

REQUEST FOR PROPOSAL
FOR
OPERATION AND MAINTENANCE OF FEEDER AMBULANCES
FOR CONVENTIONAL AMBULANCES

Submission of tender online @ www.tender.apecurement.gov.in

ANDHRA PRADESH MEDICAL SERVICE INFRASTRUCTURE DEVELOPMENT CORPORATION

**Request for Proposal for Operational and Maintenance of
Feeder Ambulances for Conventional Ambulances**

ANDHRA PRADESH MEDICAL SERVICE INFRASTRUCTURE DEVELOPMENT CORPORATION

Address: Managing Director,

Plot No:09, survey number: 49, IT Park,

Mangalagiri, Guntur District- 522503

URL: www.tender.apecprocurement.gov.in

Email: aphmhidc@gmail.com & ed.apmsidc16@gmail.com

Telephone Phone: **9121053550, 8978644900**

Tender Enquiry No. 1.8/APMSIDC/2025-26, Dt. 20.05.2025

NOTICE INVITING TENDERS

1. Managing Director, APMSIDC, Mangalagiri, Guntur invites sealed tenders from eligible service providers for operation and maintenance of Feeder Ambulances for the Conventional Ambulances. The scope of services required is enumerated in Section-IV of this document.

2. This document contains eight sections as follows:

1. Section I :Introduction
2. Section II: Instructions to Bidder
3. Section III: Procedures for evaluations of Bids
4. Section IV: Scope of Services
5. Section V: Eligibility Criteria
6. Section VI: Terms and Conditions
7. Section VII: Formats of Appendices (A to F)
8. Section VIII: Format for Service level Agreement

3. Schedule

Sl. No.	Description	Date
1	Document download start date	18-07-2025
2	Website download of Tender Enquiry Document	18-07-2025
3	Pre bid Meeting (Date & Time)	23-07-2025 @ 11.00 A.M
4	Pre-Bid Meeting Venue	Conference Hall, O/o APMSIDC, 2 nd Floor, IT Park, Mangalagiri, Guntur District- 522503
5	Closing Date and Time of Receipt of Tender	11-08-2025 @ 03.00 P.M
6	Time, Date and Venue of Opening of Technical Tender/ Bid	11-08-2025 @ 03. 01 P.M
7	Time, Date and Venue of Opening of Financial Tender/ Bid	Will be intimate later.

4. Interested bidders may obtain further information about this requirement from the above office selling the documents. Tender Enquiry Documents can be downloaded online with a processing fee of Rs. 29,500/- Which is non-refundable fee, in the form of account payee Crossed Demand Draft, drawn on a scheduled bank in India, in favour of Managing director, APMSIDC" payable at Guntur.
- 5.All prospective bidders may attend the Pre-bid meeting. The venue, date and time are indicated in Schedule of Events as in Para 3 & 4 above.
- 6.Bidders shall ensure that their tenders, complete in all respects, are uploaded **online in (tender.apecprocurement.gov.in)** on or before the closing date and time indicated in the Para 2 above, failing which the tenders will be treated as late tender and rejected. The technical bid of the uploaded documents must be submitted to the above said address on or before the closing date & time indicated in Para 2 above, failing which the tenders will be treated as late tender and rejected.
- 7.In the event of any of the above-mentioned dates being declared as a holiday /closed day for the purchase organization, the tenders will be sold/received/opened on the next working day at the appointed time.
- 8.The Tender Enquiry Documents are not transferable.
9. All Tenders must be accompanied by EMD as mentioned against each item. Tenders without EMD shall be rejected.

Managing Director
APMSIDC

SECTION- I

INTRODUCTION

The main objective of the RFP for Feeder Ambulances is to ensure safe, quick and comfortable transportation of pregnant women and attending emergencies licensed in remote, inaccessible tribal areas by the way of fleet of feeder ambulances which will serve in emergency conditions will be a supporting service to the existing 108 services.

The Feeder Ambulance works as a Feeder Vehicle to the conventional Ambulances to increase its access in remote and inaccessible areas and to improve the Emergency Response Services (108 Services) in the remote and inaccessible tribal areas across the 7 ITDA areas of Andhra Pradesh at designated locations.

I. The Components of the Feeder Ambulances consist of

- a) Procure, Operate, and Maintenance of Feeder Ambulances and Services through 108 toll-free number to identify and respond to medical emergencies in remote and inaccessible tribal areas and to support the existing fleet of Conventional Ambulances (108) and Emergency Response Center
- b) The Feeder Ambulances shall be motorbikes with attached patient cabins covering the roof.
- c) Provide advanced Information and Communication Technology for providing quality Emergency Response Services to the people.
- d) Tagging of all Health Facilities for various emergency conditions.

SECTION – 2

INSTRUCTIONS TO BIDDER

1. General Instructions

- a) The Bidder should prepare and submit its offer as per the instructions given in this Section.
- b) The Bids should be complete with all documents duly signed by Authorized personnel. Those submitted by telex, telegram or fax or e-mail shall not be considered.
- c) The Bids /bids should be for all components of the job /service. The Bids that are for only a portion of the components of the job /service shall not be accepted.
- d) The prices quoted shall be firm and shall include all applicable taxes and duties. This shall be quoted **ONLY ONLINE** in the format as per attached Appendix 'F' only.
- e) The Bids (technical and financial) shall be submitted (with a covering letter as per Appendix 'C') before the last date of submission. Late Bids/bids shall not be considered.

2. Earnest Money Deposit (EMD)

- a) The Bid shall be accompanied by Earnest Money Deposit (EMD) INR.10.00 lakhs as specified in the Request of Proposal in the form of Bank Draft / Bankers cheque/Online from any Scheduled Bank in favour of The MD, APMSIDC, Guntur, Government of AP, payable at Guntur.
- b) No Bidding entity is exempted from deposit of EMD. Bids submitted without EMD shall be not considered.
- c) The EMD of unsuccessful Bidder will be returned to them without any interest, after conclusion of the resultant agreement. The EMD of the successful Service provider will be returned without any interest, after receipt of performance security as per the terms of agreement.
- d) EMD of a bidder may be forfeited without prejudice to other rights of the purchaser, if the bidder withdraws or amends its tender or impairs or derogates from the tender in any respect within the period of validity of its tender or if it comes to notice that the information /documents furnished in its tender is incorrect, false, misleading or forged. In addition to the aforesaid grounds, the successful bidders' EMD will also be forfeited without prejudice to other rights of purchaser, if it fails to furnish the required performance security within the specified period

3. Preparation of Bid

The bids shall be submitted online as follows: I. The envelope shall be marked in bold letter as "TECHNICAL BID", which shall be sent forwarding letter ("Appendix-C") and shall include the following:

- a) Processing Fee Rs. 29,500/-
- b) E.M.D of Rs. 10,00,000/- Online/DD/BG/ Banker's cheque towards the cost of tender document to be attached in case bid document has been downloaded from website.
- c) Confirmation regarding furnishing Performance Security in case of award of contract.
- d) Original Bid document duly stamped and signed by the authorized personnel in each page
- e) Particulars of the Bidder as per Appendix 'B'

- f) Income Tax Returns acknowledgement for last three financial years.
- g) Power of attorney in favour of signatory to Bid documents.
- h) Copy of the certificate of registration of EPF, ESI and GST, PAN & TAN with the appropriate authority.
- i) Annual turnover certification / Annual cost of Health Care Services provided for 2021-22, 2022-23, 2023-24.
- j) A declaration from the Bidder in the format given in the Appendix 'F' to the effect that the firm has neither been declared as defaulter or black-listed by any competent authority of a government department, government authorities.
- k) The Bidder shall provide certificate of other similar services provided in private/public sector in last three years and user's certificate regarding satisfactory completion of such jobs as per proforma given in Appendix 'A'. for past performance.
- l) Bidder shall submit the detailed plan for operation and maintenance Emergency Response Services (108 Services). The Price bid shall contain the financial proposal and should be submitted only online The Financial quote shall be for the operational expenditure per month per feeder ambulance. This shall inclusive of Salaries, Vehicle maintenance, Data management, Capital expenditure, Establishment costs if any. Prices shall be inclusive of all taxes, duties, insurances and quoted in the proforma enclosed at Appendix 'D' as per scope of work / service to be rendered.

4. Bid Validity Period

The Bids shall remain valid for 180 days from the date of submission for acceptance and the prices quoted shall remain for the duration of the agreement. The APMSIDC, Mangalagiri, Guntur may request for further extension as deemed fit and the Bidder will send intimation of acceptance or otherwise of request for extension with three days of issue of such request.

5. Bid Submission

The bidders need to scan and upload the required documents. Such uploaded documents pertaining to technical bid need to be attached to the tender while submitting the bids online. The attested copies of all these uploaded documents of technical bid, signed undertaking of tenderer should be submitted off line to Managing Director, APMSIDC, Mangalagiri, Guntur on or before the last date of submission of bids. The Corporation will consider only the bids submitted through on-line over the copies of the paper-based bids. The offer shall contain no interlineations or overwriting except as necessary to correct errors, in which cases such correction must be initialed by the person or persons signing the tender. In case of discrepancy in the quoted prices, the price written in words will be taken as valid.

6. Opening of Bids:

The technical bid will be opened at the time & date specified in the schedule.

SECTION – 3

EVALUATION OF BIDS

1. Scrutiny of Tenders

The tenders will be scrutinized by the selection committee appointed by the authority to determine whether they are complete and meet the essential and important requirements, conditions and whether the bidder is eligible and qualified as per criteria laid down in the Tender Enquiry Documents. The bids, which do not meet the aforesaid requirements, are liable to be treated as non-responsive and may be ignored. The decision of the purchaser as to whether the bidder is eligible and qualified or not and whether the bid is responsive or not shall be final and binding on the bidders. Financial bids of only those bidders, who qualify on technical bid, will be considered and opened.

2. Infirmary / Non-Conformity

The purchaser may waive minor infirmity and/or non-conformity in a tender, provided it does not constitute any material deviation. The decision of the purchaser as to whether the deviation is material or not, shall be final and binding on the bidders

3. Bid Clarification

Wherever necessary, the purchaser may, at its discretion, seek clarification from the bidders seeking response by a specified date. If no response is received by this date, the purchaser shall evaluate the offer as per available information.

SECTION – 4

SCOPE OF SERVICES

1. Work as a Feeder vehicle to Conventional Ambulances to increase its access in remote areas and to improve the Emergency Response Services (108 Services) in the remote areas across the 7 ITDA areas of Andhra Pradesh. Feeder Ambulance consists of the following components.
 - a) Procure, operate, and maintenance of Feeder Ambulance Services through the 108 toll-free number to identify and respond to medical emergencies in remote and inaccessible tribal areas and to support the existing fleet of Conventional Ambulances (108) and Emergency Response Center
 - b) The Feeder Ambulance shall be a motorbike with an attached patient cabin covering the roof.
 - c) Provide advanced Information and Communication Technology for providing quality Emergency Response Services to the People.
 - d) Tagging of all health facilities for various emergency conditions.
2. Operation and maintenance of Feeder Ambulances services include the
 - a) Operation and maintenance of vehicles.
 - b) Maintenance of Medical and ICT equipment in ambulances and replacement with new one in case of permanent non-functional of equipment.
 - c) Providing medical consumables, surgical consumables, etc., required in the ambulance from day to day.
 - d) Providing trained manpower and specified medical equipment and treatment that will stabilize the patients and then transport them to the nearest Conventional Ambulance at identified common spots for shifting from the feeder ambulance to 108 within the shortest reasonable possible time.
 - e) Trained manpower shall include provision of Emergency Management Technician cum Driver in ambulance on 24X7 bases.
 - f) Provide managerial staff at district level, one supervisory officer at the district shall be required.
 - g) Obtain insurances, licenses, and permits as required by the law from the respective competent authorities.
3. Providing advanced Information and Communication Technology includes
 - a) Establish and maintain the online dashboard for monitoring the services provided. This system shall be maintained with due diligence to patient privacy.
 - b) Provision of GPS devices to all the ambulances for tracking and monitoring.
 - c) Provision of appropriate hardware and software for handling the movement of ambulances through geo mapping.
 - d) All the data (including Voice calls), arising from receipt of calls to the call center,

dispatching ambulances, post transport follow up and feedback shall be stored in an exclusive database center.

