

GOVT. MEDICAL COLLEGE HOSPITAL, SECTOR –32, CHANDIGARH
PHARMACY DEPARTMENT

Public Notice for registration of manufacturing firms

The hospital is interested in registration of manufacturing firms for the supply of Drugs/Dressing material for period of two years. The firms interested to be registered on the list of approved Drugs/Dressing material of Govt. Medical College Hospital, Sec-32, Chandigarh should apply to the undersigned on or before due date i.e.27.02.2012.

The prescribed format/details/Instruction for filling up the form can be obtained from the following official website of GMCH-32, Chandigarh:

1. www.gmch.gov.in or from office of Incharge Pharmacy on any working day.

The firms already supplying Drugs/Dressing materials to the GMCH-32, Chandigarh and are on approved list also need to apply afresh for the renewal of their approval.

Note: The firms which have already applied for the Registration vide Public Notice published on dated 13.08.2011 & 27.09.2011 need not to apply again.

Medical Superintendent,
for Director Principal,
Govt .Medical College Hospital,
Sector-32, Chandigarh.

GOVT. MEDICAL COLLEGE HOSPITAL, SECTOR -32, CHANDIGARH
PHARMACY DEPARTMENT

Form for registration of firms supplying Drugs and Dressing Material

- NOTE: A) Please read the instructions carefully before filling the form
B) No application shall be entertained after the closing date
C) No application shall be processed without the requisite fee

1. Name of firm: _____
2. Official Address: _____
3. Correspondence Address: _____

4. Name of sister concern(s) if any along with the addresses : _____

5. Name of CEO /M.D along with phone no. & email:

6. Organization of the firm. –
[Attach an Organization Chart giving names of the department i.e. Production, Quality Control, Stores, Inventory control, planning and development, Engineering etc. including whether it is a small/medium scale industry of Indian or multinational origin along with proof and Company's brochure/ product list].
7. Number of years of standing of the firm in the drug manufacturing sector
(Required -minimum 3 years) Date of inception _____
8. Annual Turnover for last three years (Required -minimum 1 crore for each year).
 - a) 1st preceding year _____
 - b) 2nd preceding year _____
 - c) 3rd preceding year _____[Attach Balance sheet for each year duly signed by the Chartered Accountant].
9. Company's list of drugs/ product formulations along with complete specifications, packing and other relevant details.[Attach details].
10. Details of the Drug Manufacturing License
 - a) Name of the issuing authority _____
 - b) Date of enforcement of license _____
 - c) Date of validity of license _____

11. Details of Good Manufacturing Practice (GMP) certificate under revised Schedule- M of the Drug and Cosmetic Act 1940.

a) Name of the issuing authority_____

b) Date of enforcement of license _____

c) Date of validity of license _____

12. Details of the Quality Assurance Certificate (WHO-GMP,ISO -etc)

a) Name of the issuing authority_____

b) Date of enforcement of license _____

c) Date of validity of license _____

13. List of Govt/Autonomous/ Private hospitals(required- minimum 100 bedded) to which the firm has supplied/supplying the Drug/Drugs. [Attach details].

14. Any other information_____

15. Registration fee (non refundable) details : Amount Rs 5000/- DD Drawn at

No. _____

Dated _____ in favour of Director Principal, Government Medical College Hospital, Sector-32, Chandigarh.

UNDERTAKING

I (name)_____ on behalf of the above said firm, being a authorized _____ signatory(designation)_____

_____ of the firm undertake that an Analytical report from the Govt Analysis Laboratory/Govt Approved Laboratory/Approved R&D section for current batch of each drug supplied will be provided along with the supply of Drugs & Dressing Materials. The firm shall be liable to pay damages arising out of use of Drug supplied if declared substandard, misbranded, spurious or inferior quality by Govt Analytical Laboratory. The firm shall abide by the rules and regulations of the supply including the penalty if any. The firm shall comply with the terms and conditions of the supply as per the Supply order. The above mentioned information is true to the best of my knowledge and nothing has been concealed thereof.

Dated :

Signature
Name & Designation

**FORMAT OF AFFIDAVIT TO BE SUBMITTED
ALONGWITH APPLICATION ON A STAMP PAPER DULY ATTESTED BY THE
AN OFFICER NOT LESS THAN THE RANK OF EXECUTIVE MAGISTRATE**

I (name)_____on behalf of the
_____ firm, being a
authorized signatory(designation)_____ of the
firm do hereby affirm and declare as under:

- 1 No mishap has been reported in last three years by the user hospitals for any of the Drug Manufactured or supplied by the above said firm.
- 2 None of the drugs manufactured or supplied by the above said firm has ever been declared substandard, misbranded, spurious or of inferior quality by Drug Controlling authorities of India in last three years.
- 3 The firm has never been convicted for illegal practices or manufacturing lapses by any court of law in last three years.
- 4 The firm has not been debarred and or blacklisted by any Govt procurement agency in last three years.

DEPONENT

Verified that the above contents of this Affidavit are true and correct to the best of my knowledge and belief and nothing has been concealed therein

DEPONENT

Check list of enclosures:

Sr. no.	Particulars	YES	NO
1	Brochure of firm	<input type="checkbox"/>	<input type="checkbox"/>
2	Annual turn over of last three years	<input type="checkbox"/>	<input type="checkbox"/>
3	Balance sheet to be signed by Chartered Accountant	<input type="checkbox"/>	<input type="checkbox"/>
4	Drug manufacturing License	<input type="checkbox"/>	<input type="checkbox"/>
5	Good Manufacturing Practice as per revised Schedule M	<input type="checkbox"/>	<input type="checkbox"/>
6	Quality Assurance Certificate (WHO-GMP,ISO -etc)	<input type="checkbox"/>	<input type="checkbox"/>
7	List of Govt/Autonomous/ Private hospitals (atleast100 bedded) to which the firm has supplied/ supplying the Drug/Drugs.	<input type="checkbox"/>	<input type="checkbox"/>
8	Affidavit	<input type="checkbox"/>	<input type="checkbox"/>
9	Non-refundable application fee in the form of D.D	<input type="checkbox"/>	<input type="checkbox"/>

INSTRUCTION FOR FILLING UP THE FORM &
Minimal Essential requirement for registration of the firms

Applications are hereby invited for the registrations of the firms for procuring the Drugs & Dressing Material in GMCH-32, Chandigarh. Please read instructions carefully before filling the form. Forms incomplete or not legible or not complying the format of the application form and format of affidavit are likely to be rejected without any further correspondence. Forms not accompanied by non-refundable fee in the form of Demand Draft of Rs 5,000/- in favour of Director principal, Government Medical College Hospital, Sec-32, Chandigarh shall be rejected without any correspondence.

Firms should fulfill the following minimum criteria duly substantiated by documentary proof of their claim:

S.No	Criteria	Minimum requirement
1	Number of years of standing of the firm in the drug manufacturing sector	Three years
2	Annual Turnover for last three years	One crore / year in last three years
3	List of Govt/Autonomous/ Private hospitals to which the firm has supplied/supplying the Drug/Drug material.	At least one Hundred bedded Hospital /Hospitals
4	Drug Manufacturing License	Valid till closing date of application
5	Good Manufacturing Practice (GMP) certificate under revised Schedule- M of the Drug and Cosmetic Act 1940.	Valid till closing date of application
6	Quality Assurance Certificate (WHO-GMP,ISO - etc)	Valid till closing date of application