



Letter No. 12009 / NHM/ 18

Date: 13/10/18.

To

The Editor, The Samaj  
(Through the Local Corrospendent. Kandhamal)

The Editor, The Dharitri  
(Through the Local Corrospendent, Kandhamal)

Sub : Publication of the advertisement.

Sir,

Please find here with a specimen copy of the advertisement for Publication of the same in your daily news paper (One time) by dt. 14.10.18 consuming minimum space and submit the bill as per I&PR rate along with a copy of the supplement to the undersigned within 7 days for payment.

Yours faithfully,

[Signature] 12-10-18  
CDM&PHO-cum- District Mission Director,  
NHM, Kandhamal

Date: 13/10/18

Memo No. 12008 / 18

1. Copy to the DIO, NIC, Kandhamal for information with a request to publish the same along with the enclosures (enclosed herewith) in the district website.
2. Copy to the Head Clerk, O/o the CDMO, Kandhamal for information and necessary action.
3. Copy to the DAM, NHM, Kandhamal for information and necessary action.
4. Copy to all the Members of the purchase/tender committee for information with a request to attend the meeting as per the schedule date, time & venue.

[Signature] 12-10-18  
CDM&PHO-cum- District Mission Director,  
NHM, Kandhamal



ZILLA SWASTHYA SAMITI, KANDHAMAL  
OFFICE OF THE CDM&PHO-CUM-DISTRICT MISSION DIRECTOR, KANDHAMAL

**Expression of Interest**

No. 12007 / NHM /18

Dt. 13 / 10 / 2018

Sealed proposals as per prescribed RFP document are invited from interested eligible NGOs for management of the Delivery Van & Bike Ambulance in Kandhamal district. The eligible criteria, the terms of reference and the formats for submission of bid as set forth in the RFP document can be downloaded from the website [www.kandhamal.nic.in](http://www.kandhamal.nic.in). The details of the location where the vehicles will be engaged are mentioned in the RFP document. Interested bidders fulfilling the eligibility criteria may submit their proposals separately (with EMD & document as per RFP) to the O/o: CDM&PHO, DHH Phulbani, Kandhamal. Proposal(s) complete in all respect should reach the undersigned on or before **05.00 PM** of **30/10/2018** through Regd/Speed post & courier and the same will be opened on **31.10.18** at **04.30 PM** in the office chamber of the undersigned. The undersigned reserves the right to reject any or all the tender(s) without assigning any reason thereof.

Sd/-  
CDM&PHO cum District Mission Director  
NHM, Kandhamal

# MANAGEMENT OF DELIVERY VAN & BIKE AMBULANCE IN KANDHAMAL DISTRICT

## OVERVIEW:

In an Innovative intervention towards providing alternative transportation mechanism to the Pregnant Mothers of Kandhamal district, EoI is being invited from the NGOs working in the district for management of the Delivery Van & Bike Ambulance under PPP Mode.

## OBJECTIVES:

Kandhamal has witnessed significant improvements in the Health infrastructure in recent years. IMR & MMR are very crucial indicators of Health care system. During the last 1 year, it has been observed that Institutional Delivery of the district have been increased to a greater extend due to introduction of Bike Ambulance and allied activities. Now, the district administration planned to scale up the same by engaging more Bike Ambulances & Delivery Van in the district. At present, three Nos. of Bike Ambulances are in operation in three blocks namely Baliguda, Daringibadi & Phiringia.

Further, considering the on road delivery of the Pregnant Women during transportation, the district administration has planned an innovative idea for launching of Delivery Van for the difficult areas of the district. The Delivery Van will not only shift the patient from the village to the nearby facility but also provide on board delivery of the Mother.

## **Basic Objective are**

1. Provide an alternative free transportation vehicle to the people to reach the hospital timely.
2. To address golden hour in emergency cases for injury, accident etc.
3. Create health awareness in the remote area/village utilizing the vehicle as per need.

## **Scope of Work:**

1. To cover the difficult areas of the block.
2. Each Bike Ambulance will cover 5 to 6 sub centre Areas.
3. All Pregnant Women, sick neonates and children up to 5 years and accident/ injury cases will be shifted to the nearest health facility.
4. The Delivery Van will be positioned in the Block/District Headquarter and at the time of call the same will be moved as per feasibility.

## **Mode of operation:**

It was decided to operate the same through PPP mode by involving Local NGOs of the district.