- e) Every ambulance shall be provided with a tablet/mobile phone with appropriate software application for capturing the details of services provided to the patient in the ambulances and details of health institution to where patient is transported.
 - f) All Feeder Ambulances shall be maintained with the standard logo as provided by the Government. In case of wear and tear to the logo, it shall be replaced with a new logo immediately.
 - g) Shall conduct the periodical trainings to the Driver cum EMTs, and management staff and call center staff. Periodicity shall not exceed a quarter. Training action plan, training material, and methodology shall have prior approval of the Government.
 - h) The service provider is responsible for all the legal disputes arising out of the transportation of medical emergencies. Shall obtain the feedback from the beneficiaries on a regular basis through IVRS system without any manual interference. Target population, questioner and methodology will be provided by the government.
 - i) Shall conduct quality audit on biannual basis through an independent agency identified by the Government.
4. The service provider shall be liable for the safe transport of patients from the Feeder Ambulance to the main Ambulance. The service provider shall be responsible for tele-liaising with main Ambulance service provider call center (108) to ensure that when call comes from locations that are served by Feeder Ambulance, call from 108 call center is routed to dispatch Feeder Ambulance. The Service Provider shall make an agreement with 108 Service Provider for seamless integration of calls, dispatch, and patient transport. The service provider can choose to deploy its call operator at the call center of 108 at mutually agreed costs to have a separate call center interfaced with 108 call centers.
5. The abstract & list of Feeder Ambulance locations by the service provider is attached as Annexure A-I. The Authority can increase the centers as per the requirement.
6. At any given point in time, all Feeder Ambulances shall be on board.
7. A minimum of 98% of the Feeder Ambulances shall transport all the cases assigned by the center.
8. The service provider shall provide for the storage of soft copy and hard copy of all records at their own cost. In case of a change of service provider for any reason, the stored data must be transferred to the new service provider for the continuation of storage.
9. Service Provider shall ensure the best quality of services and shall submit a half-yearly report of the audit done by a third party nominated by the authority.
10. The service provider shall not sell or transfer any proprietary right or entrust to any other third party for Feeder Ambulances. The service provider may, however, shift the case to another

Feeder Ambulance / Vehicle in case of breakdown, ensuring all other conditions pertaining to such as services, reports, records, patient transport, and safety.

11. Service Provider shall arrange for appropriate and adequate signage and IEC (Information education- communication) activities for the community and facility as decided by the authority.
12. The provider shall abide by all the guidelines issued by the Authority and statutory bodies. In case of violation, the contract could be terminated after providing an opportunity of hearing to the contractor, at one month's notice.
13. The Service provider shall be obligated to provide 24X7(round the clock) Feeder Ambulance services.
14. Quarterly review of performance and observance of terms & conditions shall be carried out by a committee nominated by CH & FW and MD, NHM, A.P. The report of this annual review shall form the basis for extension of the contract annually within the contract period.
15. A no-fee receipt shall be provided by the service provider to every patient. A copy of all such receipts shall be submitted on monthly basis by the service provider to the Hospital Authority. This will form the basis of monthly payments by authority to the service provider for the said services. All receipt shall be subjected to a third-party annual audit and the audit report submitted as part of annual work report of the service provider for that facility.
16. The service provider shall take a third-party insurance policy to cover the patients against any mishap during transport and for consequences arising due to reporting error. Conforming to the provision of the consumer protection act shall be the sole and absolute responsibility / liability of the service provider.
17. The obligations of the Service Provider / Firm under this service contract shall include all activities and commitments. The Service Provider is not entitled to levy any charge on the patients. The services shall be provided completely cashless to the patients.
18. All HR shall be recruited and to be trained by the service provider and the staff should be in uniform while attending the duty.
19. The following records shall be maintained on a daily basis physically and digitally) by the service provider as mentioned .
 - a. Daily patients register
 - b. Logbook for record of any breakdown/shut down of the Feeder Ambulance.
20. All HR shall be recruited and to be trained. And they should be in uniform while attending duty.

21. SERVICE LEVEL INDICATORS

- a. Every Medical emergency requested shall be transported from the scene to Conventional Ambulance. There shall not be any single emergency unattended.

- b. If the Health Facility is within 3 to 5 kilometers of site of pick up of patient, such patients may be directly shifted to Health Facility rather than waiting for the conventional 108 Ambulance.
- c. Indicative SLIs are given under.

Sl.No.	Details of the Indicator	Benchmark
1	Number of emergencies transported per ambulance per day	98%
2	Number of ambulances on the road every day	100%
3	Reach time (Number of transportations exceeding SLI shall not be more than 5%)	15 Minutes
4	Availability of Drugs, Surgicals and Consumables etc., (10% buffer to be maintained)	100%

SECTION – 5
ELIGIBILITY CRITERIA

5. Conditions of Eligibility of bidders

5.1. Pre-qualification Criteria

No	Eligibility Criteria	Required Documentary Evidence
1	The bidder shall be a legal entity registered as a Company, Partnership firm, or society or consortium (with maximum of two members). Bidder (Sole/all members of consortium) and all members in case of consortium shall have a registered office in India for not less than 5 years as on 01.04.2025.	License/Registration Certification as per applicable laws of the Government
2	The bidder (Sole/all members of the consortium) or all members in case of consortium shall have registration for EPF, ESI, and GST..	Registered under any State/Central Agency should be submitted to qualify.
3	The bidder (Sole/all members of the consortium) should not be (as of the bid publishing date) blacklisted/ debarred/ suspended/ defaulted by any Central/ State Government /Public Sector Unit for corrupt or fraudulent practices. The promoters/ex-promoters or Directors/ex-directors represented/representing the bidder shall not have any criminal history/ financial irregularities. The bidder shall not have been involved in any proven financial irregularities/ misappropriation of public funds.	Undertaking to this effect to be furnished by the Bidder as an Affidavit.
4	The bidder (Sole/lead bidder jointly with consortium member) must have an average annual turnover of not less than Rs. 50 Cr in during the preceding three financial years 2021-22, 2022-23, 2023-24.	CA Certificate & Audited financial reports / annual reports and Profit & loss statements for the last 3 financial years (i.e., 2021-22, 2022-23, 2023-24)
5	The bidder (Sole/all members of consortium) must have a positive net worth (paid-up Capital/Capital fund) as of the bid date. Demonstrated ability and financial capability/capacity to meet the future demands of the project and for its successful execution.	CA Certificate & Audited financial reports
6	Bidder (sole bidder or any member of consortium) shall have experience in operating and maintaining Feeder Ambulances/Ambulances in any State / Central Government / Public Sector unit under PPP mode in India during the last 5 years.	Work orders/agreements / Service Certificates/certificates duly certified and attested by the department head of the State/Central Government / PSU Organization shall be submitted.

5.2. Evaluation criteria for identification of a successful bidder

5.1.1 Successful bidder will be identified under Quality cum Cost Based Selection Process. A stage evaluation will be taken up for the identification of the successful bidder

5.1.1.1 Pre-qualification

5.1.1.2 Technical Evaluation

5.1.1.3 Financial Evaluation

5.1.2 Bidders who fulfill the pre-qualification criteria mentioned in the above table will be considered for technical evaluation. All other bids will be rejected.

5.2 Technical evaluation criteria:

S No	Domain	Particulars	Criteria	Max Marks
1	Technical Presentation	Technical Presentation on Methodology and Approach for Overall Implementation of Feeder Ambulance Services.	Bidder shall demonstrate the Methodology, Project Deployment Timelines, Project Rollout Plan, GPS/GIS Integration, and Call Center (Design and Integration of necessary Applications, Fleet Management, etc.). Bidder may also present creative/innovative ideas, AI to overcome challenges based on past working experience /past performance in the projects	30 Marks
2	Financial Capacity	Average annual Turnover of 50 Cr in the last three Financial Years (2021-22, 2022-23, 2023-24)	<u>Avg. Annual Turnover:</u> Up to 50 Cr - 5 Marks 50 Cr and above -10 marks	10 Marks
3	Human Resources As of the date of bid submission.	EMT/Paramedical Staff: On the date of bid submission, the Bidder should have up to 500 personnel (EMTs / ANMs / on its payroll as part of Feeder Ambulances/ Ambulances / for any State government / Central Government / PSUs.	Up to 500 Personnel: 2 Mark 500-1000-4 Marks 1000- 1500 -6 Marks 1500-2000-8 Marks And above 2000 -10 Marks	10 Marks
4	Fleet Management: Number of Feeder Ambulances / Ambulances As of the date of bid submission	On the date of bid submission, the Bidder should have been successfully operating and maintaining up to 100 Ambulances/ for any State government / Central Government/ PSUs	Up to 100 ambulances – 5 Marks 100-500- 10 Marks 500-800-15 Marks Above 800- 20 Marks	20 Marks

5	Experience in the healthcare sector in the state of Andhra Pradesh	Bidder should have experience in different healthcare projects in PPP in the state of Andhra Pradesh for the State Government / Central Government units / PSUs.	Two marks for each type of health project/service.	Maximum 20 Marks
6	Registrations of Certifications	Bio-Medical Waste, Drug License with Non-Conviction Certificate (Registration under the Drug License Control Authority and Non - Conviction certificate from the Drug Authorities, Drugs & Cosmetics Act 1940).	5 Marks for each	10Marks

5.3 Evaluation of Technical proposal

- 5.3.1 Technical evaluation of bids (second stage) will be done as per the criteria mentioned in above table . The evaluation committee shall assign proportionate marks as per the evaluation criteria for the proposals received for evaluation and assign the technical marks for each bid (Tb)
- 5.3.2 The bidder should score at least 50 marks to be qualified technically. Based on this technical evaluation, a list of short-listed applicants shall be prepared.
- 5.3.3 The bidders who are technically qualified will be eligible for financial evaluation.

5.4 Evaluation of financial proposal

- 5.4.1 Bidder shall submit the financial quote as per the format given. Based on the financial quote, a financial score will be given with the following formula
- 5.4.2 $SFb = 100 \times Cmin / Cb$
- 5.4.3 where Cb = Price quoted by the Bidder under consideration, and Cmin is the Lowest price bid value

5.5 Selection of the successful bidder

- 5.6 The bidder will be selected based on Quality and Cost based selection (QCBS), with 80% weightage for Technical score and 20% for financial score
- 5.7 The following formula shall be used for calculating the scores:
 - 5.7.1 $Bb = 0.80 \times Tb + (0.20) \times (SFb)$ Where,
 - 5.7.2 Bb = overall score of the bidder under consideration (calculated up to two decimal points)
 - 5.7.3 Tb = Technical score for the Bidder under consideration
 - 5.7.4 SFb = Price quoted by the Bidder under consideration
 - 5.7.5 The Bidder achieving the highest overall score (Bb) will be declared as successful bidder

In case of a tie where two or more Bidders achieve the same highest overall score, the Bidder with the higher technical scorer will be declared as successful bidder.

SECTION - 6

TERMS AND CONDITIONS

1. Signing of Agreement

- a) The successful bidder shall furnish a performance security in the shape of a Demand Draft/Bank Guarantee issued by a Nationalized Bank in favour of Tender Inviting Authority for an amount equal to 5% of annual contract value, which shall be carried forward every year. The Bank guarantee shall be as per proforma at Appendix 'E' and remain valid for a period, which is six months beyond the date of expiry of the agreement. This shall be submitted within 15 days (minimum) of receiving of Notice for Award of Agreement and before signing of the agreement failing which the EMD may be forfeited and contract shall be considered as cancelled.
- b) If the agreement is cancelled at any time during the validity period of the agreement in terms of para 1 above the Performance Security shall be forfeited.
- c) The Contracting Authority will release the Performance Security without any interest to the firm / contractor on successful completion of contractual obligations.

2. Compliance of Minimum Wages Act and other statutory requirements

- a) The Service provider shall comply with all the provisions of Minimum Wages Act/ Rates of Government (Finance Department) in case of outsourcing employees and other applicable labor laws. The Service provider shall also comply with all other statutory provision including but not limited to provisions regarding medical education and eligibility criteria of human resources used by the Service provider for providing the services, biomedical waste management, bio safety, occupational and environmental safety.
- b) The overall legal responsibility of provision of medical care lies with the Authority/public health facility. The Service provider shall maintain confidentiality of medical records and shall make adequate arrangement for cyber security.

3. Income Tax Deduction at Source

- a) Income tax deduction at source shall be made at the prescribed rates from the Service provider's bills. The deducted amount will be reflected in the requisite Form, which will be issued at the end of the financial year.

4. Periodicity of Payment

- a) The payment will be made on monthly basis. The Service provider will raise its invoice on completion of services during this period duly accompanied by evidences of services provided. The payment will be subject to TDS as per Income Tax Rules and other statutory deductions as per applicable laws.

5. Damages for Mishap/Injury

- a) The Contracting Authority shall not be responsible for damages of any kind or for any mishap/injury/accident caused to any personnel/property of the Service provider while performing duty in the Contracting Authority's / consignee's premises. All liabilities, legal or monetary, arising in that eventuality shall be borne by firm/ contractor.
- b) The service provider is the sole custodian of the Government properties handed over to him (Vehicles, Equipment etc). Service provider shall attend the damages to the government property handed over to him with his own funds).

