell, Mumbai Validity of the Bank Guarantee should be minimum for the period 2 months from the date of expiry of warranty or expiry of medicine/item.
  3. Submit an amount of **Rs. 204/- (1.5% of order value)** in the following account.

Name of Account	Name of Branch Account	No. of account	IFSC Code
HAFFKINE BPCL Procurement Cell CESS Account	Bank Of Maharashtra, Branch-Mumbai Parel	60381379835	MAHB0000079

Invoice copies should be submitted triplicate consignee wise with one consolidated invoice

Consignee : As per list enclosed.  
Mfg License No. : Form no 25&28 30/UA/2006  
30/UA/SC/P-2006 Valid upto-31.12.2026  
Location of Factory : M/s.UNICURE INDIA LTD.  
UNIT-1 C-21, 22&23, SECTOR-3,  
NOIDA-201 301, DISTT. G.B.NAGAR (U.P)  
UNIT-2 46-B, VILLAGE RAIPUR, ROORKEE DEHRADUN ROAD,  
HAGWANPUR-247661 ROORKEE  
DISTT.HARIDWAR) U.K

मा. व्यवस्थापकीय सल्लाह केंद्राच्या माध्यमातून व करिता

**Dr.Sadanand Bhise**  
**(General Manager-I)**

**Haffkine Bio-Pharmaceutical Corporation Ltd.,**  
**(Procurement Cell), Mumbai-1**

- Copy to: 1) Director of Medical Education & Research, Mumbai  
2) Director of Health Services, Mumbai  
3) Accounts Manager, Haffkine Bio Pharmaceutical Corporation Ltd.(Proc. Cell), Mumbai  
4) Office File

Copy to Consignee:

They should accept Drugs as per order & entry of the stock is to be taken in stock register as well as in e-Aushadhi.

Copy Submitted to: 1) Secretary, Medical Education and Drug Department, Mantralaya, Mumbai