## **Other Roles & Responsibilities of Partner NGO:**

*SAD*

1. To appoint necessary skilled and trained Driver for operating the vehicle (Delivery Van & Bike Ambulance) and must have a valid driving licence.
2. The driver must be available at all times with dress code, follow all motor vehicle rules in force.
3. Ensure proper behavior of the driver with patients, service provider, officials, villager etc.
4. The vehicle (Bike Ambulance) must not be driven at speed of more than 25 km/hr. Further during running of the vehicle special care of the vehicle with speed to be taken in turning area.
5. Agency must ensure the vehicle should not be used for any other purpose, other than that specified.
6. Ensure vehicle must have valid insurance.
7. Must ensure proper and smooth transportation of patients. No risk to be taken for running the vehicle in the difficult pocket such as river, hilly areas, odd road etc. If so found the driver & agency will be solely responsible for the occurrence.
8. Routine maintenance of the vehicle must be carried out, at regular intervals / as and when needed by the agency to keep it in good roadworthy condition. Proper parking in safe location must be ensured.
9. To identify and provide transportation service to the beneficiaries such as Pregnant Women, Neonate, emergency cases, IEC/BCC activities in the identified area.
10. Take steps for mobilization and providing maximum benefits to the people by the services.
11. To submit timely reports to the CDM&PHO-cum- District Mission Director, NHM, Kandhamal through the Block Public Health Officer on monthly basis.
12. Make proper and close co-ordination with Block & district administration.
13. Any other task assigned from time to time.



14. To make adequate publicity and IEC activities for awareness of general public regarding the scheme.

15. The role of the District Administration and the NGO/Agency will be as follows;

<b>District Administration</b>	<b>Partner NGO</b>
1. To provide the vehicle.	1. Provide services to the beneficiaries.
2. To select the NGO.	2. To take good care of the vehicle provided by the department.
3. To provide healthcare services to the patients, transported under this scheme.	3. To provide timely report to the district administration.
4. To monitor the progress and achievements of this scheme.	

**Number of Staff to be engaged in the Delivery Van:**

- |   |   |    |
|---|---|----|
| 1. Staff Nurse (Must have Passed GNM Course)              | - | 02 |
| 2. Driver (Having Requisite License)                      | - | 02 |
| 3. Attendant cum Sweeper (Minimum 7 <sup>th</sup> Pass. ) | - | 02 |

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The Location where the vehicles will be engaged is as follows:

Sl. No.	Location of the Vehicle	Name of the Block	Type of Vehicle	Remarks
1	Katingia	Daringibadi	Bike Ambulance	
2	Khamankhol	Baliguda	Bike Ambulance	
3	Sardingia	Phiringia	Bike Ambulance	
4	Pakari	Kotagarh	Bike Ambulance	
5	Lankagarh	Tumudibandha	Bike Ambulance	
6	<b>Phiringia CHC</b>	<b>Phiringia</b>	<b>Delivery Van</b>	

NB: As per requirement, the position of the vehicle may be relocated.

**Budget:**

**A. Bike Ambulance**

Sl. No.	Budget Head	Unit Cost in Rs	Remarks
1	Salary of Driver (As per the Labor Act)	6,000/-	5000 + 1000(as incentive @ Rs 50 per case for mobilization after 20 cases)
2	Fuel Expenses	5,000/-	As per actual
3	Mobilization, IEC/BCC	1,000/-	For first 3 Months only.
4	Maintenance of Bike Ambulance	1,000/-	As per actual
5	Operation cost to NGO	2,000/-	
	Total operational cost per month	15,000/-	

Source of Funding: Corpus grant.

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## B. Delivery Van

Sl. No.	Budget Head	Unit Cost	Units	Total	Remarks
1	Salary of Staff Nurse	11000	2	22,000	Rs. 10,000 + 1000(as incentive @ Rs 50 per case for mobilization after 20 cases)
1	Salary of Driver	7000	2	14,000	Rs. 6000 + 1000(as incentive @ Rs 50 per case for mobilization after 20 cases)
2	Salary of Attendant cum Sweeper	6000	2	12,000	Rs. 5,000 + 1000(as incentive @ Rs 50 per case for mobilization after 20 cases)
2	Fuel Expenses per month	15000	1	15,000	As per actual
3	Mobilization, IEC/BCC	1000	1	1,000	For first 3 Months only.
4	Maintenance of the Vehicle	2000	1	2,000	As per actual
5	Operation cost to NGO	5000	1	5,000	
<b>Total operational cost per month</b>				<b>71,000</b>	

NB: The Headquarter of the above staff will be fixed in the identified institution and as per requirement they will move to the field with the Vehicle.