6. Termination of Agreement:

- a) The Contracting Authority may terminate the agreement, if the successful Bidder withdraws its Bid after its acceptance or fails to submit the required Performance Securities for the initial agreement and or fails to fulfill any other contractual obligations. In that event, the Contracting Authority will have the right to purchase the same goods/ equipment from next eligible Service provider and the extra expenditure on this account shall be recoverable from the defaulter. The earnest money and the performance security deposited by the defaulter shall also be recovered to pay the balance amount of extra expenditure incurred by the Contracting Authority. After completion of the tenure of Bid, the Service provider will be allowed to vacate the space within a period of 15 days, in all the facilities where provider was providing the services.

7. Arbitration

- a) If dispute or difference of any kind shall arise between the Contracting Authority and the firm/contractor in connection with or relating to the agreement, the parties shall make every effort to resolve the same amicably by mutual consultations.
- b) If the parties fail to resolve their dispute or difference by such mutual consultations within thirty days of commencement of consultations, then either the Contracting Authority or the firm /contractor may give notice to the other party of its intention to commence arbitration, as hereinafter provided. The applicable arbitration procedure will be as per the Arbitration and Conciliation Act, 1996 of India. In that event, the dispute or difference shall be referred to the sole arbitration of an officer to be appointed by the Contracting Authority as the arbitrator. If the arbitrator to whom the matter is initially referred is transferred or vacates his office or is unable to act for any reason, he / she shall be replaced by another person appointed by Contracting Authority to act as Arbitrator.
- c) Work under the agreement shall, notwithstanding the existence of any such dispute or difference, continue during arbitration proceedings and no payment due or payable by the Contracting Authority or the firm / contractor shall be withheld on account of such

proceedings unless such payments are the direct subject of the arbitration.

- d) Reference to arbitration shall be a condition precedent to any other action at law.
- e) Venue of Arbitration: The venue of arbitration shall be the place from where the agreement has been issued.

8. General Terms and Conditions:

- a) The Authority shall finalize the Standard Operating Procedures (SOPs) for each of the services to be followed by the Service provider.
- b) All payments should be made within 30 days of submission of necessary bills/ invoices. Patient Feedback/Suggestions/Grievance Redressal-Periodic feedback from patients are to be taken on structured questionnaire. Result would be analyzed by the state government for further improvement of services and feedback to the service provider.

9. Applicable Law and Jurisdiction of Court:

The agreement shall be governed by and interpreted in accordance with the laws of India for the time being in force. The Court located at the place of issue of the agreement shall have jurisdiction to decide any dispute arising out of in respect of the agreement. It is specifically agreed that no other Court shall have jurisdiction in the matter.

10. Period of Contract

The date of entering into agreement will be the effective date, and the agreement shall be for a period of 5 years from the effective date and will be extended for another 2 years based on satisfaction.

1. Service Providers Default

The contract shall be terminated if –

- a) Service Provider fails to comply with any of the terms of the agreement or,
- b) fails to comply within a reasonable time with a notice or,
- c) assigns the Contract or sub-contracts the whole of the Services
- d) Becomes bankrupt or insolvent and has a receiving order made against him or compounds with his creditors, or carries on business under a receiver, trustee or manager for the benefit of his creditors or goes into liquidation.

2. Service Level Indicators

- a) Every call for attending emergency shall be received by the Call Centre.
There shall be no call unattended.
- b) Every Medical emergency requested shall be transported from the scene to a Conventional Ambulance. There shall not be any single emergency unattended.

Service Level Indicators

Sl.No.	Details of Indicator	Benchmark
1	Number of emergencies /patients transported per ambulance per day	Minimum 75 cases per month per feeder ambulance
2	Number of ambulances on the road every day	100 %
3	Reach Time (15 minutes) (Number of transportations exceed SLI shall not be more than 5%)	15 Minutes
4	Availability of Drugs, Surgicals and Consumables etc., (10% buffer to be maintained)	100%

3. Responsibilities of Contracting Authority

Provide the parking places to all the Feeder Ambulances.

4. Information and Reporting Requirements

- a) The Service provider shall ensure that information, records and documentation necessary to monitor the agreement are maintained and are available at all times to the Contracting Authority or its authorized representative. The Service Provider hereby agrees that he and all his staff shall at all times co-operate with the reasonable processes of the Service procuring agency for the monitoring, evaluation and carrying out quality audit and financial audit by any third party authorized by Contracting Authority.
- b) The Service provider hereby agrees to maintain all relevant data and records of all patients transported.
- c) The Service provider further agrees to maintain confidentiality of these data and records and commits that such data and records will not be shared with any third party for any purpose.
- d) The Service provider agrees to provide data to Contracting Authority as per the requirement of Contracting Authority. Failure to do so may entail cancellation of the agreement.
- e) The Service provider hereby agrees to maintain log book showing all movements of the vehicle and keep record of consumption of POL.
The log book should be maintained as per the format in vogue in any government office. Logbook shall be made available for verification by the any authority nominated by Service

procuring agency.

- f) The Service provider agrees that the vehicles will not be used to advertise any product or organization including the Service provider's own.

15. PERFORMANCE

- a) A half-yearly review meeting will be held and attended by appropriate levels of officials of the Service procuring agency and the Service providers to consider the performance, the anticipated outcome of the agreement and future service developments and changes. Further meetings may be arranged at any time to consider significant variation in the terms or conduct of the agreement and where corrective action on either part is indicated.
- b) Both the Service procuring agency and Service Provider agree to consider the introduction of any further service in line with any new initiative of the government or in response to local demand, which could not be anticipated earlier.
- c) Both the Service procuring agency and Service Provider agree that such services should be provided without extra cost. However, if it is felt by both parties that the additional services would require additional resources/manpower, the Service procuring agency agrees to consider reasonable increases in amount disbursed to the Service provider. It is agreed that the Service provider will be under no obligation to introduce the additional service unless a commitment to reimburse additional cost has been provided to him.

16. HEALTH AND SAFETY

- a) The Service Provider agrees to adequately train, instruct and supervise staff to ensure as is reasonably practicable, the health and safety of all persons who may be affected by the services provided under the agreement.
- b) The Service provider agrees that he would collect periodic feedback from the patients through structured questionnaire at his cost. The periodicity will not be less than once in six months. Responses to the questionnaire will be submitted in original to the Service procuring Agency Telephone numbers where patients can lodge their complaints to be displayed on MMU.

17. DATA PROTECTION, CONFIDENTIALITY AND RECORD KEEPING

- a) All Service Users have a right to privacy and therefore all information and knowledge

relating to them and their circumstances must be treated as confidential. The Service Provider must advise all staff on the importance of maintaining confidentiality and implement procedures which ensure that Service User's affairs are only discussed with relevant people and agencies.

b) The Service Provider shall comply with all legislations, which otherwise would have been applicable had the services been run directly by the Government agencies.

18. INTELLECTUAL PROPERTY RIGHTS:

a) All the Data, Software applications, Documentation and other material, process knowledge related to expertise and protocols developed belongs to the contracting authority and not the service provider.

b) All the patient transport details are to be integrated in a real time dedicated dash board in a and the same should be reflected in State Dash Board. The Dash board to be hosted in the SDC Server.

19. STAFFING

a) The Service provider will ensure that, at all times, it has sufficient suitably trained staff to ensure that services comply with all the statutory requirements and meet patient needs.

b) The Service provider agrees that he would ensure that an adequate complement of staff in each ambulance.

c) The Service provider agrees that a record of qualifications shall be maintained by the provider and available for inspection.

d) The Service provider hereby expresses his commitment to training and staff development and the maintenance of professional knowledge and competence.

20 FINANCE ARRANGEMENTS

a) Annual increment of 3% (Three Per cent) on quoted rates will be applicable (each year completion from the signing of the agreement) on the preceding year's quote for the entire total contract duration.

b) The Service Provider shall raise invoice on monthly basis upon completion of services during that period duly accompanied by evidence of services provided.

c) In case the last day of the month is holiday as a result of which invoices cannot be submitted, the Service procuring agency agrees to make payment of an equivalent amount of the last invoice submitted. Additional amount paid if any on the basis of actual invoices submitted later and examination thereof will be adjusted from

subsequent payments under intimation to the Service provider.

- d) The Service provider hereby agrees to maintain all required books of accounts and agrees to provide them to such audit as may be required to be carried out.
- e) The Service provider hereby agrees that the Service procuring agency will deduct from all payments such amount of statutory taxes and duties as he is required to deduct under provisions of law.
- f) The amount would be deducted if the Feeder Ambulance becomes non-operative as mentioned and calculated above in Section VI.
- g) TDS certificates shall be updated periodically. GST reports (month / Quarter) shall be submitted as per the schedule. All the returns for compliance of labour loss (ESI / PF) shall be submitted in time. Workmen's compensation policy shall be implemented.
- h) All statutory reports and financial reports, labour reports, and technical clearances must be submitted after bill payments every 3 months. GST returns have to be filed every month to the contracting authority before releasing the payments against invoices. The department shall verify all the statutory compliances.

21. INCOME TAX DEDUCTION AT SOURCE

- a) Income tax deduction at source shall be made at the prescribed rates from the service provider's bills. The deducted amount will be reflected in the requisite form, which will be issued at the end of the financial year.

22. PENALTIES

1. A minimum of 98% of the Feeder Ambulances shall transport all the cases assigned by the call centre. Otherwise, penalties will be levied as follows:

- a) 95% to 97.99%, an amount of 5% will be deducted from the total billed amount for that month.
- b) 90 % to 94.99%, an amount of 10% will be deducted from the total billed amount for that month.
- c) 85% to 89.99%, an amount of 20% will be deducted from the total billed amount for that month.
- d) 75% to 84.99%, an amount of 30% will be deducted from the total billed amount for that month.
- e) 70% to 74.99%, an amount of 50 % will be deducted from the total billed amount for that month.

f) Contract will be terminated and FSD will be forfeited if the performance is below 70%.

2. Number of ambulances on road every day should be 100%, otherwise penalties will be levied @ 5% per each non-available vehicle from the total fleet claim of the day.

3. In addition to the deductions for non-operation of services as agreed, there shall be a penalty @ Rs. 5000/- per feeder ambulance per day for non-operations or non-availability of services in the areas requested up to a period of seven days and there after Rs.10,000/- per day for next seven days. There after the contract will be cancelled without further notice.

4. If the service provider fails to update the details of the services given in a real-time basis, there shall be a penalty of Rs.1000/- per feeder ambulance per day and the details are to be made available to the STATE DASH board at the cost of the service provider.

5. If the patient sustains injury / injuries while transporting the patient by the Feeder Ambulance by virtue of the failure / accident of the feeder ambulance, the treatment cost and compensation to the patient shall be borne by the service provider in three days' time of the incident.

6. Online data availability shall be there. If not done, a penalty will be levied @ Rs. 1000/- per vehicle per day.

7. All vehicles shall be insured for passenger/patient claims in case of and failure in transportation of the patient if any accident occurs.

8. On verification by State Representatives, if any the Drugs, Surgicals and Consumables, etc., in the Feeder Ambulance are found expired, entire amount for that vehicle for that month will be deducted. The non-availability of filled in Medical Oxygen Cylinder, will also applies the same as stated above.

Note – All above Maximum Penalty amounts will not be more than 10% of the invoice value.

23. COMPLIANCE OF MINIMUM WAGES ACT & OTHER STATUTORY REQUIREMENTS

a) The Service Provider shall comply with all the provisions of Minimum Wages Act /Rates of Government and other applicable labour laws issued by Government from time to time. The Client is not responsible to that effect. The Service provider shall also comply with all the other statutory provision including but not limited to provisions regarding medical

education and eligibility criteria of human resources used by the Service Provider for providing the services, biomedical waste management, and bio safety, occupational and environmental safety.

b) The Service Provider shall maintain confidentiality of medical records.

c) The Service Provider shall be registered under the labour laws and respective EPF, ESI etc.

24.CLIENT AUDIT

a) The Service Provider, hereby, agrees to maintain all required books of accounts and to provide them to such audit as may be required to be carried out.

b) The service provider shall ensure best quality of services and protocols and shall submit a half yearly report of clinical audit (done by a third party as nominated by the Client).

25. VARIATION

This Service Level Agreement may not be varied unless a variation is agreed in writing and signed by all parties.

26.DISPUTES

The agreement shall be governed by and interpreted in accordance with the laws of India for the time being in force. The Court located at the place of issue of agreement shall have jurisdiction to decide any dispute arising out of in respect of the agreement. It is specifically agreed that no other Court shall have jurisdiction in the matter.

27. GENERAL TERMS & CONDITIONS

a) The authority shall finalise the Standard Operating Procedures (SOPs)for each of the services to be

followed by the Service Provider.

b) All payments should be made within 30 days of submission of necessary bills / invoices. Patient feedback / suggestions / grievance redressal - periodic feedback from patients are to be taken on structured questionnaire. Result would be analyzed by the State Government for further improvement of services and feedback to the service provider.

