

OFFICE OF THE MISSION DIRECTOR NATIONAL HEALTH MISSION Saikia Commercial Complex, Srinagar Path, Christian Basti, GS Road, Guwahati – 5 Ph. No. 0361-2340236: Fax No. 0361-2340238 website-www.nrhmassam.in

Expression of Interest (EOI) for Hiring of Office Space for office of the NHM, Assam

National Health Mission, Assam invites Expression of Interest for hiring of office space for the office purposes of NHM, Assam. The requirement is approximately for 40,000 to 45,000 Sq.ft carpet area in a single multi storied R.C.C building with parking facility for minimum 40 vehicles and around 25 two wheelers, preferably located in the vicinity of Dispur within Guwahat city. Preferably with easy accessibility to the Assam Secretariat at Dispur. Interested party may submit their EoI with requisite documents up to 2.00P.M.on 20.10.2017. For details visit www.nrhmassam.in

Requests received against the EOI shall be processed in two parts (Technical & Financial).

Last Date & Time of Receipt of EOI : Up to 2.00P.M on 20.10.2017

Date & Time of opening of EOI : 3.00P.M on 20.10.2017

Place of opening Eol.: Office of the Mission Director,

National Rural Health Mission,

Saikia Commercial Complex,

Srinagar Path, Christianbasti,

G.S Road, Guwahati-781005,

Assam.

Address for Communication: Mission Director, National

Rural Health Mission, Saikia Commercial

Complex, Srinagar Path, Christianbasti, G.S.

Road, Guwahati-781005, Assam.

A. TERMS AND CONDITIONS TO BE SATISFIED:

- 1. The successful party will be declared as 'the lessor' which means and includes not only the party but also his legal heirs, successors, successors in office, legal representatives.
- 2. Any change in the ownership of the premises shall be notified forthwith by the lessor to the lessee in writing and such change shall not relieve the succeeding owner of liabilities under this contract.
- 3. In case a particular party owns more than one premises and he wishes to submit EoI in respect of those premises, he should submit separate EoI containing technical document and price quotation in respect of each premises.
- 4. In case of co-owners/joint owners, the technical document & Price quotation should be signed by all the co-owners/joint owners. In case any one of the owners chooses to sign the EoI documents, he should invariably submit an authorization to do so from the remaining owners.
- 5. Accommodation offered should preferably not be more than 15 years old building and should be located in an around Dispur area with easy accessibility from Assam Secretariat.
- 6. The building in which office space is offered should preferably be on the main road having all basic amenities like proper electricity and water connection/facilities, adequate fire protection system as per local authority requirements etc. The building should have separate electricity and water connections. Sufficient wiring and metres should be in place to take up electricity load for air conditioning of the premises and to run computers and other equipments.
- 7. In case of damage to the leased property due to any natural calamities, rioting etc, National Health Mission, Assam will not undertake to compensate the loss or damage incurred by the owner of the property.
- 8. The EOI will be acceptable from the original owner/lease holder /power of attorney holder of the building/property or their authorized agents. The lease deed would however be executed by the original owner / lease holder. The lease deed would be executed after the verification of documents by National Health Mission, Assam.
- 9. The National Health Mission, Assam will not make any security deposit or any brokerage for the offered property under any circumstances.
- 10. The lease rental shall be subject to TDS as per the provisions of the Income Tax Act in force.
- 11. For the carpet area measurement a certificate from the registered architect or any government authority should be submitted along with the technical document.
- 12. The premises should be clean, airy termite/rodent free.
- 13. EOI not conforming to these requirements shall be rejected and no correspondence will be entertained in this regard whatsoever.

- 14. After opening of the technical document and before evaluation of the same, the Committee constituted by the lessee (National Health Mission, Assam) shall inspect the premises and ascertain its suitability for the purpose of setting up the office. In case the committee finds the premises not suitable for the purpose of setting up of the office, the technical document submitted by such a owner will not be evaluated and the Price quotation of the owner will not be opened. The decision of the committee in this matter will be final.
- 15. National Health Mission, Assam reserves the right to shortlist any offer or reject any offer or cancel the requirement altogether without assigning any reason thereof.
- 16. Overwriting, alterations, if any, in the document should be signed by the authorized signatory.
- 17. Possession of the accommodation in the ready-to-move-in condition will be handed over to National Health Mission, Assam within 15 days from the date of signing the contract. The rent would be payable from the date of actual possession of the hired property.