Source of Funding: Corpus grant.

### 3.1 Eligibility Criteria

The entities fulfilling the following criteria are eligible to apply:

1. It must be registered under Society Registration Act/Indian Trust Act.
2. To be eligible to apply, the entity **must be having existence for at least 5 years as on 30<sup>th</sup> September, 2018**. Organizations established/registered after 30<sup>th</sup> September, 2013 are not eligible to apply.
3. The entities should have an annual turnover of at least Rs 10 lakhs per annum in the last three financial years (2014-15, 2015-16, and 2016-17).
4. The entity must enclose documents of having minimum of Rs. 5 lakhs as fixed assets in the name of the entity in terms of Land, building and other fixed assets
5. The entity should not be "blacklisted"/ debarred from participating in any tendering process by any State Govt./Central Govt. Institutions. An affidavit to this effect is to be submitted.
6. The entity or any of its office bearers must not have been convicted/case pending against them by any court of law in India or abroad for any civil/criminal offences. An affidavit to this effect is to be submitted.
7. If based on any adverse report against the organization from the District.
8. Entity should have been registered under 12-A of Income Tax exemption.

### 3.3. Submission and Signing of Proposal

The proposal shall be submitted in the following ways:

- i. The Proposal shall be typed or written legibly in English in indelible ink and shall be signed by the authorized representative of the entities.
- ii. Any interlineations, erasures or overwriting shall be valid only if the person or persons signing the Proposal have put his/their initials prior to submission of the same.

### 3.4. Packing, Sealing and Marking of Proposal

The proposal and attached documents must be inserted in a single envelope, along with applicant's name and address in the left hand corner of the envelope and superscribed as **Proposal for management of the Delivery Van & Bike Ambulance in Kandhamal district under ZSS, Kandhamal.**

The application envelopes shall be addressed to the CDM & PH Officer cum District Mission Director, NHM, kandhamal. If the outer envelope is not sealed and marked as mentioned above, then the O/o the CDM & PH Officer will assume no responsibility for the proposal's misplacement or premature opening. Telex, cable or facsimile proposals will be rejected.



### 3.3. EMD deposit

EMD of Rs.10,000/- for Bike Ambulance and Rs. 10,000/- for Delivery Van in the shape of a Demand Draft or Banker's Cheque in favour of ZSS, CDM & PHO, Kandhamal, is to be submitted along with the bid. Details of the Demand Draft or Banker's Cheque (DD/BC No., date, name of the Bank) should be mentioned in the bid.

The EMD will be refunded after selection of the successful bidder. No interest will be paid on the EMD. **Bid proposals not accompanied by EMD will not be considered.** EMD of the bidder will be forfeited if it is discovered that the bidder has submitted false or forged or incorrect or misleading documents or information.

### 3.5. Sequence of Proposal submission:

The following sequence must be followed while submitting the proposal.

Sl.no	Sequence of the Document to be submitted
1	Covering letter for the project by the Entity in its letter head – <b>Document. 1-</b> To be submitted in <b>Form - T1.</b>
2	Name, Address, Registration details of the Agency – <b>Document. 2-</b> To be submitted as per <b>Form T2.</b>
3	Copy of the Registration Certificate ( <b>Document. 3</b> )
4	Annual Financial Statements with audit report attached for the last 3 years: 2014-15, 2015-16, 2016-17 ( <b>Document. 4</b> ). To be submitted in <b>Form-T3</b>
5	Names of the Office Bearers along with their addresses (in case of Trusts and Registered Societies) / Names of the key personnel along with their addresses for Other Organizations ( <b>Document- 5</b> )
6	A certificate that the bidder has never been "blacklisted"/ debarred from participating in any tendering process by any State Government/central Government institutions. The bidder may provide details of circumstances of the 'cases'. ( <b>Document- 6</b> ) To be submitted in <b>Form – T4.</b>
7	An undertaking that the office bearer of the Organization has not been convicted/case pending by any court of law in India or abroad for any criminal offence. ( <b>Document- 7</b> ). To be submitted <b>Form – T5.</b>
8	An undertaking that the Organization is willing to sign the service level agreement. ( <b>Document 8</b> ). To be submitted in <b>Form – T6.</b>

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9	Copy of the resolution of the competent authority in the Organization authorizing the signatory to respond to this invitation ( <b>Document 9</b> ).
10	Copy of PAN card, ( <b>Document: 10</b> )
11	Copy of Bank Pass Book, ( <b>Document: 11</b> )
12	Income Tax and Other Tax registration certificates: Registration under 12-A of Income tax act 1961. ( <b>Document 12</b> ).