28. APPLICABLE LAW & JURISDICTIONOF COURT

The agreement shall be governed by and interpreted in accordance with laws of India for the time being in force. The Court located at the place of issue of agreement shall have

jurisdiction to decide any dispute arising out of in respect of the agreement. It is specifically agreed that no other Court shall have jurisdiction in the matter.

29.TERMINATION

- a) Either party may terminate this agreement by giving not less than 3 months' notice in writing to the other. This notice shall include reasons as to why the agreement is proposed to be terminated.
- b) The Service Procuring agency may terminate the agreement, or terminate the provision of any part of the Services, by written notice to the Service provider with immediate effect if the Service Provider is in default of any obligation under the agreement, where the default is capable of remedy the Service Provider has not remedied the default to the satisfaction of the Service procuring agency within 30 days of at least two written advice, or such other period as may be specified by the Service procuring agency, after service of written notice specifying the default and requiring it to be remedied; or b. the default is not capable of remedy; or c. the default is a fundamental breach of the agreement
- c) If the Service procuring agency terminates the agreement and then makes other arrangements for the provision of the Services, it shall be entitled to recover from the Service provider any loss that had to be incurred due to such sudden termination of agreement.
- d) Both the parties agree that no further payment would be made to the Service provider, even if due till settlement of anticipated loss as a result of premature termination of the agreement.
- e) The contracting authority reserves the right to terminate the agreement without assigning any reason if services of the ambulances create serious adverse publicity in media and prima facie evidence emerges showing negligence of the Service provider.
- f) If the service provider indulging any unlawful activities or unethical practices, his contract will be terminated immediately without giving notice besides initiating criminal action.

30. INDEMNITY

- a) By this agreement, the Service provider indemnifies the Service procuring agency against damages of any kind or for any mishap/injury/accident caused to any personnel/property of the Service provider while performing duty.
- b) The Service provider agrees that all liabilities, legal or monetary, arising in any eventuality shall be borne by the Service provider.

31. PERIOD OF AGREEMENT

a) This Service Level Agreement shall be for a period of five years and take effect on To.....until The period may be extended with the agreement of both parties after mutual negotiations.

Signed by Contracting Authority,
provider

Signed by Services

Annexure – A-I

ITDA wise Feeder Ambulances

Sl. No.	Name of the District	Name of the ITDA	Total Feeder Ambulances
1	Srikakulam	Seethampeta	15
2	Vizianagaram	Parvathipuram	24
3	Visakhapatnam	Paderu	42
4	East Godavari	Rampachodavaram	21
		Chintoor	6
5	West Godavari	KR Puram	8
6	Guntur	Srisailam	1
7	Prakasam		3
8	Kurnool		2
Total			122

Further, the bidder has to maintain standby ambulances as shown below:

S.No.	ITDA	Quantity
1	Seethampeta	1
2	Parvathipuram	2
3	Paderu	4
4	Rampachodavaram	2
5	Chintoor	1
6	KR Puram	1
7	Srisailam	1
	Total	12

CHFW has the right to increase or decrease the number of feeder ambulances per ITDA area. The service provider shall be in a position to provide services in any ITDA area any habitation depends on the requirement of the population.

If the authority so feels necessary that it is necessary more feeder ambulances, the service

provider agrees to undertake additional work; provided the total work is not more than 10% of the current number of ambulances. The cost of service as defined in this contract in that case shall be extended.

Annexure -II

ITDA WISE TENTATIVE LOCATIONS OF FEEDER AMBULANCE IN ANDHRA PRADESH						
S.No.	District	ITDA	Mandal	Health Facility	Type of Health Facility	Base Location
1	Alluri Sita Rama Raju	ITDA-R.C.Varam	Addatheegala	Addatheegala	PHC	Dokkapalem
2	Alluri Sita Rama Raju	ITDA-R.C.Varam	Rampa Chodavaram	Rampa Chodavaram	AH	Bondapalli / Bheemavaram
3	Alluri Sita Rama Raju	ITDA-Chintoor	V. R. Puram	Jeediguppa	PHC	Boduluru
4	Alluri Sita Rama Raju	ITDA-R.C.Varam	Raja Vommangi	Zeddangi	PHC	Chikilinta / Loddalu
5	Alluri Sita Rama Raju	ITDA-Chintoor	Chintoor	Tulasipaka	PHC	Mothugudem
6	Alluri Sita Rama Raju	ITDA-R.C.Varam	Raja Vommangi	Zeddangi	PHC	Donedapalem
7	Alluri Sita Rama Raju	ITDA-Chintoor	Chintoor	Edugurallapalli	PHC	Edugurallapalli
8	Alluri Sita Rama Raju	ITDA-Chintoor	V. R. Puram	Jeediguppa	PHC	Jeediguppa
9	Alluri Sita Rama Raju	ITDA-R.C.Varam	Rampa Chodavaram	Rampa Chodavaram	AH	Bolagonda
10	Alluri Sita Rama Raju	ITDA-R.C.Varam	Gangavaram	Gangavaram	PHC	Gangavaram / Rajam Palem
11	Alluri Sita Rama Raju	ITDA-R.C.Varam	Maredumilli	Maredumilli	PHC	Koduru / Vetukuru
12	Alluri Sita Rama Raju	ITDA-Chintoor	Kunavaram	Kuturu	PHC	Kuturu

13	Alluri Sita Rama Raju	ITDA- R.C.Varam	Raja Vommangi	Kindra	Sub Centre	Labbarthi / Kindra
14	Alluri Sita Rama Raju	ITDA- R.C.Varam	Devipatnam	Rampa Chodavaram	AH	Manturu / Damanapalli
15	Alluri Sita Rama Raju	ITDA- R.C.Varam	Maredumilli	Maredumilli	PHC	Moduluru
16	Alluri Sita Rama Raju	ITDA- R.C.Varam	Rampa Chodavaram	Chavitibadulu	PHC	Musirimilli / Chavitibadulu
17	Alluri Sita Rama Raju	ITDA- Chintoor	Yetapaka	Gowri Devi Peta	PHC	Nellipaka / Gowri Devi Peta
18	Alluri Sita Rama Raju	ITDA- R.C.Varam	Gangavaram	Nelli Pudi	PHC	Nelli Pudi / Molleru
19	Alluri Sita Rama Raju	ITDA- R.C.Varam	Devipatnam	Indukurupeta	PHC	Pothavaram
20	Alluri Sita Rama Raju	ITDA- R.C.Varam	Devipatnam	Indukurupeta	PHC	Pudipalli
21	Alluri Sita Rama Raju	ITDA- R.C.Varam	Raja Vommangi	Raja Vommangi	CHC	Rajavommangi
22	Alluri Sita Rama Raju	ITDA- R.C.Varam	Addatheegala	Duppalapalem	PHC	Rayapalli
23	Alluri Sita Rama Raju	ITDA- Chintoor	V. R. Puram	Rekhapalli	PHC	Rekhapalli
24	Alluri Sita Rama Raju	ITDA- R.C.Varam	Addatheegala	Yellavaram	PHC	Thimmapuram
25	Alluri Sita Rama Raju	ITDA- R.C.Varam	Y. Ramavaram	Y. Ramavaram	CHC	Y Ramavaram
26	Alluri Sita Rama Raju	ITDA- R.C.Varam	Y. Ramavaram	Y. Ramavaram	CHC	Yarlagadda
27	Alluri Sita Rama Raju	ITDA- R.C.Varam	Y. Ramavaram	Y. Ramavaram	CHC	Yerragonda
28	Palnadu	ITDA- Srisailam	Veldurthi	Sirigipadu	PHC	Sirigipadu
29	Nandyala	ITDA- Srisailam	Atmakuru	Bairluty	PHC	Bairluty
30	Nandyala	ITDA- Srisailam	Kotha Palle	Kotha Palle	PHC	Kotha Palle

31	Prakasam	ITDA-Srisailam	Dornala	Chinthala	PHC	Chintala
32	Prakasam	ITDA-Srisailam	Yerra Gonda Palem	Ganjivari Palli / Palutla	PHC	Ganjivari Palli
33	Prakasam	ITDA-Srisailam	Dornala	Korraprolu	PHC	Korraprolu
34	Parvathipuram Manyam	ITDA-Seethampeta	Seethampeta	Budambo Colony	PHC	(Palasa) Budambo Colony
35	Srikakulam	ITDA-Seethampeta	Kothuru	Kurigam	PHC	Ailthi Bitis
36	Parvathipuram Manyam	ITDA-Seethampeta	Bhamini	Baleru	PHC	Baleru (Isukaguda)
37	Parvathipuram Manyam	ITDA-Seethampeta	Bhamini	Bathili	PHC	Bathili (Palavalasa)
38	Parvathipuram Manyam	ITDA-Seethampeta	Bhamini	Bhamini	PHC	Bhamini
39	Parvathipuram Manyam	ITDA-Seethampeta	Mandasa	Siri Puram	PHC	Siri Puram
40	Srikakulam	ITDA-Seethampeta	Meliaputti	Karajada	PHC	Karajada
41	Srikakulam	ITDA-Seethampeta	Hiramandalam	Hiramandalam	PHC	Labba
42	Srikakulam	ITDA-Seethampeta	Kanchili	MS Palli	PHC	MS Palii
43	Parvathipuram Manyam	ITDA-Seethampeta	Palakonda	M. Singupuram	PHC	M Singupuram
44	Srikakulam	ITDA-Seethampeta	Meliaputti	Meliaputti	PHC	Nelabonthu Hostel
45	Parvathipuram Manyam	ITDA-Seethampeta	Seethampeta	Donubai	PHC	Polla
46	Srikakulam	ITDA-Seethampeta	Pathapatnam	Ganguwada	PHC	S J Puram
47	Vizianagaram	ITDA-Parvathipuram	Srungavaraapu Kota	S. Kota	CHC	S Kota
48	Srikakulam	ITDA-Seethampeta	Mandasa	Siripuram	PHC	Siripuram

49	Eluru	ITDA- K.R. Puram	Buttaya Gudem	Dora Mamidi	PHC	Aliveru
50	Eluru	ITDA- K.R. Puram	Kukkunooru	Amaravaram	PHC	Amaravaram
51	Eluru	ITDA- K.R. Puram	Buttaya Gudem	P.R. Gudem	PHC	Chintapalli
52	Eluru	ITDA- K.R. Puram	Velairpadu	Koida	PHC	Koida
53	Eluru	ITDA- K.R. Puram	Polavaram	Kondrukota	PHC	Koruturu
54	Eluru	ITDA- K.R. Puram	Kukkunooru	Kukkunooru	PHC	Kukkunooru
55	Eluru	ITDA- K.R. Puram	Valairpadu	Valairpadu	PHC	Medipalli
56	Eluru	ITDA- K.R. Puram	Polavaram	Kondrukota	PHC	Thutigunta
57	Parvathipuram Manyam	ITDA- Parvathipuram	Parvathipuram	Dokiseela	PHC	Adaru
58	Parvathipuram Manyam	ITDA- Parvathipuram	Pachipenta	Pachipenta	PHC	Aluru
59	Parvathipuram Manyam	ITDA- Parvathipuram	Seethampeta	Kusumi	PHC	Sambam / Kindangi
60	Parvathipuram Manyam	ITDA- Parvathipuram	Gumma Lakshmipuram	Duddukallu	PHC	Deruvada
61	Parvathipuram Manyam	ITDA- Parvathipuram	Komarada	Madhalinga	PHC	Diguva Gunada
62	Parvathipuram Manyam	ITDA- Parvathipuram	Saluru	Thonam	PHC	D Mendangi
63	Parvathipuram Manyam	ITDA- Parvathipuram	Gumma Lakshmipuram	Regidi	PHC	Dora Jammu
64	Parvathipuram Manyam	ITDA- Parvathipuram	Saluru	Thonam	PHC	D.T. Valasa
65	Parvathipuram Manyam	ITDA- Parvathipuram	Kuruppam	Neelakantapuram	PHC	D.L. Puram

