उमेद
क्षितिज नवे, विश्वास नवा...

सत्यमेव जयते

आजीविका AAJEEVIKA

महाराष्ट्र शासन
ग्राम विकास व पंचायतराज विभाग
महाराष्ट्र राज्य ग्रामीण जीवनोन्नती अभियान
राज्य अभियान व्यवस्थापन कक्ष
सिडको भवन, ५ वा मजला (दक्षिण बाजु) सी.बी.डी. बेलापूर, नवी मुंबई पिनकोड: ४००६१४
दूरध्वनी क्रमांक: ०२२-२७५६२५५२/५४ | Website: www.umed.in Email Id: procurement@umed.in

MSRLM/SMMU/Health checkup/5773 /2025-26 Date: - /12/2025
01/01/2026

To,

M/s .....,

.....,

Subject: - Request for Quotation (RFQ) for Smart Health packages from Laboratory / Hospital.

Dear Sir/Madam,

1) The Maharashtra State Rural Livelihoods Mission (MSRLM) has been launched in Maharashtra in July 2011 as a registered organization under the aegis of the DAY-NRLM endeavors to impact rural poverty through a range of comprehensive and strategic livelihoods interventions in a time bound manner.

2) It is proposed to organize a "Health Checkup Medical Camp" on 2nd January, 2026 to review the health status of all the officers and employees of the office at the State Mission Management Cell, CBD Belapur, Navi Mumbai.

3) The camp will provide a "Smart Health Package" for health screening and preventive measures for employees.

4) The list of health check-ups mentioned in the health package for health check-ups in this health check-up camp is as follows:

5) You are invited to submit your most competitive quotation as per the details mentioned below :

Sr.No.	Name of the Test includes in Package	Key Inclusions	Persons
1	Blood Tests	* Complete Blood Count (CBC) * Erythrocyte Sedimentation Rate (ESR)	90
2	Diabetes Profile	* HbA1c (Glycated Hemoglobin) * eAG (Estimated Average Glucose) * Glucose - Fasting * Glucose - Post Prandial (PP) * Glucose - Random	
3	Iron Studies	* Serum Iron * Total Iron Binding Capacity (TIBC) * Transferrin Saturation	

4	Thyroid Profile	* Total T3 * Total T4 * Thyroid Stimulating Hormone (TSH)	
5	Lipid Profile	* Total Cholesterol * Triglycerides * HDL, LDL, VLDL, Non-HDL * LDL/HDL Ratio * Cholesterol/HDL Ratio	
6	Kidney Function	* Blood Urea Nitrogen (BUN) * Creatinine * Urea * BUN/Creatinine Ratio * Uric Acid * Calcium * eGFR	
7	Liver Function	* Total, Direct & Indirect Bilirubin * AST/SGOT, ALT/SGPT * Alkaline Phosphatase * Total Protein, Albumin, Globulin * A/G Ratio * Gamma GGT	
8	Urine Complete Examination	* Physical Examination * Biochemical Examination * Microscopic Examination	
9	Vitamins	* Vitamin B12 * 25 - OH Vitamin D Hormonal & Special Tests * PSA -Total * Testosterone	

6) Qualification criteria

a. Copy of National Accreditation Board for Testing and Calibration Laboratories (NABL) Certificate

b. PAN Card

c. Shop Act of Laboratory / Hospital Registration Certificate

7) Quotation Price:-

a. The contract shall be for the full quantity as described above. Corrections, if any, shall be made by crossing out initially, dating & rewriting.

b. The quotation should be inclusive of all duties, taxes & other levies payable by the contractor under the contract shall be included in total price.

c. GST in connection with the sale/delivery of services shall be shown separately. But it will not be taken into account in evaluation.

d. The price shall be quoted in Indian Rupees only.

e. The quoted rates shall inclusive of cost towards delivery & installation at consignee place.

f. The rates quoted by the agency shall be fixed for the duration of contract and in case of award shall not be subject to adjustment on any account.

8) Validity of quotation:-

Quotation shall remain valid for the period not less than 30 days after the deadline date specified for submission.

9) Evaluation of Quotations: -

a. The Purchaser will evaluate and compare the quotations determined to be substantially responsive i.e. which
b. signed;
c. Conform to the terms and conditions and specifications;
d. Fulfil all qualification criteria;
e. Quotation submitted in a prescribed format;
f. Alternative price/conditional offer shall not be accepted;
g. GST in connection with the services will not be taken into account in evaluation.
h. Quotation shall be evaluated separately for each item

10) Terms and Conditions :-

a. Each bidder shall submit only one quotation.
b. Bidder shall not contract other bidder in matter relating to this Quotation.
c. Conditional quotations which are not in line with this request for quotation shall be treated as non-responsive.
d. Quotations must be submitted as per the attached format in a sealed envelope. Quotation in any other format and by any other means will not be accepted for evaluation.

