

TECHNICAL EVALUATION OF BIDS FOR L.P DISPOSABLE ITEMS

Vendor / Firm Name: **M/S NEW BOOTS SUPER PHARMACY**

Passing Marks: 48

REQUIREMENTS / CRITERIA	STATUS	MARKS	MARKS OBTAINED	REMARKS
A) Compulsory Requirements 1. Valid Drug Sale License 2. Situated within radius of 02-KM 3. Refrigeration Facility 4. GST Registration	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			Page NO. 13 Page No. 16
B) Technical Evaluation Criteria 1. Physical Examination of Pharmacy /Medical Store a. A.C Install b. Cleanliness	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/>	05 05 03 01	05 05	
2. Stock position	More than 2-Million <input checked="" type="checkbox"/> Less than 01-Million <input type="checkbox"/> Less than 05-Lac <input type="checkbox"/>	20 10 05	20	
3. Qualified Person	Pharmacist <input checked="" type="checkbox"/> Assistant Pharmacist <input type="checkbox"/> Dispenser <input type="checkbox"/>	10 05 03	10	Page No. 13
C) Past Performance of supplier for Government, Semi Government & Autonomous Department	01 to 03 Institution Served <input type="checkbox"/> 04 to 05 Institution Served <input checked="" type="checkbox"/> Above 05 Institution Served <input type="checkbox"/>	10 15 20	15	Page No. 20-36
D) Financial status a. Bank certificate b. Text Returns (Last Fiscal Year) c. Income Tax Certificate	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	10 05 05	10 05 05	Page No. 42 Page No. 17 Page No. 15
	Total	80	75	Qualified


Mr. Azeem Butt
 Hospital Pharmacist
 PIMH


Dr. Tahir Pervaiz
 Consultant / Chairman
 Technical Evaluation Committee
 for LP Disposable, PIMH



Dr. Ashiq Hameed Butt
 Deputy Medical Superintendent
 PIMH


PREQUALIFICATION CRITERIA

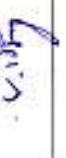
Vendor / Firm Name: M/S FAYROZSONS PHARMA PLUS PHARMACY


PASSING MARKS: 72

REQUIREMENTS / CRITERIA	STATUS	MARKS	MARKS OBTAINED	REMARKS
A) Compulsory Requirements i. Valid Drug Sale License ii. Located within radius of 10-KM iii. Income Tax & GST Registration	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			Page NO. 15 Located within radius of 10-KM Page NO. 45
B) Non-Compulsory Requirements 1) Stock position i. More than 5-Million ii. Between 2-3 Million iii. Less than 01-Million	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	10 05 03	---	No documentary evidence provided.
2) Qualified Person (from drug sale license) i. Pharmacist ii. B-Category	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	10 05	10	Page NO. 15
3) Availability of Qualified Person. (08:00 am to 04:00 pm) (An affidavit on judicial paper Rs.50/- required)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	10	10	Page NO. 03
4) Conditions of Pharmacy i. Cleanliness ii. Air-Conditioner iii. Generator/Jups iv. Refrigerator v. Sale purchase record of Neurotics & Steroids vi. Inspection record by Drug Inspector	Good <input type="checkbox"/> Fair <input type="checkbox"/> Available <input type="checkbox"/> Not Available <input type="checkbox"/> Available <input type="checkbox"/> Not Available <input type="checkbox"/> Available <input type="checkbox"/> Not Available <input type="checkbox"/> Maintained <input type="checkbox"/> Not Maintained <input type="checkbox"/> Maintained <input type="checkbox"/> Not Maintained <input type="checkbox"/>	03 03 03 03 03 03	---	Pharmacy is closed for purpose of renovation.
5) Financial status Annual turnover	More than 10-Million <input type="checkbox"/> Between 5-10 Million <input type="checkbox"/> Less than 5-Million <input type="checkbox"/>	20 15 10	---	No documentary evidence provided.
6) Availability of Computer & Net.	Available <input type="checkbox"/> Not Available <input type="checkbox"/>	10	---	Pharmacy is closed for purpose of renovation.
7) Previous Experience (copies of contract) i. Supplied L.P. in 03 or more than 03 institutes ii. Supplied L.P. in 02 or less than 02 institutes	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	10 05	10	Page NO. 22-38
8) Chain Pharmacy i. 03 or more than 03-branches. ii. 02-branches. iii. 01-branch	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	15 10 05	05	Not Qualified
Total		103	35	


Mr. Muhammad Tayyab
 Hospital Pharmacist
 PIMH


Mst. Shazia Anwar
 Deputy Drugs Controller
 PIMH


Mst. Rifat Naz
 Director Pharmacy
 PIMH


Dr. Abifrag Hameed Butt
 Deputy Medical Superintendent
 PIMH

Dr. Hamid Khalil
 Additional Medical Superintendent
 PIMH

Dr. Tahir Pervais
 Consultant / Chairman
 Technical Evaluation Committee
 for LP Medicines PIMH