66	Parvathipuram Manyam	ITDA- Parvathipuram	Pachipenta	Gurunaidupeta	PHC	Garisiguddi
67	Parvathipuram Manyam	ITDA- Parvathipuram	Gumma Lakshmipuram	Duddukallu	PHC	Goipaka
68	Parvathipuram Manyam	ITDA- Parvathipuram	Makkuva	Sambara	PHC	Karadavalasa
69	Parvathipuram Manyam	ITDA- Parvathipuram	Pachipenta	Gurunaidupeta	PHC	Kerangi
70	Parvathipuram Manyam	ITDA- Parvathipuram	Kuruppam	Mondemkallu	PHC	Kotturu
71	Parvathipuram Manyam	ITDA- Parvathipuram	Komarada	Kuneru Ramabhadrapura m	PHC	Kunthesu
72	Parvathipuram Manyam	ITDA- Parvathipuram	Mentada	Mentada	PHC	Mentada
73	Parvathipuram Manyam	ITDA- Parvathipuram	Saluru	Sambara	PHC	Pagulu Chennuru
74	Parvathipuram Manyam	ITDA- Parvathipuram	Pachipenta	Gurunaidupeta	PHC	Raigudi Valasa
75	Parvathipuram Manyam	ITDA- Parvathipuram	Gumma Lakshmipuram	Thadikonda	PHC	Rella
76	Parvathipuram Manyam	ITDA- Parvathipuram	Srungavaraapu Kota	S. Kota	CHC	S Kota
77	Parvathipuram Manyam	ITDA- Parvathipuram	Gumma Lakshmipuram	Thadikonda	PHC	Thadikonda
78	Parvathipuram Manyam	ITDA- Parvathipuram	Jiyyamma Valasa	Ravada Rama Bhadrapur am	PHC	Tk Jammu
79	Parvathipuram Manyam	ITDA- Parvathipuram	Kuruppam	Mondemkallu	PHC	Tompalapadu
80	Parvathipuram Manyam	ITDA- Parvathipuram	Komarada	Komarada	PHC	Vanakabadi
81	Alluri Sita Rama Raju	ITDA- Paderu	Ananthagiri	Ananthagiri	PHC	Ananthagiri

82	Alluri Sita Rama Raju	ITDA- Paderu	Ananthagiri	Tokuru	Sub Centre	Tokuru
83	Alluri Sita Rama Raju	ITDA- Paderu	Ananthagiri	Kasipatnam	Sub Centre	Kasipatnam
84	Alluri Sita Rama Raju	ITDA- Paderu	Ananthagiri	Zeenabadu	Sub Centre	Zeenabadu
85	Alluri Sita Rama Raju	ITDA- Paderu	Arakuvalley	Gannela	PHC	Gannela
86	Alluri Sita Rama Raju	ITDA- Paderu	Arakuvalley	Madagada	PHC	Madagada
87	Alluri Sita Rama Raju	ITDA- Paderu	Arakuvalley	Sunkarametta	PHC	Sunkarametta
88	Alluri Sita Rama Raju	ITDA- Paderu	Dumbriguda	Sagara	Sub Centre	Sagara
89	Alluri Sita Rama Raju	ITDA- Paderu	Dumbriguda	Dumbriguda	PHC	Dumbriguda
90	Alluri Sita Rama Raju	ITDA- Paderu	Dumbriguda	Kinchumanda	Sub Centre	Kinchumanda
91	Alluri Sita Rama Raju	ITDA- Paderu	Hukumpeta	Sobhakota	Sub Centre	Sobhakota
92	Alluri Sita Rama Raju	ITDA- Paderu	Hukumpeta	Santhari	Anganwad i Centre	Santhari
93	Alluri Sita Rama Raju	ITDA- Paderu	Hukumpeta	Bakuru	School	Bakuru
94	Alluri Sita Rama Raju	ITDA- Paderu	Pedabayalu	Aradikota	Anganwad i Centre	Aradakota
95	Alluri Sita Rama Raju	ITDA- Paderu	Pedabayalu	Pedabayalu	School	Pedabayalu
96	Alluri Sita Rama Raju	ITDA- Paderu	Pedabayalu	Rudakota	PHC	Rudakota
97	Alluri Sita Rama Raju	ITDA- Paderu	Pedabayalu	Gomangi	PHC	Gomangi
98	Alluri Sita Rama Raju	ITDA- Paderu	Munchingiputtu	Munchingiputtu	PHC	Munchingiputtu

99	Alluri Sita Rama Raju	ITDA- Paderu	Munchingiputtu	Kilagada	Sub Centre	Kilagada
100	Alluri Sita Rama Raju	ITDA- Paderu	Munchingiputtu	Pedaguda	Anganwad i Centre	Pedaguda
101	Alluri Sita Rama Raju	ITDA- Paderu	Munchingiputtu	Labburu / Makavaram	PHC	Labburu / Makavara m
102	Alluri Sita Rama Raju	ITDA- Paderu	Munchingiputtu	Barada	Sub Centre	Barada
103	Alluri Sita Rama Raju	ITDA- Paderu	Paderu	Vantlamamidi	Anganwad i Centre	Vantlamamidi
104	Alluri Sita Rama Raju	ITDA- Paderu	Paderu	Guttulaputtu	Sub Centre	Guttulaputtu
105	Alluri Sita Rama Raju	ITDA- Paderu	G. Madugula	Bandhaveedhi	Anganwad i Centre	Bandhaveedhi
106	Alluri Sita Rama Raju	ITDA- Paderu	G. Madugula	Gaduthuru	Sub Centre	Gaduthuru
107	Alluri Sita Rama Raju	ITDA- Paderu	G. Madugula	Nurmathi	Anganwad i Centre	Nurmathi
108	Alluri Sita Rama Raju	ITDA- Paderu	G. Madugula	Vanjari	Sub Centre	Vanjari
109	Alluri Sita Rama Raju	ITDA- Paderu	G. Madugula	Kokkirapalli	Sub Centre	Kokkirapalli
110	Alluri Sita Rama Raju	ITDA- Paderu	G. Madugula	Luvasingi	Anganwad i Centre	Luvasingi
111	Alluri Sita Rama Raju	ITDA- Paderu	Chintapalli	Annavaram	Sub Centre	Annavaram
112	Alluri Sita Rama Raju	ITDA- Paderu	Chintapalli	Lothugedda	PHC	Lothugedda
113	Alluri Sita Rama Raju	ITDA- Paderu	Chintapalli	Tajangi	PHC	Lothugedda Jn
114	Alluri Sita Rama Raju	ITDA- Paderu	G.K. Veedhi	Ebulam	Sub Centre	Ebulam

115	Alluri Sita Rama Raju	ITDA- Paderu	G.K. Veedhi	Pedavalasa	PHC	Pedavalasa
116	Alluri Sita Rama Raju	ITDA- Paderu	G.K. Veedhi	Sapparla	PHC	Sapparla
117	Alluri Sita Rama Raju	ITDA- Paderu	G.K. Veedhi	Darakonda	PHC	Darakonda
118	Alluri Sita Rama Raju	ITDA- Paderu	G.K. Veedhi	Sileru	PHC	Sileru
119	Alluri Sita Rama Raju	ITDA- Paderu	Koyyuru	Downuru	PHC	Downuru
120	Alluri Sita Rama Raju	ITDA- Paderu	Koyyuru	Rajendra Palem	PHC	Rajendra Palem
121	Alluri Sita Rama Raju	ITDA- Paderu	Koyyuru	Marriwada	Sub Centre	Marriwada
122	Alluri Sita Rama Raju	ITDA- Paderu	Koyyuru	U. Cheedipalem	PHC	U. Cheedipalem / Y. Ramavaram

Annexure – III

Drugs, Surgical, Equipment etc., to be available in each Feeder Ambulance

Sr. No.	Item	Quantity
Injections		
1	Inj. Atropine sulphate 0.6 mg	5
2	Inj. Theophylline 50.6mg + Etophyllin 169.4mg/2 ml	5
3	Inj. Dexamethasone 2 mg/ml	5
4	Inj. Frusemide 40 mg	5
5	Inj. Oxytocin	5
6	Inj. Soda bicarbonate 7.5 mg	5
7	Inj. Chlorpheniramine Maleate (2ml)	5
8	Inj. Adrenaline 1 mg	5
9	Inj. Lignocaine 2%	5
10	Inj. Vit.K 10 mg/ml (Menadione bisulphate)	5
11	Inj Anti Snake Venum serum	5
12	Inj Dicyclomine	5
13	Inj. Diclofenac sodium	5
14	Inj. Ondansetron 2mg/ml	5
Tablets		
15	Tab. Amlodipine 5 mg	10
16	Tab. Isosorbide Dinitrate 5mg	10
17	Tab. Paracetamol 500 mg	10
18	Tab. Diclofenac sodium 50 mg	10
19	Tab. Ranitidine 150 mg	10
20	Tab. Omez – D	10
21	Tab. Aspirin 75 mg	10
22	Cap. Omeprazole 20 mg	10
Sprays		
23	Analgesic spray	2
24	Burn spray	2

Other		
25	Syp. Paracetamol 60 ml	10
26	Syp. Ondem	5
27	O R S Powder 27.5 gm W H O Formula	5
28	Framycetin sulfate BP 15 mg (1.5%)	2
29	Povidone-iodine - Ointment	2
30	Ciprofloxacin eye drop	2
31	Normal Saline 500 ml	2
32	Full Set of Ambulance Dressings (sizes 1,2,3,4)	5
33	Full Set of Conforming Bandages (sizes 4m/10cm, 4m/7.5cm, 4m/5cm)	4
34	Range of Burns Dressings	4
35	Triangular Bandages	2
36	Foil Blankets	2
37	Non-woven Swabs	2
38	Wound Dressings (adhesive and non-adhesive)	2
39	Surgical Tape	2
40	Silk Tape	2
41	Major Hemorrhage Pack	2
42	Pelvic Splint	2
43	Povidone Iodine solution 500 ml	2
44	Denatured spirit	2
45	Surgical Gloves	1 Box
46	Scalp Vein set	4
47	Scalpel Blade	4
48	Cotton roll 500 gm	2 Rolls
49	Rolled Bandages	3
50	Elastic crepe bandages Non-sterile -10cm	2
51	Sterile water for injection-	4
52	Disposable Syringes 2cc,5cc	4
53	Paper Adhesive tape	4

54	IV Set	5
55	Disposable Needle- 22G, 24G, 23G	4
56	Tourniquet	2
57	Teeth guard	2
58	Burn Pack	2
59	Cold packs	2
60	Waste bin for sharp needles	1
61	Disposable bags for vomiting	20
62	Inhaler Beclomethasone Dipropionate	2
63	Inhaler Salbutamol	2
64	Glucometer strips	20 strips
65	Suturing Needle & thread	2
66	Distill Water	5

Annexure -IV

VEHICLE LOG BOOK FORMAT (FEEDER ANBULANCE)

Vehicle Registration No. :

District Name :

Date	From (Place name and institute name)	To (Place name and institute name)	Time Out	Time In	Starting Km Reading	Ending Reading	Total Km Run	Particulars of patient (Patient Name & Address	Signature of competent Authority

VEHICLE LOG BOOK FORMAT (PATIENT)

Vehicle Registration No. :

District Name :

Date	Particulars of Patient (Patient)	Patient Sex & Age	Patient Case summary	Ventilate or usage time	Treatment done during transit	Consumables / Medicines used	Cost of the consumables / medicine used	Type (Emerge ncy, Transfer etc)	Signature of competent authority

Date	Name of the Medicine																							
	Adrenaline				Atropine				Deriphyllin				Dobutamine 150 mg				Dobutamine 200 mg				Nor adrenaline			
	Qty	Issue	Pt Id.	Bal	Qty	Issue	Pt Id.	Bal	Qty	Issue	Pt Id.	Bal	Qty	Issue	Pt Id.	Bal	Qty	Issue	Pt Id.	Bal	Qty	Issue	Pt Id.	Bal

This table shall be repeated for all other Medicines

Signature of EMT:

Name:

Date	Name of the Medicine															
	Glucometer Strips				ET Tubes				Surgical Gloves				Oxygen mask & tubing			
	Qty	Issued	Pt Id.	Bal	Qty	Issued	Pt Id.	Bal	Qty	Issued	Pt Id.	Bal	Qty	Issued	Pt Id.	Bal

This table shall be repeated for all other consumables.