All the information, documents, filled in forms must be submitted with clear indication of the Page Number as per above. In case the document contains more than one page, it should be properly bound and identified with clear heading on the first page. All pages of above supporting documents and proposal must be signed by the Authorized signatory of the entity along with seal, failing which the application shall be rejected.

### 3.6. Financial Bid:

No financial bid is required to be submitted as this is a fixed cost based project.

### 3.7. Number of Proposals

Interested bidders fulfilling the eligibility criteria may submit their proposal **separately** for Bike Ambulance and Delivery Van.

### 3.8. Cost of Proposal

The bidder shall be responsible for all the cost associated with the preparation of their proposals and their participation in the selection Process. The district authority will neither be responsible nor in any way be liable for such costs, regardless of the conduct or outcome of the selection Process.

### 3.9. Acknowledgement by the bidder

- (a) It shall be deemed that by submitting the Proposal, the bidder has: -
- (i) Made a complete and careful examination of the RFP;
  - (ii) Received all relevant information requested from the concerned District authority.
  - (iii) Acknowledged and accepted the risk of inadequacy, error or mistake in the information provided in the RFP or furnished by or on behalf of the concerned district authority relating to any of the matters stated in the RFP Document;
  - (iv) Satisfied itself about all matters, things and information, necessary and required for submitting the Proposal and performance of all of its obligations there-under;
  - (v) Agreed to be bound by the undertaking provided by it under and in terms hereof.
- (b) The concerned district authority shall not be liable for any omission, mistake or error on the part of the bidder in respect of any of the above or on account of any matter or thing arising out of or concerning or relating to RFP or the Selection Process, including any error or mistake in any information or data given by the concerned district authority.

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- (i) **Period of Partnership:-** The duration of the project will be initially for **one year**. However, the project may be extended subject to the fund provision and satisfactory performance of the Agency for management of Bike Ambulance & Delivery Van.

#### **7.5. Award of Contract and Agreement**

On evaluation of proposals and decision thereon, the selected agency shall have to execute an agreement with the District Authority within 15 days from the date of acceptance of their bid is communicated to them. This Request for Proposal along with documents and information provided by the bidder shall be deemed to be integral part of the agreement. Before execution of the agreement, the bidder shall have to deposit performance security deposit as per norm.

#### **7.6. Commencement of Service**

The selected agency shall commence the service within **15 days** from the date of signing of the Agreement. If the agency fails to commence the service as specified herein, the district authority may, unless it consents to the extension of time thereof may cancel the agreement and forfeit the Performance Security.

#### **7.7. Performance Security:**

The selected agency on acceptance must provide the Dist authority a **bank guarantee for Rs.50,000/- (Rupees fifty thousand only) for Delivery Van & Rs. 20,000/- for Bike Ambulance** from a nationalized bank valid for a period of minimum one year as performance security of the project which will have to be extended for a further period based on the period of extension.

#### **7.9 Payment:**

- Financial assistance for the project will be paid to the agency in three installments i.e. 30%, 35% and 35%. The first installment will be paid after signing of the agreement and submission of the performance security. Subsequent installments will be paid after submission of 75% SOE of the previous installment.

#### **7.13. PENALTY**

If the agency fails to provide services as stipulated in the agreement, the Authority shall be entitled to fix penalty which would be deducted from the dues payable to the agency. However, in case there is no amount is due for payment to the agency, the penalty shall be recovered from them.

### **SECTION 8 – Evaluation of the proposals.**

#### **8.1 Evaluation of Technical Proposals**

In the first stage, the proposal will be evaluated on the basis of agency's fulfillment of **eligibility**

criteria. Only those bidders who qualify as per the eligibility criteria, their bid will be considered for the next stage of evaluation i.e Award of Marks. The bidder has to score **at least 50 or above** in order to be considered for the preparation of merit list.