PREQUALIFICATION CRITERIA

Vendor / Firm Name: M/S NEW BOOTS SUPER PHARMACY

PASSING MARKS: 72

REQUIREMENTS / CRITERIA	STATUS	MARKS	MARKS OBTAINED	REMARKS
A) Compulsory Requirements i. Valid Drug Sale License ii. Located within radius of 10-KM iii. Income Tax & GST Registration	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			Page NO. 18 Located within radius of 10-KM Page NO. 35,41
B) Non-Compulsory Requirements 1) Stock position i. More than 5-Million ii. Between 2-3 Million iii. Less than 01-Million	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	10 05 03	10	Page NO. 46
2) Qualified Person (from drug sale license) i. Pharmacist ii. B-Category	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	10 05	10	Page NO. 18
3) Availability of Qualified Person. (08:00 am to 04:00 pm) (An affidavit on judicial paper Rs. 50/- required)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	10	10	Page NO. 48
4) Conditions of Pharmacy i. Cleanliness ii. Air-Conditioner iii. Generator/UPS iv. Refrigerator v. Sale purchase record of Narcotics & Steroids vi. Inspection record by Drug Inspector	Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Available <input checked="" type="checkbox"/> Not Available <input type="checkbox"/> Available <input checked="" type="checkbox"/> Not Available <input type="checkbox"/> Available <input checked="" type="checkbox"/> Not Available <input type="checkbox"/> Maintained <input checked="" type="checkbox"/> Not Maintained <input type="checkbox"/> Maintained <input checked="" type="checkbox"/> Not Maintained <input type="checkbox"/>	03 03 03 03 03 03	03 03 03 03 03 03	
5) Financial status Annual turnover	More than 10-Million <input checked="" type="checkbox"/> Between 5-10 Million <input type="checkbox"/> Less than 5-Million <input type="checkbox"/>	20 15 10	20	Page NO. 38,39,46
6) Availability of Computer & Net.	Available <input checked="" type="checkbox"/> Not Available <input type="checkbox"/>	10	10	
7) Previous Experience (copies of contract) i. Supplied L.P. in 03 or more than 03 institutes ii. Supplied L.P. in 02 or less than 02 institutes	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	10 05	10	Page NO. 19-37
8) Chain Pharmacy i. 03 or more than 03-branches. ii. 02-branches. iii. 01-branch	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	15 10 05	05	
Total		103	93	Qualified

Mr. Muhammad Tayyab
Hospital Pharmacist
PIMH

Mst. Shazia Anwar
Deputy Drugs Controller
PIMH

Dr. Hamid Khalil
Additional Medical Superintendent
PIMH

Mst. Riffat Naz
Director Pharmacy
PIMH

Dr. Tahir Pervaiz
Consultant / Chairman
Technical Evaluation Committee
for LP Medicines PIMH

Dr. Asfand Hameed Butt
Deputy Medical Superintendent
PIMH

PREQUALIFICATION CRITERIA

Vendor / Firm Name: M/S PUNJAB MEDICAL SERVICES

PASSING MARKS: 72

REQUIREMENTS / CRITERIA	STATUS	MARKS	MARKS OBTAINED	REMARKS
A) Compulsory Requirements i. Valid Drug Sale License ii. Located within radius of 10-KM iii. Income Tax & GST Registration	Yes <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/>		Page NO. 15 located within radius of 10-KM Page NO. 17,18
B) Non-Compulsory Requirements 1) Stock position i. More than 5-Million ii. Between 2-3 Million iii. Less than 01-Million	Yes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/>	10	
2) Qualified Person (from drug sale license) i. Pharmacist ii. B-Category	Yes <input checked="" type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> No <input type="checkbox"/>	10	Page NO. 15
3) Availability of Qualified Person, (08:00 am to 04:00 pm) (An affidavit on judicial paper Rs.50/- required)	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	10	Page NO. 58
4) Conditions of Pharmacy i. Cleanliness ii. Air-Conditioner iii. Generator/UPS iv. Refrigerator v. Sale purchase record of Narcotics & Steroids vi. Inspection record by Drug Inspector	Good <input checked="" type="checkbox"/> Available <input checked="" type="checkbox"/> Available <input checked="" type="checkbox"/> Available <input checked="" type="checkbox"/> Maintained <input checked="" type="checkbox"/> Maintained <input checked="" type="checkbox"/>	Fair <input type="checkbox"/> Not Available <input type="checkbox"/> Not Available <input type="checkbox"/> Not Available <input type="checkbox"/> Not Maintained <input type="checkbox"/> Not Maintained <input type="checkbox"/>	03 03 03 03 03 03	03 03 03 03 03 03
5) Financial status Annual turnover	More than 10-Million Between 5-10 Million Less than 5-Million	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	20 15 10	Page NO. 20
6) Availability of Computer & Net.	Available <input checked="" type="checkbox"/>	Not Available <input type="checkbox"/>	10	10
7) Previous Experience (copies of contract) i. Supplied L.P. in 03 or more than 03 institutes ii. Supplied L.P. in 02 or less than 02 institutes	Yes <input checked="" type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> No <input type="checkbox"/>	10 05	10 Page NO. 30-48
8) Chain Pharmacy i. 03 or more than 03-branches. ii. 02-branches. iii. 01-branch	Yes <input type="checkbox"/> Yes <input type="checkbox"/> Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/>	15 10 05	05
Total			103	93
				Qualified


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 Hospital Pharmacist
 PIMH


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 Deputy Medical Superintendent
 PIMH

Dr. Hamid Khalil
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