Signature of EMT:

Name:

STOCK REGISTER

Vehicle Registration No. :

District Name :

Month :

. No.	Item Description	Quantity
1	Automatic External defibrillator (3-lead ECG Capable)	
2	Masks 4-5 types	1
3	Compact Oxygen Cylinder	1
4	Full Set of Oropharyngeal Airways	1
5	Tourniquets	2
6	Cannulation Dressings	1
7	Pre-Injection Wipes	1
8	Small Sharps Bin	1
9	Cleaning Wipes	1
10	Hand Gel	1
11	KY Jelly	1
12	Nasal Cannulas	1
13	Full Set of Nasopharyngeal Airways	1

14	Nebulization Machine	1
15	Adult/Pediatric Nebulization Masks	1
16	Drugs Bag	1
17	Stethoscope	1
18	B.P. Apparatus (Diamond mercury BP apparatus)	1
19	Pulse Oxymeter	1
20	Glucometer	1
21	Torch + Pupillary Torch	1
22	Scissor	1
23	Artery Forceps	1
24	Kidney Tray	1

25	Fire extinguisher – 5kgs ABC Type	1
26	Rescue Blanket	1
27	Trauma & First aid kit	1
28	Disposable Delivery kit (DDK)	1

Signature of EMT:
Name:

STATUS REGISTER

MEDICINES STATUS FOR THE MONTH OF -----

Vehicle Registration No. :

District Name :

Sr. No.	Item	Quantity
Injections		
1	Inj. Atropine sulphate 0.6 mg	5
2	Inj. Theophylline 50.6mg + Etophyllin 169.4mg/2 ml	5
3	Inj. Dexamethasone 2 mg/ml	5
4	Inj. Frusemide 40 mg	5
5	Inj. Oxytocin	5
6	Inj. Soda bicarbonate 7.5 mg	5
7	Inj. Chlorpheniramine Maleate (2ml)	5
8	Inj. Adrenaline 1 mg	5
9	Inj. Lignocaine 2%	5
10	Inj. Vit.K 10 mg/ml (Menadione bisulphate)	5
11	Inj Anti Snake Venum serum	5
12	Inj Dicyclomine	5
13	Inj. Diclofenac sodium	5
14	Inj. Ondansetron 2mg/ml	5

Tablets		
15	Tab. Amlodipine 5 mg	10
16	Tab. Isosorbide Dinitrate 5mg	10
17	Tab. Paracetamol 500 mg	10
18	Tab. Diclofenac sodium 50 mg	10
19	Tab. Ranitidine 150 mg	10
20	Tab. Omez – D	10
21	Tab. Aspirin 75 mg	10
22	Cap. Omeprazole 20 mg	10
Sprays		
23	Analgesic spray	2

24	Burn spray	2
Other		
25	Syp. Paracetamol 60 ml	10
26	Syp. Ondem	5
27	O R S Powder 27.5 gm W H O Formula	5
28	Framycetin sulfate BP 15 mg (1.5%)	2
29	Povidone-iodine - Ointment	2
30	Ciprofloxacin eye drop	2
31	Normal Saline 500 ml	2
32	Full Set of Ambulance Dressings (sizes 1,2,3,4)	5
33	Full Set of Conforming Bandages (sizes 4m/10cm, 4m/7.5cm, 4m/5cm)	4
34	Range of Burns Dressings	4
35	Triangular Bandages	2
36	Foil Blankets	2
37	Non-woven Swabs	2
38	Wound Dressings (adhesive and non-adhesive)	2
39	Surgical Tape	2
40	Silk Tape	2
41	Major Hemorrhage Pack	2

42	Pelvic Splint	2
43	Povidone Iodine solution 500 ml	2
44	Denatured spirit	2
45	Surgical Gloves	1 Box
46	Scalp Vein set	4
47	Scalpel Blade	4
48	Cotton roll 500 gm	2 Rolls
49	Rolled Bandages	3
50	Elastic crepe bandages Non-sterile -10cm	2
51	Sterile water for injection-	4
52	Disposable Syringes 2cc,5cc	4

53	Paper Adhesive tape	4
54	IV Set	5
55	Disposable Needle- 22G, 24G, 23G	4
56	Tourniquet	2
57	Teeth guard	2
58	Burn Pack	2
59	Cold packs	2
60	Waste bin for sharp needles	1
61	Disposable bags for vomiting	20
62	Inhaler Beclomethasone Dipropionate	2
63	Inhaler Salbutamol	2
64	Glucometer strips	20 strips
65	Suturing Needle & thread	2
66	Distill Water	5

Shall include all other medicine on board

Signature of EMT:

Name:

EQUIPMENT STATUS FOR THE MONTH OF -----

Vehicle Registration No : _____

District Name : _____

Defibrillator	Stethoscope	Pulse Oxymeter	Nebulizer	Glucometer	BP apparatus	Ref. Medicine cabinet	Oxygen cylinder	Pupillary torch	Thermometer

Signature of EMT: _____

Name: _____

Annexure V

CONSENT FORM

Date : _____ **Veh. No.:** _____
Patient's Name : _____
Address : _____

Phone No. /Mobile : _____

IF THE FORMS IS TO BE FILLED BY PATIENT

1. Mr./Mrs/Ms. _____ Aged _____ Male/Female is in
need of transfer in the ambulance operated under MEMS from _____
_____ to _____

All the likely consequences, which have been explained to me in the language I best, understand, will be solely borne by me at my own risk under all circumstances.

Patient Signature

Counter

Signature of

Paramedic/Doctor/Attendant

Name (In Block Letters)

Name: _____

IF THE FORMS IS TO BE FILLED BY PATIENT'S RELATIVE/COMPANION

2. Mr./Mrs/Ms. _____ Aged _____ Male/Female have understood and granted consent to _____
_____ ambulance service to transfer my ____ The risks and consequences have been fully explained to me and my _____ to our satisfaction and we agree that the transfer will be at our own risk under all circumstances.

Relative/ Companion Signature

Counter

Signature of

Paramedic/Doctor/Attendant

Name (In Block Letters)

Name: _____

Annexure VI

EQUIPMENT BREAKDOWN LOG BOOK

District Name :

S/n	Name of the Equipment & Regn no of Ambulance	Nature Of Complaint	Date Of Break down	Repaired / Replaced date	Details Of service Under taken	Name Of Spares replaced	Equipment Status	Company Name & Signature and name of engineer

Signature of Supervisor :

Name:

EQUIPMENT PREVENTIVE MAINTENANCE REGISTER

S/n	Name of the equipment & regn no of ambulance	Preventive maintenance date	Details of preventive action	Spares replaced (if any)	Equipment Status	Company name and signature & name of Engineer

Signature of Supervisor :

Name:

FEEDER AMBULANCE BREAKDOWN LOG

S/n.	Registration number of Vehicle	Nature of complaint	Date of Break Down	Repaired date	Details of Service undertaken	Name of the Spares replaced	Vehicle Status	Company name and signature and name of Engineer

Signature of Supervisor :

Name:

FEEDER AMBULANCES MAINTENANCE LOG

S/n.	Registration number of Vehicle	Preventive maintenance date	Details of preventive action	Spares replaced (if any)	Vehicle Status	Company name and signature and name of Engineer

Signature of Supervisor :

Name:

Annexure VII

REPORT FORMATS

1) Patient transported reports

Month	No. of ambulance (cumulative)	Total Calls	Total Emergency Calls	Total Emergencies attended	Total Trauma/ accident	Total labor Emergencies	Total Cardiac Emergencies
Total							

2) Distance travelled reports

Month	No. of ambulances (cumulative)	Total distance traveled by ambulances	Avg. distance traveled per ambulance
Total			

3) District wise distance covered by ambulance report

District	No. of ambulances	Total Kms covered	Avg kms/ ambulance	Total trips	Ave km/trip	Avg trip/vehicle
Total						

4). Ambulance Report

District	Registration No. of vehicle	Month	No. of break down calls	No. of preventive maintenance carried out	No. of accidents	Name of spares replaced	Cost of spares replaced	Back up vehicle available in hrs:min	Total down time hrs :min

5). Equipment Report

District	Registration No. of vehicle	Month	Name of the equipment	No. of break down calls	No. of Preventive maintenance carried out	Name of spares replace d	Total down time hrs:min

6). Equipment Report

S/n	Emp.ID	Emp. Name	Desig nation	Department	Position	Experience	Qualification	Age	Sex

Issued to M/s _____

Emergency Responder Vehicle specifications

a) Feeder Ambulance Vehicles provided shall bear valid Andhra Pradesh State Registration Number only.

b) The feeder ambulance vehicle is to be roadworthy condition as on the date of opening of the tender.

c) The feeder ambulance vehicle should be in perfect running condition.

d) The feeder ambulance vehicle CC should be not less than 250 CC.

e) Width - The width of the two/three-wheeler should not be more than 1.5 meters to enable it to cruise through bad roads and heavy traffic.

f) Vehicle body - All interior materials shall comply with the flammability requirements.

g) Electrical requirements - Batteries shall be positioned to allow maintenance without removing the battery from its securing device. The construction of the battery and all connections to it shall be such as to prevent any possibility of an inadvertent short circuit.

h) Patient Compartment - A separate patient compartment with the patient in semi-reclining position or fully supine position facility should be provided. The enclosure should be rain proof, fireproof, dustproof, and dis-infectable. A window should be provided for the driver to maintain contact with the patient. All openings of the patient compartment shall have seals to protect against the ingress of water and dust. The patient compartment shall be ventilated along with a mini fan for air circulation.

- Length – between 5 ft. 7 inches to 6.0 ft. at the bottom of the patient compartment.
- Apex Height - 6 ft. 6 inches to 7.0 ft. from the bottom of the patient compartment.
- Width - between 2 ft. 2 inches to 2 ft. and 6 inches.
- Seat – Head end elevation - 3 ft. with adjustable elevation.
 - Straight length - 2 ft. 4 inches to 2 ft. 6 inches.
 - Leg end - 1 ft. to 1 ft. 6 inches with adjustable lower end / leg end.

i) Equipment mounting - All items e.g. medical devices, equipment and objects normally carried on the road ambulance shall be restrained, installed or stowed to prevent them becoming a projectile when subjected to accelerations/decelerations. No items shall have sharp

edges or endanger the safety of person road ambulance. Buttons, switches, indicators and controls shall be easily accessible and visible.

j) Provision of Medical Devices - The emergency responder vehicle shall have basic professional equipment for first aid and nursing care and also shall have equipment for basic treatment and monitoring of patients with the current methods of prehospital care. All the equipment required shall be stored in a specified location. All equipment shall be securely and safely stored to prevent damage or injury whilst the vehicle is in motion. The emergency responder vehicle shall be designed and constructed to accommodate all the mentioned devices and provide the following flexibility:

All devices should

- be possible to be carried by one person
- have its own built in power supply (where relevant)
- be capable of use outside the vehicle

k) Ambulance vehicle should not have been converted to run on fuel other than its original manufacture specification.

l) Ambulance vehicle should have been manufactured / fabricated originally as ambulance and should not have been converted to ambulance from some other vehicle.

m) The ambulance vehicle should be registered exclusively in the name of the contractor / firm as ambulance.

n) The ambulance vehicle should have all relevant and valid documents from the statutory authorities in continuous compliance or the statutory requirements including:

- RC Book, Ambulance Registration.
- Valid Road Permit as to ply as a hired ambulance throughout the remote / inaccessible tribal areas of State of Andhra Pradesh.
- Fitness Certificate for the road worthiness.
- Road Tax Clearance.
- Pollution Control Certificate.
- Vehicles full insurance certificates (Driver, Patient & third party).

-Any other requirement stipulated by the statutory authorities from time to time. All the above documents shall remain in the ambulance vehicle at all times.

- o) The ambulance vehicle should carry sufficient fuel at all times.
- p) The ambulance vehicle must have a set of standard tools, essential spares, accessories and available in the vehicle as required for attending breakdown immediately.
- q) The cost of fuel and vehicle maintenance is to be borne by the bidder.
- u) Equipped with oxygen cylinder and patient couch.
- r) May also be used for purpose not specified in tender document.
- s) Bidder should maintain a log book keeping records of the movement of vehicle and the details of kilometers run. The log book should be submitted along with bill for payment. Log book is to be verified by the MO in charge of emergency service.

DRIVERS

- e) The drivers should have valid professional driving license as per relevant Motor Vehicle Act and always carry the same while on the move.
- f) The drivers should have experience of at least three years in driving for feeder ambulances.
- g) The driver should be literate.
- h) The driver should have thorough knowledge of the routes, road and location in their allotted area.
- i) The drivers should possess good health, good manners and good character.
- j) The driver should wear suitable clean labelled uniform.
- k) The drivers will not be allowed to perform duty, if found to be under influence of alcohol or other intoxication substances.
- l) Drivers should be conversant with basic first aid procedures.
- m) The drivers should not be in the habit of negligent / rash driving.
- n) The drivers shall carry a mobile phone to be provided by the Contractor at all times while on duty for communication.
- o) ESI, EPF and other statutory requirements in respect of the drivers is the responsibility of the contractor.

- p) Drivers shall not be allowed to work in continuous shifts.
- q) Drivers/Attendant are required to mark their attendance in the biometric attendance device.
- r) At the beginning of the contract, Contractor shall provide a panel of drivers proposed to be employed by him. The contractor shall at his own expense get the character / anecdotes of the drivers verified through the local police.
- s) The Contractor shall provide the following documents in respect of the drivers in the panel to Security Officer and obtain photo identity pass.
 - Police Verification Report.
 - Photographs - 3 numbers.
 - Aadhar Biometric Attendance of drivers.
 - Only the drivers from the panel shall be allowed to work.
 - Undertaking that Driver is not being charged with challan in last 3 years by RTO.
- t) The vitals of the patient in the compartment should be cast to a screen for the paramedic to continuously assess the patient and provide required medications and treatment if necessary.
- u) The drivers after shifting of the patient to 108 ambulances or to the health facility, the feeder ambulances to be returned to the base location.

SAFETY AND SECURITY

The contractor shall be responsible for his employees observing all the security and safety regulations/ instructions as may be issued by the Commissioner, Health & Family Welfare and MD, NHM, A.P. from time to time.

