





## REGIONAL INSTITUTE OF MEDICAL SCIENCES, IMPHAL – 795 004

(An Autonomous Institute under the Ministry of Health & Family Welfare, Govt. of India)

Time schedule of duty

1st shift = 6 am to 2 pm

2nd shift = 2 pm to 10 pm

3rd shift = 10 pm to 6 am

Day shift = 9 am to 5 pm

### Housekeeping/Sanitation

RIMS would outsource the sanitation/housekeeping services pertaining to the Institute Campus on Annual Rate Contract (ARC) basis. The scope of work will be as given below:

- (i) Arranging and deploying sanitation workers.
- (ii) Maintenance of all the surrounding areas of Administrative block, Jubille Hall, Morgue, Stretch from Entrance gate to Jubilee Hall and other places as and when need arises.
- (iii) Providing round the clock sanitation maintenance services of the toilets, baths and urinals etc. and also keep them neat and clean to the satisfaction of the institute. These services include:
  - Ensuring cleanliness and hygiene of the hospital, college buildings and hostels etc. This includes maintenance of the WCs, Baths and Urinals as per details given below:-

	Hospital Complex	College Building And Hostels
WCs	270	250
Baths	30	150
Urinals	90	100

- An amount of **Rs 50,000/-** (Fifty thousand)per month will be spent by the contractor for provision of sanitation items/equipments.

Total No. of sanitation staff to be engaged

45 (Fortyfive) Nos. SWs and 05 (Three) Nos. SSs. Total of 50(fifty) personnel.

### REGIONAL INSTITUTE OF MEDICAL SCIENCES TENDER FOR SECURITY AND SANITATION ARRANGEMENTS AT IMPHAL, MANIPUR

(A)

- (i) **Cost of Tender Papers** Rs. \_\_\_\_\_(Rupees\_\_\_\_\_ ) only received vide Cash Receipt No. \_\_\_\_\_ Dated \_\_\_\_\_



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(ii) Tender issued to: Address \_\_\_\_\_

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

Telephone No.

Chief Security Officer,  
RIMS, Imphal

(B)

**EARNEST MONEY DEPOSIT INFORMATION**

Earnest Money for Rs. \_\_\_\_\_ (Rupees \_\_\_\_\_)  
deposited either in the form of Demand Draft No. \_\_\_\_\_ dated \_\_\_\_\_ drawn on  
\_\_\_\_\_ in favour of Director, Regional Institute of Medical Sciences,  
Imphal.

Signature of the Tenderer

Date: \_\_\_\_\_

**NAME OF THE WORK - TENDER FOR THE WORK OF PROVIDING SECURITY AND SANITATION ARRANGEMENTS AT RIMS, IMPHAL, MANIPUR**

Sl.No.	Description	Pages
1.	Cover Page	
2.	Contents	
3.	Appendix Summary Sheet and General Terms & conditions and N.I.T.	
4.	E.M.D and./or Tender Paper Cost :	
5.	Schedule of Rates	
6.	Schedule of work done by the Contractor	
7.	Number of enclosures	

Signature of the Tenderer.



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### SCHEDULE OF RATES

(Security and Sanitation separately along with Rs 50,000/-(Fifty thousand) for monthly purchase of sanitation items/equipments)

1. Name of the Contractor

2. Details of \_\_\_\_\_ to be deployed and rate of the following category of workers

Sl.No.	Description	Rate/month (for one person)
1.	Basic + D.A.	Rs.
2.	Provident Fund(EPF)	Rs.
3.	ESI %	Rs.
4.	Bonus	Rs.
5.	Gratuity	Rs.
6.	Any other	Rs. Rs.
		Total: Rs.
7.	Leave/Off/National Holiday(Leave Reserve)	Rs.

A. Total Rs.

8. Service Charge on 'A' Rs.

B Total Rs .

9. Service Tax on 'B' Rs.

Grand total:

1. Total per month \_\_\_\_\_ Per person  
(Rupees in words) \_\_\_\_\_

Signature of Contractor  
with Stamp

Date:

**NB. Wages for Commander/Security Officer should be decided by the Agency.**



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**SCHEDULE OF WORK DONE BY THE CONTRACTOR**

( The Contractor shall fill this and enclose it with original copy of tender)

1. Name of the Contractor -
2. Firm of the Contractor -
3. The Telephone No.(Official)
4. Official address -
5. Residential address -

If the firm limited - Yes/No. -

Give the name and address of the Partners -

Name	Address
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- a)
- b)
- c)
- d)

Partnership deed during the  
Bankers power of attorney Please enclose with tender

M/s.  
Enclose attested copy/  
Original power of  
attorney

Name & Address of persons holding  
Power of attorney

Name .....

Address .....

Specimen signature of persons  
Holding power of attorney



## **REGIONAL INSTITUTE OF MEDICAL SCIENCES, IMPHAL – 795 004**

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A. Details of registration under DG (resettlement), GOI  
(attested copy of the registration document to be enclosed)

- a. Date of registration
- b. Registration No.
- c. Valid upto

B. IF THE ORGHANISATION REGISTERED UNDER  
GENERAL LABOUR ACT (IF YES GIVE THE  
FULL PARTICULARS)

- a) Registered with
- b) Registration No.
- c) Finance and other limit  
Up to which registered
- d) Bank guarantee etc. in detail
- e) Registered for deployment of

Signature of the Tenderer

Copies to be endorsed with Tender document

1. Registration with Central Labour Commissioner of the Jurisdiction
2. ESI Registration
3. EPF Registration
4. Service-Tax Registration
5. PAN Card copy
6. Copy of past experience
7. Order Copy of present work