11) Award of contract: -

a. The SMMU-MSRLM will award the contract to the bidder whose quotation has been determined to be substantially responsive and who has offered the lowest evaluated quotation price.
b. Notwithstanding the above, the SMMU-MSRLM reserves the right to accept or reject any quotations and to cancel the bidding process and reject all quotations at any time prior to the award of contract.
c. The bidder whose quotation is accepted will be notified of the award of contract by the SMMU-MSRLM prior to expiration of the quotation validity period. The terms of the accepted offer shall be incorporated in the Supply order.

12) Tentative date for Healch checkup medical camp: 2nd January, 2026

13) Place for Healch checkup medical camp: Maharashtra State Rural Livelihood Mission (MSRLM) 5th floor, CIDCO Bhavan, CBD Belapur, Navi Mumbai – 400614.

14) Quotation Submission:-

a. Each bidder shall submit only one quotation in a sealed envelope boldly superscript as "**Quotation for Smart Health Checkup packages from Laboratory / Hospital**"
b. You are requested to provide your offer latest by 11.00 AM hours on 09/01/**2026** to above mentioned office address.

15) Opening of Quotation: -

Quotations will be opened in the presence of bidders representatives and SMMU-MSRLM representatives who choose to attend at Maharashtra State Rural Livelihood Mission, 5th Floor, CIDCO Bhavan, South wing, CBD Belapur, Navi Mumbai - 400614 on 09/01/**2026 @ 11.30 PM.**

16) Payment:

The payment will be made within two weeks from the date of submission of original tax invoice along with the installation report. Applicable GST will be paid on submission of invoice/bill.

Nilesh Sagar IAS
Chief Executive Officer
Maharashtra State Rural Livelihoods Mission

QUOTATION FOR MAT

(ON THE LETTER HEAD OF LABORATORY)

To

Date:-_____

Chief Executive Officer,
Maharashtra State Rural Livelihoods Mission,
5th Floor, CIDCO Bhavan South wing
CBD Belapur, Navi Mumbai -400614

Sub: - Regarding submission of Quotation for Smart Health Checkup packages from Laboratory / Hospital.

Ref: Your quotation request letter no. **MSRLM/SMMU/Health checkup/**5773**/2025-26**
Date: - 01/06/2026

Dear Sir,
As per your requirement, we are glad to submit you our most reasonable and competitive rates as under

Sr. No.	Name of the Test includes in Package	Key Inclusions	Person	Per person cost of Package in Rs.	Total Cost of Package in Rs. Without GST
1	Blood Tests	* Complete Blood Count (CBC) * Erythrocyte Sedimentation Rate (ESR)	90		
2	Diabetes Profile	* HbA1c (Glycated Hemoglobin) * eAG (Estimated Average Glucose) * Glucose - Fasting * Glucose - Post Prandial (PP) * Glucose - Random			
3	Iron Studies	* Serum Iron * Total Iron Binding Capacity (TIBC) * Transferrin Saturation			
4	Thyroid Profile	* Total T3 * Total T4 * Thyroid Stimulating Hormone (TSH)			
5	Lipid Profile	* Total Cholesterol * Triglycerides * HDL, LDL, VLDL, Non-HDL * LDL/HDL Ratio * Cholesterol/HDL Ratio			
6	Kidney Function	* Blood Urea Nitrogen (BUN) * Creatinine * Urea * BUN/Creatinine Ratio * Uric Acid * Calcium * eGFR			
7	Liver Function	* Total, Direct & Indirect Bilirubin * AST/SGOT, ALT/SGPT * Alkaline Phosphatase * Total Protein, Albumin, Globulin * A/G Ratio * Gamma GGT			
8	Urine Complete Examination	* Physical Examination * Biochemical Examination * Microscopic Examination			

9	Vitamins	* Vitamin B12 * 25 - OH Vitamin D Hormonal & Special Tests * PSA -Total * Testosterone			
	Total Amount in Rs.				
	Add GST				
	Net Amount including GST in Rs.				

We agree to do Smart Health Checkup package in accordance with the terms and condition and key inclusions mentioned in the invitation for quotation.

We hereby certify that we have taken steps to ensure that no person acting for us or on behalf will engage in bribery or collusive agreements with competition.

Name :-

Address :-

Telephone no. :-

Fax no. : -

Signature of the Laboratory / Hospital with stamp