SECTION - VII

Appendix-A

Community-based Health services provided in the last 5 years.

1. Attach users' certificates notarized regarding satisfactory completion of assignments

Note: Attach an extra sheet for the above Performa if required.

Signature.....

Name

Sl. No.	Assignment Agreement No. & Date	Description of Work / Services provided	Agreement Price of assignment	Date of Commencement	Date of Completion	Was assignment satisfactorily completed/it is ongoing	Address of organization with phone No. where assignment done
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

Appendix-B

PARTICULARS OF THE BIDDER

(To be submitted by all BIDDERS including participant in Consortium)

Sl. No.	Item	Bidder / Partner 1 in case of consortium (Lead Partner)	Partner – 2 in case of consortium
1	Name of the Firm		
2	Type of organization		
3	Address		
4	Date of Registration		
5	EPF		
6	ESI		
7	GST		
10	PAN		
11	Annual Turn Over		
	2021-22		
	2022-23		
	2023-24		
12	Cost of Ambulance services provided		
	2021-22		
	2022-23		
	2023-24		
13	Staff as on/....../2025		

	Medical		
	Nursing and Paramedical		
	Others		
	Total		
14	Number of Ambulances operating		
	2021-22		
	2022-23		
	2023-24		

Detailed operational proposal shall be enclosed. Proposal shall include operational methodology, HR deployment, Software and Hardware applications and other components. Proposal shall also indicate the implementation time lines.

Appendix-C

Forwarding Letter for Technical Bid

(To be submitted by all Service providers in their letterhead)

To

Date:

The Managing Director.
Mangalagiri, Guntur District,
APMSIDC, A.P.

Sub: Bid for Total Service Provider for operation and maintenance of Emergency
Response Services under Bid No., dt: ____

Sir/Madam,

We are submitting, herewith our Bid for providing annual maintenance services / comprehensive maintenance services for

We are enclosing Bank Draft / Bankers Cheque No..... Dated.....
(Amount Ten Lakhs) towards Earnest Money Deposit (EMD), drawn on.....
DD/online /BG in favour of The MD, APMSIDC, Guntur.

We agree to accept all the terms and condition stipulated in your Bid enquiry. We also agree to submit Performance Security as per Clause No. 1.1 of Section VI of Bid Enquiry document.4. We agree to keep performance bank guaranty valid for the period for the period stipulated in your Bid enquiry.

Enclosures:

- 1.
- 2.
- 3.
- 4.
- 5.

Signature of the Bidder.....

Seal of the Bidder.....

Appendix-D

FINANCIAL BID

1. Name of the Bidder:

2. Price Quoted:

Operational Expenditure:

Sl. No.	Description	Monthly Running cost per ambulance Rs.	No of Ambulance (122)	Total Monthly Running cost of all ambulances Rs.
		A	N	$T=A*N$
1	Cost per feeder ambulance per month			

Note:- H1 will be considered based on the total cost T ($A*N$) for the final price evaluation.

(Cost shall be inclusive of operational costs, Capital costs, GST/Taxes, Insurances, medicine, and consumables. etc)

Total Price quoted per month for all the Ambulances is Rs /- in words.....)

There will be 3% escalation in the financial bid in the subsequent years to the preceding year.

Signature & Stamp of Authorized person

Appendix-E

PROFORMA FOR BANK GUARANTEE

To

<Name, Designation and Office Address of Bid Inviting Authority>

WHEREAS.....(Name and address of the Service Provider) (Hereinafter called “ the service provider” has undertaken, in pursuance of agreement No..... dated (Herein after “the agreement”) to provided specific Ambulances.

AND WHEREAS it has been stipulated by you in the said agreement that the service provider shall furnish you with a bank guarantee by a scheduled commercial bank recognized by you for the sum specified therein as security for compliance with its obligations in accordance with the agreement; AND WHEREAS we have agreed to give such a bank guarantee on behalf of the service provider; NOW THEREFORE we hereby affirm that we are guarantors and responsible to you, on behalf of the service provider, up to a total of Rs xxxxxxxx/- (Amount of the guarantee in words and figures rupees xxxxxxxx), and we undertake to pay you, upon your first written demand declaring the service provider to be in default under the agreement and without cavil or argument, any sum or sums within the limits of (amount of guarantee) as aforeside, without your needing to prove or to show grounds or reasons for your demand or the sum specified therein. We hereby waive the necessity of your demanding the said debt from the service provider before presenting us with the demand. We further agree that no change or addition to or other modification of the terms of the agreement to be performed there under or of any of the agreement documents which may be made between you and the service provider shall in any way release us from any liability under this guarantee and we hereby waive notice of any such change, addition or modification. This guarantee shall be valid up to 15 (fifteen) months from the date of signing of agreement i.e. up to..... (Indicate date)

.....

(Signature with date of the authorized officer of the Bank)

.....

Name and designation of the officer

.....

Seal, name & address of the Bank and address of the Branch

Appendix-F

DECLARATION BY SERVICE PROVIDER

I / We agree that we shall keep our price valid for a period of Three years from the date of approval. I / We will abide by all the terms & conditions set forth in the Bid documents No. /

I / We do hereby declare I / We have not been de-recognized / black listed by any State Govt. / Union Territory / Govt. of India / Govt. Organization / Govt. Health Institutions.

Signature of the Service provider:

Date:

Name & Address of the Firm:

Affidavit before Executive Magistrate / Notary Public in INR 50.00 stamp paper.

Appendix-G

Format for Consortium Agreement

THIS JOINT BIDDING AGREEMENT is entered into on this the day of..... 20...
AMONGST

1. {....., a Society/Company registered under the} and having its registered office at (hereinafter referred to as the “First Part” which expression shall, unless repugnant to the context include its successors and permitted assigns)

AND

2. {....., a Society/Company registered under the.....} and having its registered office at (hereinafter referred to as the “Second Part” which expression shall, unless repugnant to the context include its successors and permitted assigns)
3. The above-mentioned parties of the FIRST, SECOND are collectively referred to as the “Parties” and each is individually referred to as a “Party”.

WHEREAS,

- A. Andhra Pradesh Medical Services & Infrastructure Development Corporation (APMSIDC) (hereinafter referred to as the “Authority”), on behalf of the Dr. NTR VS Trust (hereinafter referred to as the “Client”), which expression shall, unless repugnant to the context or meaning thereof, include its administrators, successors and assigns) has invited bids (the “Bids”) by its Request for Proposal No. xxxx dated xxx (the “RFP”) for selection of bidder for “
(th
e“Project”).
- B. The Parties are interested in jointly bidding for the Project as members of a Consortium and in accordance with the terms and conditions of the RFP and other Bidding Documents in respect of the Project, and
- C. It is a necessary condition under the RFP that the members of the Consortium shall enter into a Joint Bidding Agreement and furnish a copy thereof with the Bid.

Now it is hereby agreed as follows:

1. Definitions and Interpretations

In this Agreement, the capitalised terms shall, unless the context otherwise requires, have the meaning ascribed thereto under the RFP.

2. Consortium

The Parties do hereby irrevocably constitute a consortium (the “Consortium”) for the

purposes of jointly participating in the Bidding Process for the Project.

3. Covenants

The Parties hereby undertake that in the event the Consortium is declared the Selected Bidder and awarded the Project, it shall enter into an Agreement with the Client and for performing all its obligations as mentioned in the RFP.

4. Role of the Parties

The Parties hereby undertake that Party of the First Part shall be the Lead Member of the Consortium and shall have the power of attorney from all Parties for conducting all business for and on behalf of the Consortium throughout the contract period.

Responsibilities of the Parties are detailed below:

S.No	Party Name	Role on Project

5. Joint and Several Liability

The Parties do hereby undertake to be jointly and severally responsible for all obligations and liabilities relating to the Project and in accordance with the terms of the RFP and the Contract Agreement that will be signed with the Client upon selection for the Project.

6. Representation of the Parties

Each Party represents to the other Parties as of the date of this Agreement that:

- A. Such Party is duly organized, validly existing and in good standing under the laws of its incorporation and has all requisite power and authority to enter into this Agreement;
- B. The execution, delivery and performance by such Party of this Agreement has been authorized by all necessary and appropriate corporate or Authority action and a copy of the extract of the charter documents and board resolution/ power of attorney in favour of the person executing this Agreement for the delegation of power and authority to execute this Agreement on behalf of the Consortium Member is annexed to this Agreement, and will not, to the best of its knowledge:
 - i. require any consent or approval not already obtained;
 - ii. violate any Applicable Law presently in effect and having applicability to it;
 - iii. violate the memorandum and articles of association, by-laws or other applicable organizational documents thereof;
 - iv. violate any clearance, permit, concession, grant, license or other Governmental authorization, approval, judgment, order or decree or any

mortgage agreement, indenture or any other instrument to which such Party is a party or by which such Party or any of its properties or assets are bound or that is otherwise applicable to such Party; or

- v. create or impose any liens, mortgages, pledges, claims, security interests, charges or Encumbrances or obligations to create a lien, charge, pledge, security interest, encumbrances or mortgage in or on the property of such Party, except for encumbrances that would not, individually or in the aggregate, have a material adverse effect on the financial condition or prospects or business of such Party so as to prevent such Party from fulfilling its obligations under this Agreement;

C. this Agreement is the legal and binding obligation of such Party, enforceable in accordance with its terms against it; and

D. there is no litigation pending or, to the best of such Party's knowledge, threatened to which it or any of its Affiliates is a party that presently affects, or which would have a material adverse effect on the financial condition or prospects or business of such Party in the fulfillment of its obligations under this Agreement.

7. Termination

This Agreement shall be effective from the date hereof and shall continue in full force and effect until the Termination of the Agreement with Client. However, in case the Consortium is either not prequalified for the Project, or does not get selected for award of the Project, this Agreement will stand terminated upon return of the Bid Security by the Client to the Lead Bidder

8. Miscellaneous

- a) This Joint Bidding Agreement shall be governed by laws of India.
- b) The Parties acknowledge and accept that this Agreement shall not be amended by the Parties without the prior written consent of the Client.

IN WITNESS WHEREOF THE PARTIES ABOVE NAMED HAVE EXECUTED AND DELIVERED THIS AGREEMENT AS OF THE DATE FIRST ABOVE WRITTEN.

SIGNED, SEALED AND DELIVERED

For and on behalf of

LEAD MEMBER (BIDDER) by:

(Signature)

SIGNED, SEALED AND DELIVERED

For and on behalf of

SECOND PART by:

(Signature)

Appendix-H
Format for Power of Attorney for Lead Member of Consortium

Whereas (“the Client”) has invited bids for in the State of Andhra Pradesh (“Project”). Whereas, _____, _____ and _____ (collectively the “Consortium”) being Members of the Consortium are interested in bidding for the Project in accordance with the terms and conditions of the Request for Proposal and other connected documents in respect of the Project, and Whereas, it is necessary for the Members of the Consortium to designate one of them as the Lead Member with all necessary power and authority to do for and on behalf of the Consortium, all acts, deeds and things as may be necessary in connection with the Consortium’s bid for the Project and its execution.

NOW THEREFORE KNOW ALL MEN BY THESE PRESENTS

We, _____ having our registered office at _____, M/s. _____, having our registered office at _____, and M/s. _____, having our registered office at _____, {insert the respective names and addresses of the registered office} (hereinafter collectively referred to as the “Principals”) do hereby irrevocably designate, nominate, constitute, appoint and authorize M/s

_____, having its registered office at _____, being one of the Members of the Consortium, as the Lead Member and true and lawful attorney of the Consortium (hereinafter referred to as the “Attorney”) and hereby irrevocably authorize the Attorney (with power to sub-delegate) to conduct all business for and on behalf of the Consortium and any one of us during the bidding process and, in the event the Consortium is awarded the Project, during the execution of the Project, and in this regard, to do on our behalf and on behalf of the Consortium, all or any of such acts, deeds or things as are necessary or required or incidental to the submission of its bid for the Project, including but not limited to signing and submission of all applications, bids and other documents and writings, participate in bidders’ meetings and other conferences, respond to queries, submit information/ documents, sign and execute contracts and undertakings consequent to acceptance of the bid of the Consortium and generally to represent the Consortium in all its dealings with the Client, and/ or any other authorized representative of the Client or any person, in all matters in connection with or relating to or arising out of the Consortium’s bid for the Project and/ or upon award thereof till the Contract Agreement is entered into with the Client.

AND hereby agree to ratify and confirm and do hereby ratify and confirm all acts, deeds and things lawfully done or caused to be done by our said Attorney pursuant to and in exercise of the powers conferred by this Power of Attorney and that all acts, deeds and things done by our said Attorney in exercise of the powers hereby conferred shall and shall always be deemed to have been done by us/Consortium.