B. The Following documents should be submitted along with EOI Document:

- i) Documents in support of ownership of building / Land and construction thereon.
- ii) Copy of PAN No. of original owner of premises.
- iii) Proof that the applicant is the original owners or lease holders or power of attorney holders or authorized agents of properties.
- iv) Certificate of authorized signatory from CEO, if the owner is a firm, Society etc.
- v) An affidavit swearing that the space offered is free from any liability and litigation with respect to its ownership, lease/renting and that there is no pending payments against the same.
- vi) No Objection Certificate/clearance certificate from all relevant Central/State Government and Municipal authorities, including Fire Department, for commercial/institutional/office / dual use of the property.
- vii) Copies of approved plan of the accommodation offered.
- viii)Attested/self-certified copy of completion certificate issued by the competent authority.
- ix) Proof / certificate from the authorized registered architect certifying the carpet area of the space offered for hiring.
- x) Updated copies of all Municipal/other applicable tax receipts.
- xi) Municipality Holding No

C. Instructions to bidders and evaluation criteria:

- 1) Building offered must be free from all encumbrances, claims and legal disputes etc. Documentary Proof of ownership of Building, payment of all Taxes, Duties, Dues, etc. must be submitted along with this EOI Document.
- 2) Selected party shall be required to sign a Rent Agreement with the National Health Mission, Assam, in accordance with the provisions of the law applicable. The Agreement shall be signed initially for a period of Three years and renewed further as per the requirements of the user and with mutual consent.
- 3) Monthly rent should be quoted initially on a fixed basis for a period of three years. Incremental/Decremented rates of rent for the extended period may also be indicated in percentage terms.
- 4) Intending Parties may furnish complete details in the Questionnaire given in **Annexure -I** and details as per **Annexure-III** of this document.
- 5) All existing and future rates, taxes including property taxes, assessment charges and other outgoings whatsoever of description in respect of the said premises payable by the owner thereof, shall be continued to be paid by the landlord.
- 6) Matters relating to external electrification, such as transformer, load sanction, security etc. shall be the responsibility of the owner. NHM shall be responsible for internal electrification only.
- 7) National Health Mission, Assam shall pay charges in respect of electric power, light and water used on the said premises during the lease period.
- 8) Govt of Assam, Health and Family Welfare Department may, at any time during the period of the rent /extended rent Period make such internal alterations to the existing buildings such as partitions, office fixtures and fittings as may be easily removable.

i) TECHNO-COMMERCIAL BID -

Interested parties should submit the complete Expression of Interest document, including annexure - I and II duly filled in and ink signed at the bottom of each page, in token of having accepted the terms and conditions. These documents as well as additional information and the documents called for in EOI document should be sealed in an envelope superscripted: TECHNICAL DOCUMENT FOR OFFICE ACCOMMODATION UNDER NHM,ASSAM.

ii) **PRICE BID**

Price Quotation for monthly rent (both in figures and words), in lump sum strictly as per Annexure-III, may be put in second envelop duly sealed and superscripted: **PRICE QUOTATION FOR MONTHLY RENT FOR OFFICE ACCOMMODATION UNDER NHM, ASSAM.**

Both this envelops may then be put in another bigger separate cover. This third cover may also be sealed and bear superscription:

"EOI FOR OFFICE ACCOMMODATION UNDER NHM, ASSAM.

- 9) The EOI offer should be sent either by speed post or may be submitted in drop box so as to reach Offices of the Mission Director, National Health Mission on or before 2 PM on 23.08.2017.
- 10) Requests received against the EOI shall be processed in two parts. All information and documents furnished in response to this invitation including Annexure I shall be deemed to be a technical offer. In the event prices are indicated by the party in the Technical document, the EOI request shall stand rejected. Details furnished in the Technical Offer shall be assessed/evaluated. Price quotation of only those bidders/Parties shall be opened on a later date whose Technical Offers are found acceptable and suitable by the committee.
- 11) Rent charges shall be paid at the fixed rate as per the Lease Agreement entered into with the party on the Terms & conditions mutually agreed.
- 12) In the event of Technical offer being found acceptable, the selected party will be required to furnish the original copy of the Title Deed of the Property along with proof of identity of the owner along with photograph(s) before the price bids are opened. Original Documents shall be returned after decision is taken to open price bids or otherwise.
- 13) Quoting parties may keep their offer valid for a period of 90 days. Offers with a shorter validity or inconsistent with the requirements set out in this EOI shall be ignored summarily and no representation in this regard shall be entertained by this Department
- 14) The "Price quotations for monthly rent for accommodation of office under National Health Mission, Assam of the selected technical offers only will be opened.
- 15) The decision of the National Health Mission, Assam will be final and cannot be challenged.
- 16) If any special offers, additional facilities are there from the owner's side that may be mentioned as separate attachment.

