



# PUNJAB HEALTH SYSTEMS CORPORATION

E-Block, 2<sup>nd</sup> Floor,

Punjab School Education Board Complex

Phase-VIII (Sector-62), Sahibzada Ajit Singh Nagar (Mohali), PUNJAB

Visit us at: [www.punjabhealth.co.in](http://www.punjabhealth.co.in) :

email : [procmedicinephsc@gmail.com](mailto:procmedicinephsc@gmail.com), [proc.directorphsc@gmail.com](mailto:proc.directorphsc@gmail.com), [managerprocphsc@gmail.com](mailto:managerprocphsc@gmail.com)

No. PHSC/Proc./RC-EDL/2022/4111-4124

Date:- 30-12-22

## RATE CONTRACT FOR SUPPLY OF ESSENTIAL DRUGS VALID FOR TWO YEARS FROM THE ISSUE OF LETTER

To

M/s Zest Pharma.,  
Plot no. 275, Sec-F, Sanwer road,  
Indore-452015 (M.P.)  
Email:- [info@zestpharma.in](mailto:info@zestpharma.in)

Subject: Regarding e-tender for Medicines against bid reference no. e-tender/PHSC/Proc/RC/Medicines/2022/26- EDL-Package-I- Clause 4 of General Terms and Conditions for Running Rate Contract.

Sir,

You are hereby informed that your above referred bid has been accepted for the items specified below. The Rate Contract will be governed by the terms and conditions of the tender document. Please note that this Rate Contract is being finalized relying upon the documents submitted by your company establishing the eligibility as per tender conditions, however if at any stage it is observed that your company does not meet/fulfill the eligibility criteria or your company has submitted any false statement or fabricated documents, the Rate Contract will be liable for cancellation and further action will be initiated against your firm as per tender conditions. This Rate Contract will be governed by Terms and Conditions annexed and bid document. The Rate contract and the schedules annexed hereto shall be the sole repository of this Rate Contract/ transaction:-

Sr. No.	Item Code	Name of the Medicine/ Item	Unit Pack Size	Drug License No.	Rate Without Tax (INR)	GST (INR)	Rate with Tax (INR)	Capacity to supply		
								30 days	45 Days	60 Days
1.	EDL-93	Syp Amoxicillin 250 mg/5 ml (60 ml Bottle) Dry Syrup	60 ml bottle	Form 25-25/4/94, Form 28-28/2/94	20.57	2.47	23.04	6 Lakh Bottles	9 Lakh Bottles	12 Lakh Bottles

A.	<b>Particulars of supplier agent/distributors</b>	:	M/s Instimed India, Karnal  The Rate Contract holder is principal manufacturer and is at full liberty to supply the material directly irrespective of appointment of agent/ distributor. However if the manufacturer wants to change the agent/ distributor, the manufacturer may do so upon written request to Managing Director, PHSC and after seeking approval from the Managing Director, PHSC.
----	---	---	--

B.	<b>Mode of placement of orders and correspondence</b>	<p>The Orders will be placed through online portal i.e. <a href="https://eaushadhipb.in">https://eaushadhipb.in</a> or e-mail :-</p> <p><b>M/s Zest Pharma.,</b>  <b>Plot no. 275, Sec-F, Sanwer road,</b>  <b>Indore-452015 (M.P.)</b>  <b>Email:- <a href="mailto:info@zestpharma.in">info@zestpharma.in</a></b></p> <p><b>Note:</b> If there is any variation in the address of principal manufacturer or agent/distributor than request for amendment/correction in address should be made in writing to the Director (procurement), PHSC, SAS Nagar within seven days from the issue of this Rate Contract approval letter. All correspondence with PHSC H.Q in respect to the Rate Contract should be addressed to the following email:-  <a href="mailto:procmedicinephsc@gmail.com">procmedicinephsc@gmail.com</a>, <a href="mailto:managerprocphsc@gmail.com">managerprocphsc@gmail.com</a>  and <a href="mailto:proc.directorphsc@gmail.com">proc.directorphsc@gmail.com</a></p>
C.	<b>Others</b>	Terms & Conditions attached herewith.
D.	<b>Note</b>	The Rate contract is issued to your company as L1 bidder. However as per the terms and conditions of the tender, consents are being sought from other bidders for matching L1 rates as per tender conditions. The orders will be placed accordingly with L1 bidder and L1 matched bidders as per the terms and conditions of the Contract.

*Ames*  
20.12.22  
**Director (P)**  
**PHSC, SAS Nagar**

Copy forwarded to :-

- 1) **The Mission Director**, National Health Mission (NHM) Punjab, Prayas Building, Sector-38, Chandigarh for kind information.
- 2) **The Director Health Services**, Punjab for kind information.
- 3) **The Director Family Welfare**, Punjab for kind information.
- 4) **The Director Health (SI)**, Punjab for kind information.
- 5) **The Director (F), PHSC, SAS Nagar.**
- 6) **All the Civil Surgeons** in the State of Punjab with request to circulate the copy to all the SMO's of PHSC Hospitals in their district.
- 7) **The Medical Superintendent**, CH-Jalandhar/MKH Patiala for information.
- 8) **All the Deputy Medical Commissioners** in the State of Punjab for information.
- 9) The Warehouse l/c Regional Warehouse of PHSC, Kharar (SAS Nagar), Bathinda and Verka (Amritsar) for information and necessary action.
- 10) The System Analyst, PHSC for uploading the RC on the website of PHSC.
- 11) The Programme Officer, MHC O/o DHS, Punjab
- 12) The In-Charge, IT Cell, PHSC, Sahibzada Ajit Singh Nagar, Mohali for information and necessary action.
- 13) The Accounts Branch, PHSC for information and necessary action.