IN WITNESS WHEREOF WE THE PRINCIPALS ABOVE NAMED HAVE EXECUTED THIS POWER OF ATTORNEY ON THIS DAY OF _____ 2025.

For _____

(signature)

(Name & Title)

For _____ (signature) (Name & Title)

(To be executed by all the Members of the Consortium)

Witnesses: [Notarised]

- 1.
- 2.

Notes:

1. The mode of execution of the Power of Attorney should be in accordance with the procedure, if any, laid down by the applicable law and the charter documents of the executant(s) and when it is so required, the same should be under common seal affixed in accordance with the required procedure.
2. Also, wherever required, the Bidder should submit for verification the extract of the charter documents and documents such as a resolution/ power of attorney in favour of the person executing this Power of Attorney for the delegation of power hereunder on behalf of the Bidder.
3. Power of Attorney should be executed on a non-judicial stamp paper of appropriate value as relevant to the place of execution (if required under applicable laws)

SECTION - VIII

Service Level Agreement

1. BACKGROUND

1.1 APMSIDC desirous of outsourcing the services relating to operation and Maintenance of Feeder Ambulances in Visakhapatnam district of State of AP had invited Request of Proposal from eligible bidders vide TE No _____ dated _____. <Name of the Service Provider> having submitted his bid in response to the tender enquiry and having been found technically qualified as per the conditions in the same TE, has been awarded the agreement by the competent authority in the APMSIDC GOVERNMENT OF AP <Name of the Service Provider> has also performed required obligations after the award of agreement was communicated to him.

1.2 Both APMSIDC and <Name of the Service Provider> hereinafter referred to as Service Provider hereby willingly enter into this agreement and agree to abide by all obligations enjoined on them by this agreement.

2. SERVICE AIMS

1. Provide the Feeder Ambulance Services to the Conventional Ambulances in the 7 ITDA areas of Andhra Pradesh. Feeder Ambulance Services consist the following components
 - a. Operation and maintenance of Feeder Ambulance Services through 108 toll free number to identify and respond to medical emergencies and to support the existing fleet of Conventional Ambulances.
 - b. Provide advanced Information and Communication Technology for providing quality Emergency Response Services to the People.
2. IT System to be strengthened to integrate feeder ambulance services in tribal areas to be linked with regular ambulances on real time basis, so as to provide seamless transport to the required hospital facility.
3. Operation and maintenance of Ambulances services include the
 - a. Operation and maintenance of feeder ambulances
 - b. Maintenance of Medical, on Medical and ICT equipment in the ambulances and replace with the new one in case of permanent nonfunctional of equipment.
 - c. Providing medical consumables, surgical consumables etc required in ambulance from day to day.

- d. Providing manpower trained manpower and specified medical equipment and treatment that will stabilize the patients and then transport them to the nearest health facility within the shortest reasonable possible time.
 - e. Trained manpower shall include provision of Emergency Management Technician and Driver in ambulance on 24X7 bases.
 - f. Provide managerial staff at State level, District level and at sub district level. There shall be at least one supervisory staff for every 5 to 6 ambulances, one supervisory officer per district.
 - g. Obtain insurances, licenses and permits as required by the law from the respective competent authorities.
4. Providing advanced Information and Communication Technology includes
- a. Provision of GPS devices to all the ambulances for tracking and monitoring.
 - b. Provision of appropriate hardware and software for handling the movement of ambulances through geo mapping
 - c. All the data (including Voice calls), arises from receipt of call to call centre, dispatch ambulances, post transport follow up and feedback shall be stored in exclusive data base centre.
 - d. Every ambulance shall be provided with tab/mobile phone with appropriate software application for capturing the details of services provided to the patient in the ambulances and details of health institution to where patient is transported.
5. All the ambulances shall be maintained with the standard logo as provided by the Government. In case of wear and tear to the logo it shall be replaced with new logo immediately.
6. Shall conduct the periodical trainings to the Driver cum EMTs, and management staff and call centre staff. Periodicity shall not exceed quarter. Training action plan, training material, methodology shall have prior approval of Government.
7. Service provider is responsible for all the legal disputes arising out of transportation of medical emergencies.
8. Shall obtain the feedback from the beneficiaries on regular basis through IVRS system without any manual interference. Target population, questioner and methodology will be provided by the government.
9. Shall conduct quality audit on biannual basis through an independent agency identified by the Government

SERVICE LEVEL INDICATROS

1. Every call for attending emergency shall be received by the Call Centre. There shall be no call unattended.
2. Every Medical emergency requested shall be transported from scene to Conventional Ambulance. There shall not be any single emergency unattended.
3. Indicative SLIs are given under

Sl.No.	Details of Indicator	Benchmark
1	Number of emergencies / patients transported per ambulance per day	75 emergencies per month per ambulance
2	Number of ambulances on road every day	100%
3	Reach Time (15 minutes) (Number of transportations exceed SLI shall not be more than 5%)	15 Minutes
4	Availability of Drugs, Surgicals and Consumables etc., (10% buffer to be maintained)	100%

Responsibilities of Contracting Authority:

1. Provide the parking places to all the Feeder Ambulances.

6. INFORMATION AND REPORTING REQUIREMENTS

1. The Service provider shall ensure that information, records and documentation necessary to monitor the agreement are maintained and are available at all times to the Contracting Authority or its authorized representative. The Service Provider hereby agrees that he and all his staff shall at all times co-operate with the reasonable processes of the Service procuring agency for the monitoring, evaluation and carrying out quality audit and financial audit by any third party authorized by Contracting Authority .
2. The Service provider hereby agrees to maintain all relevant data and records of all patients transported.
3. The Service provider further agrees to maintain confidentiality of these data and records and commits that such data and records will not be shared with any third party for any purpose.

4. The Service provider agrees to provide data to Contracting Authority as per requirement of Contracting Authority. Failure to do so may entail cancellation of the agreement.
5. The Service provider hereby agrees to maintain log book showing all movements of the vehicle and keep record of consumption of POL. The log book should be maintained as per the format in vogue in any government office. Logbook shall be made available for verification by the any authority nominated by Service procuring agency.
6. The Service provider agrees that the vehicles will not be used to advertise any product or organization including the Service provider's own.

7. PERFORMANCE

1. A half yearly review meeting will be held and attended by appropriate levels of officials of Service procuring agency and Service providers to consider the performance, the anticipated outcome of the agreement and future service developments and changes. Further meetings may be arranged at any time to consider significant variation in the terms or conduct of the agreement and where corrective action on either part is indicated.
2. Both the Service procuring agency and Service Provider agree to consider introduction of any further service in line with any new initiative of the government or in response to local demand which could not be anticipated earlier.
3. Both the Service procuring agency and Service Provider agree that such services should be provided without extra cost. However, if it is felt by both the parties that the additional services would require additional resources/manpower, the Service procuring agency agrees to consider reasonable increases in amount disbursed to the Service provider. It is agreed that the Service provider will be under no obligation to introduce the additional service unless a commitment to reimburse additional cost has been provided to him.

8. HEALTH AND SAFETY

1. The Service Provider agrees to adequately train, instruct and supervise staff to ensure as is reasonably practicable, the health and safety of all persons who may be affected by the services provided under the agreement.
2. The Service provider agrees that he would collect periodic feedback from the patients through structured questionnaire at his cost. The periodicity will not be less

than once in six months. Responses to the questionnaire will be submitted in original to the Service procuring Agency Telephone numbers where patients can lodge their complaints to be displayed on MMU.

9. DATA PROTECTION, CONFIDENTIALITY AND RECORD KEEPING

1. All Service Users have a right to privacy and therefore all information and knowledge relating to them and their circumstances must be treated as confidential. The Service Provider must advise all staff on the importance of maintaining confidentiality and implement procedures which ensure that Service User's affairs are only discussed with relevant people and agencies.
2. The Service Provider shall comply with all legislations, which otherwise would have been applicable had the services been run directly by the Government agencies.

10. STAFFING

1. The Service provider will ensure that, at all times, it has sufficient suitably trained staff to ensure that services comply with all the statutory requirements and meet patient needs.
2. The Service provider agrees that he would ensure that an adequate complement of staff in each ambulance.
3. The Service provider agrees that a record of qualifications shall be maintained by the provider and available for inspection.
4. The Service provider hereby expresses his commitment to training and staff development and the maintenance of professional knowledge and competence.

11. FINANCE ARRANGEMENTS

1. Both parties agree that the payment arrangements as quoted by the Service provider in his bid against the above mentioned tender enquiry and/or subsequent bid submitted by him as a result of negotiations shall be adhered to.
2. It is agreed that payments would be made monthly basis. To facilitate this, the Service provider will submit invoices with all documents in support of his claims on every last working day of the month. On the basis of such invoices, the Service procuring agency agrees to provisionally transfer the amount electronically to the Service provider's bank account within fifteen days from submission of invoices.
3. The Service procuring agency or any other agency as per existing rules of the government will have the right to examine the invoices as required under relevant rules. If such examination reveals any extra payment already provisionally made,

the extra amount will be adjusted from the next payment due to the Service provider under intimation to him.

4. In case the last day of the month is holiday as a result of which invoices cannot be submitted, the Service procuring agency agrees to make payment of an equivalent amount of the last invoice submitted. Additional amount paid if any on the basis of actual invoices submitted later and examination thereof will be adjusted from subsequent payments under intimation to the Service provider.
5. The Service provider hereby agrees to maintain all required books of accounts and agrees to provide them to such audit as may be required to be carried out.
6. The Service provider hereby agrees that the Service procuring agency will deduct from all payments such amount of statutory taxes and duties as he is required to deduct under provisions of law. The amount would be deducted if the MMU becomes non-operative as mentioned and calculated above in Section VI.

12. VARIATION

1. This Service Level Agreement may not be varied unless a variation is agreed in writing and signed by all parties.

13. DISPUTES

1. The agreement shall be governed by and interpreted in accordance with the laws of India for the time being in force. The Court located at the place of issue of agreement shall have jurisdiction to decide any dispute arising out of in respect of the agreement. It is specifically agreed that no other Court shall have jurisdiction in the matter.
2. Both parties agree to make their best efforts to resolve any dispute between them by mutual consultations.

14. ARBITRATION

1. If the parties fail to resolve their dispute or difference by such mutual consultations within thirty days of commencement of consultations, then either the Service procuring agency or the Service provider may give notice to the other party of its intention to commence arbitration, as hereinafter provided. The applicable arbitration procedure will be as per the Arbitration and Conciliation Act 1996 of India. In that event, the dispute or difference shall be referred to the sole arbitration of an officer as the arbitrator to be appointed by the APMSIDC. If the arbitrator to whom the matter is initially referred is transferred or vacates his office or is unable to act for any reason, he / she shall be replaced by another person appointed by

APMSIDC to act as Arbitrator.

2. Work under the agreement shall, notwithstanding the existence of any such dispute or difference, continue during arbitration proceedings and no payment due or payable by the APMSIDC or the firm / contractor shall be withheld on account of such proceedings unless such payments are the direct subject of the arbitration.
 3. Reference to arbitration shall be a condition precedent to any other action at law.
- 14.4 Venue of Arbitration: The venue of arbitration shall be the place from where the agreement has been issued.

15. TERMINATION

1. Either party may terminate this agreement by giving not less than 3 months notice in writing to the other. This notice shall include reasons as to why the agreement is proposed to be terminated.
2. The Service Procuring agency may terminate the agreement, or terminate the provision of any part of the Services, by written notice to the Service provider with immediate effect if the Service Provider is in default of any obligation under the agreement, where the default is capable of remedy the Service Provider has not remedied the default to the satisfaction of the Service procuring agency within 30 days of at least two written advice, or such other period as may be specified by the Service procuring agency, after service of written notice specifying the default and requiring it to be remedied; or b. the default is not capable of remedy; or c. the default is a fundamental breach of the agreement
3. If the Service procuring agency terminates the agreement and then makes other arrangements for the provision of the Services, it shall be entitled to recover from the Service provider any loss that had to be incurred due to such sudden termination of agreement.
4. Both the parties agree that no further payment would be made to the Service provider, even if due till settlement of anticipated loss as a result of premature termination of the agreement.
5. The APMSIDC reserves the right to terminate the agreement without assigning any reason if services of the ambulances create serious adverse publicity in media and prima facie evidence emerges showing negligence of the Service provider.

16. INDEMNITY

1. By this agreement, the Service provider indemnifies the Service procuring agency against damages of any kind or for any mishap/injury/accident caused to any

personnel/property of the Service provider while performing duty.

2. The Service provider agrees that all liabilities, legal or monetary, arising in any eventuality shall be borne by the Service provider.

17. PERIOD OF AGREEMENT

1. This Service Level Agreement shall be for a period of five years and take effect on To.....until..... The period may be extended with the agreement of both parties after mutual negotiations.

Signed by Contracting Authority

Signed by Services provider