Annexure-I

| 1. | Name of Person / Party holding Title to the Property: | |
|---------|---|------------------|
| 2. | Nationality of the Owner: | |
| 3. | Full Postal Address of Property with PIN code: | |
| 4. | Total Carpet Area in Sqr feet (Floor wise) | |
| 5. | Contact Details Name : | |
| Mobile | e e | |
| No: Fa | x: | |
| E-mail | l: | |
| 6. Esse | ential Documents Furnished (please tick mark the correct option) | |
| (I) Cop | by of TITLE DEED OF THE PROPOSED PROPERTY: | YES / NO |
| (II)Co | py of building plan : | YES / NO |
| PLEAS | SE INDICATE: | |
| (I) Wh | nether it is an Independent Building for exclusive use of office office purpo | ose under NHM |
| Assam | without sharing | YES /NO |
| (II) | | General |
| Amen | ities / Toilets available on each floor : | YES / NO |
| (V) Pa | rking Space for 40 Vehicles & 25 Two wheelers: | YES / NO |
| (VI) N | umber and Area Of Cabins / Rooms already built up : | YES /NO |
| (if yes | , please attach details) | |
| (VII)A | ny Temporary Structure Built up with area of each such Structure: | YES / NO |
| (VIII) | Whether proposed building is free from all Encumbrances, Claims, Litigation | ons: YES / NO |
| (IX)W | hether proposed building is PHYSICALLY VACANT / READY TO OCCUPY: | YES / NO |
| (X) W | hether all Govt dues, (property) Taxes Electricity, Telephone, Water Bills a | re Paid up as on |
| date o | f Application with : | YES / NO |
| (DOCU | JMENTARY PROOF should be furnished). | |
| (XI)W | ater Storage Tanks fitted on the roof : | YES / NO If |
| yes, V | Vater storage capacity (In Litres) - | |
| (XII) C | Other Information which the Indenting Party wishes to furnish: | |

Annexure -III (Price Quotations)

| `` | TA T | | | | |
|----|------|---|---|---|--|
| al | INI | 1 | m | Δ | |
| | | | | | |

- b) Address(office & residence):
- c) Address of Property offered:

| Sl. No | Brief Description | Total Carpet area | Rent quoted per square | Total amount |
|--------|-------------------|-------------------|------------------------|---------------|
| | | | foot | /Month in Rs. |
| 1 | Property offered | | | |
| 2 | Taxes if any | | | |
| 3 | Any other charge | | | |
| | Total | | | |

Total Monthly rental (in figures inclusive of every charge): Rs. Total Monthly rental (in words inclusive of every charge): Rs. Incremental/Decremented rates of rent for the extended period in percentage:

| α. | |
|-------|----------|
| Signa | tures: |
| JIGHA | itui es. |

Name:

Designation:

Note:

- a. Quote should be covering all taxes and duties.
- b. Total Monthly rental shall be the amount payable by National Health Mission by monthly as rent.
- c. Rates should be quoted in figures and words without any errors, overwriting or corrections and should include all applicable taxes etc. In case of any discrepancy between the amount mentioned in number and words, the amount mentioned in words shall prevail.

Annexure-II

DECLARATION

| s/onereby offer the premises stated in the Annexure i | | | |
|---|--|--|--|
| (Questionnaire) for rent to the National Health Mission, Assam Whatever is stated in the EoI document | | | |
| is true to the best of my knowledge and ability. I have not changed the contents of the EoI document | | | |
| and have duly verified and signed the same. | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Name & signature with stamp (if any) of party or | | | |
| Authorized Signatory | | | |