**SCORING SHEET FOR THE ASSESSMENT OF THE BIDDER FOR Delivery / Bike Ambulance**

Name of the Organization :

Sl.	Areas of assessment	Maximum marks	Marks obtained	MOV
<b>Registration &amp; establishment ( 30 marks)</b>				
1	a) Years of existence of entities registered in Society Registration Act/Indian Trust Act(5--10 yrs-5marks, >10 yrs-15 marks)	15		Registration certificate
	b) Registered under 80G (if yes-5 mark, if No-0 mark)	5		80 G regd. certificate
	c) Working experience on health sector in the applied district (completion of minimum one year in project implementation-5 marks, completion of two years-7.5 marks and completion of 3 years & above-10marks)	10		MOU/Sanction order/Agreement
<b>Field level Experience (25 marks)</b>				
2	a. Years of experience in implementing projects in health sector. (1-3 yrs=15 marks, > 3 yrs= 25 marks)	25		MoU/Sanction Order/Agreement

<b>Financial strength(35 marks)</b>			
	a. Financial turn over (minimum 10 lakhs as per last audit report . 20 lakhs >10lakhs -7 marks, 40 lakhs > 20lakhs-10 marks, > 40 lakhs- 15 marks)	20	Audit report of last financial year
3	c. Fixed assets in the name of the organization (minimum assets Rs. 5,10lakhs>5Lakhs-6 marks, > 10 lakhs -15 marks).	15	Balance sheet & fixed asset register
4	<b>Other Strength: (10 marks)</b>		
	If the Organization received any National/State/District Level award for significant contribution in social development sector (National level-10 marks, State Level- 6 marks, District Level- 4 marks)	10	
<b>Total</b>		<b>100</b>	

NB: If marks secured by the NGOs became equal, then the same will be considered based on highest turnover.

**Signature of the Assessment Team**

Name	Designation	Signature

N.B: The proposals will be qualified if it scores at least 50 marks or more in technical evaluation.

**Check List for Proposal Submission**  
(Attach the checklist along with the Proposal)

Sl. No	Particulars	Whether Submitted or not Yes/No	Page No.
1	Covering letter for the project by the Entity in its letter head –As per Form - T1		
2	Name, Address, Registration details of the Agency – As per form T2 & Attach relevant certificate		
3	Copy of the Registration Certificate or equivalent certificate (Document 1)		
4	Annual Financial Statements duly audited with audit report attached for the last 3 years: 2014-15, 2015-16, 2016-17, (Document 3). Submit filled Form-T3		
5	Names of the Office Bearers along with their addresses (in case of Trusts and Registered Societies) / Names of the key personnel along with their addresses for Other Organizations ( Document- 5)		
6	A certificate that the bidder has never been "blacklisted"/ debarred from participating in any tendering process by any State Government/central Government institutions. The bidder may provide details of circumstances of the cases. (Document- 8) Submit filled Form – T4.		
7	An undertaking that the office bearer of the Organization has not been convicted by any court of law in India or abroad for any criminal offence. (Document- 10). Submit filled Form – T7.		
8	An undertaking that the Organization is willing to sign the service level agreement. (Document 11). Submit filled Form – T5.		
9	Copy of PAN card, (Document: 13)		
10	Copy of Bank Pass Book, (Document: 14)		
11	Income Tax and Other Tax registration certificates: Registration under 12-A of Income tax act 1961. (Document 19).		

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12	EMD (DD of Rs.10,000/-)	Yes/No	
13	Form T1	Yes/No	
14	Form T2	Yes/No	
15	Copy of the company/Agency Registration certificate	Yes/No	
16	Copy of PAN	Yes/No	
17	Form T3	Yes/No	
18	Photocopies of the audited P/L account of <b>each year highlighting the turnover</b> in support of that)	Yes/No	
19	Form T4	Yes/No	
20	Copies of Work Order/Contract certificates from the clients in support of similar works executed in support of the information provided.	Yes/No	
21	Form T4	Yes/No	
22	Form T5	Yes/No	
23	Form T6	Yes/No	

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**FORM – T1**

**(Covering Letter)**

*(To be furnished in the proposal)*

**PROPOSAL SUBMISSION FORM**

**(On the letterhead of the agency)**

To

The Chief District Medical & Public Health Officer, Kandhamal.

Re.: RFP Reference no. \_\_\_\_\_ dated \_\_\_\_\_

**Sub: Submission of the proposal for “Operation and Management of the Delivery Van & Bike Ambulance in Kandhamal district ”,**

Dear Sir,

We, the undersigned, offer to provide the services for the “Operation and Management of the Delivery Van & Bike Ambulance in Kandhamal district. We are hereby submitting our Proposal in a sealed envelope.

We hereby declare our Confirmation of acceptance of the Conditions of Contract mentioned in the RFP document under reference cited above.

We hereby declare that all the information and statements made in this Proposal are true and accept that any of our misrepresentations contained in it may lead to our disqualification.

We understand that you are not bound to accept any proposal you receive.

**Yours sincerely,**

Authorized Signatory [*In full and initials*]: \_\_\_\_\_

Name and Title of Signatory: \_\_\_\_\_

Name of Agency: \_\_\_\_\_

Address: \_\_\_\_\_

**(Seal of the entity)**



**FORM - T2**

*(To be furnished in the proposal)*

**PROFILE OF THE AGENCY**

Name of the Agency	
Headquarter Office Address	
Status of the Agency (Whether registered under Society /Trust.	
Name of the Chief Executive and authorized signatory	
Telephone Nos.: Landline Mobile	
Fax	
Email id	
Date of Establishment	
Income Tax No. (PAN)	
Branch office/s in Odisha (with location details)	

Authorized Signatory/Signature [*In full and initials*]: \_\_\_\_\_

Name and Title of Signatory: \_\_\_\_\_

**(Seal of the entity)**

*Handwritten signature*

**FORM T3**

**ANNUAL AVERAGE TURN OVER STATEMENT**

*(To be furnished in the letter head of the Chartered Accountant)*

The Annual Turnover of M/s \_\_\_\_\_

For the last 3 financial years are given below and certified that the statement is true and correct.

Sl.	Financial Year	Turnover in Lakhs (Rs.)
1	2014-15	
2	2015-16	
3	2016-17	
Average Annual Turnover of last three years (Rs. In lakhs)		

Date:

Signature of Chartered Accountant  
(Name in Capital)

Place:

Seal **Membership No**

**ote:**

- 1) To be issued in the **letter head** of the Chartered Accountant with membership No.
- 2) Also attach photocopies of the audited P/L account of **each year highlighting** the Turnover in support of that.

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**FORM T4**

*(To be furnished in the proposal)*

**Format for Affidavit certifying that Entities are not blacklisted  
(On a Stamp Paper of relevant value)**

**Affidavit**

This is to certify and confirm that ..... (The name of the agency with address of the registered office) our organization / we or any of our promoter(s) / director(s) are not barred by Department of Health & FW, Govt. of Odisha / or any other entity of GoO or blacklisted by any state Government or central Government/ department / organization in India from participating in the Project/s, either individually or as member of a Consortium as on the \_\_\_\_\_ (Date of Signing of proposal).

We further confirm that we are aware that, our proposal for the captioned Project would be liable for rejection in case any material misrepresentation is made or discovered at any stage of the Bidding Process or thereafter during the agreement period.

Dated this ..... Day of ....., 2018

Authorized Signatory/Signature [*In full and initials*]: \_\_\_\_\_

Name and Title of Signatory: \_\_\_\_\_

**(Seal of the entity)**



**FORM T5**

*(To be furnished in the proposal)*

**Format for Undertaking of the Agency**

I, Ms/Mr. .... (The name of the agency with address of the registered office) does hereby declare and affirm that none of the office bearer of this organization has not been convicted by any court of law in India or abroad for any criminal offence. I undertake to abide by the decision of the Government. I also declare all information/facts/figures provided by me are true.

This is for favour of your information and necessary action.

Dated this .....Day of ....., 2018.

Authorized Signatory/Signature [*In full and initials*]: \_\_\_\_\_

Name and Title of Signatory: \_\_\_\_\_

**(Seal of the entity)**



**FORM T6**

*(To be furnished in the proposal)*

**Format for  
WILLINGNESS/CONSENT  
LETTER.**

I, Mr/Ms . ..... (The name of the agency  
with address of the registered office) herewith giving my consent to sign the  
agreement abiding by all norms.

This is for favour of your information and necessary action.

Dated this .....Day of ....., 2018.

Authorized Signatory/Signature [*In full and initials*]: \_\_\_\_\_ Name and Title of

**(Seal of the entity)**

