



ALL INDIA INSTITUTE OF MEDICAL SCIENCES, BATHINDA  
ਅਖਿਲ ਭਾਰਤੀ ਆਯੁਰ ਵਿਗਿਆਨ ਸੰਸਥਾਨ, ਬਠਿੰਡਾ | ਅਖਿਲ ਭਾਰਤੀ ਆਯੁਰਵਿਗਿਆਨ ਸੰਸਥਾਨ, ਬਠਿੰਡਾ  
(A Central Autonomous Body under the Ministry of Health and Family Welfare, New Delhi)  
DEPARTMENT OF ENGINEERING & ESTATE OFFICE



**CORRIGENDUM-1**

No. AIIMS/BTI/Engg. & Estate/25-26/4595

Dated: 25 June 2025

1. Refer to GeM Bid No. GEM/2025/B/6216879.
2. The following corrigendum is hereby issued: -
  - (a) The last date for receipt of bids is hereby extended till 11 July 2025 (Friday), 17:00 hrs.
  - (b) The reply to Pre-bid queries is enclosed with this corrigendum.
3. Rest of the terms in the tender document shall remain intact.
4. This is being issued with the approval of the Executive Director, AIIMS Bathinda.

ਭੰਜੀਨੀਯਰਿੰਗ ਸ਼ਾਖਾ / Department of Engineering  
ਐਮਸ ਬਠਿੰਡਾ / AIIMS Bathinda

  
25/6/25  
Exec. Engineer (Civil),  
AIIMS Bathinda

**Copy to: -**

1. For uploading on GeM portal.

**GEM Tender No. GEM/2025/B/6216879 Tender for dietary kitchen services at AIIMS Bathinda**

<b>S.NO.</b>	<b>Reference of tender</b>	<b>Queries/ suggestion of the bidder</b>	<b>Reply of AIIMS Bathinda.</b>
1	On tender document page No. 7, You have mentioned that EMD EXEMPTION- "Exemption in the EMD is not allowed but on the GEM portal Bid Documents page No. 4 under Buyer added bid specific terms and conditions, point no. 2 you have stated that "If the agency is registered under MSME or NSIC, then EMD exemption certificate need to be enclosed"	Kindly confirm that "EMD exemption is allowed or not for registered bidders with MSME or NSIC	Exemption in EMD will be given as per GeM terms and conditions.
2	<p>On tender document page no. 11 point no. 2 under evaluation criteria of technical bid you have mentioned that "Experience in the completion of similar number of works as comply with the clause 11.</p> <p>A. Bidder Successfully completed one project falling under any one of the categories (A, B, C) as mentioned at Clause 11</p> <p>B. Bidder Successfully completed two or more than two up to Five project falling under any one of the categories (A, B, C) as mentioned at Clause 11</p>	<p>Since these type of works needs huge investments and completion period of contract is 5 to 10 years, So please add completed/ongoing work (instead of completed work)-</p>	<p>Criteria of Eligibility is now amended as below:-</p> <p><b><u>Criteria of Eligibility:</u></b> The contractor who fulfills the following requirements shall be eligible to apply; Joint ventures are not accepted:</p> <p>Bidders shall have following minimum experience criteria.</p> <p><b><i>A. Three similar works successfully completed or substantially progressed (≥70%) (in Government/Private Hospital) having the bedding capacity of in the range of 250-500</i></b> <b><i>OR</i></b></p>

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	<p>C. Bidder Successfully completed more than five project falling under any one of the categories (A, B, C) as mentioned at Clause 11</p> <p>(Note: - Pls note that if the bidder has completed 3 similar works in 40% of 750 bedded hospital, then it will be considered as One Project)</p>		<p><b><i>B. Two similar works (in Government/Private Hospital) successfully completed or substantially progressed (≥70%) having the bedding capacity of in the range 501-750</i></b></p> <p><b><i>OR</i></b></p> <p><b><i>C. One similar works (in Government/Private Hospital) successfully completed or substantially progressed (≥70%) having the bedding capacity more than 750</i></b></p> <p><b>Subsequently</b> Sr. no. 2 of Criteria of evaluation shall be read as: -</p> <p><b>Experience in the completion or substantial progress (i.e., 70% or more physical and financial completion) of similar number of works as comply with Clause 11."</b></p> <p>A. Bidder has successfully completed or substantially progressed (≥70%) <b>one</b> project falling under any one of the categories (A, B, C) mentioned at Clause 11</p> <p>B. Bidder has successfully completed or substantially progressed (≥70%) <b>two to five</b></p>

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			<p>projects under any one of the categories (A, B, C) mentioned at Clause 11</p> <p>C. Bidder has successfully completed or substantially progressed (<math>\geq 70\%</math>) <b>more than five</b> projects under any one of the categories (A, B, C) mentioned at Clause 11</p> <p><i>Note: For ongoing works, relevant Satisfactory certificates from the client (Head of the institution or its representative) clearly indicating the physical and financial progress (<math>\geq 70\%</math>) must be submitted.</i></p> <p><i>The marking scheme remains the same (<math>\geq 70\%</math> for each individual project)</i></p>
3	<p>On tender document page no. 11 point no. 2 under evaluation criteria of technical bid you have mentioned that “ Experience in the completion of similar number of works as comply with the clause 11.</p> <p>A. Bidder Successfully completed one project falling under any one of the categories (A, B, C) as mentioned at Clause 11</p>	<p>Please clarify –</p> <p>Notes- If the bidder has completed 3 similar works in 40% of 750 bedded hospital, then it will be considered as One Project)</p>	<p>Same as replied at Sr. No. 2.</p> <p>40% criteria as defined in the note section of point no.2 of evaluation criteria on page 11, stands cancelled and is revised as replied at Sr no. 2 (above)</p>

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	<p>B. Bidder Successfully completed two or more than two up to Five project falling under any one of the categories (A, B, C) as mentioned at Clause 11</p> <p>C. Bidder Successfully completed more than five project falling under any one of the categories (A, B, C) as mentioned at Clause 11</p> <p>(Note: - Pls note that if the bidder has completed 3 similar works in 40% of 750 bedded hospital, then it will be considered as One Project)</p>		
4	<p>As demanded on tender document page no. 70 &amp; 72 under Annexure-XII &amp; Annexure-XIV”</p> <p>Must add in eligibility criteria clause 11</p>	<p>Eligibility conditions required to add Similar Project/Works means Supply, Installation &amp; commissioning of Kitchen Equipment, Preparation Cooking and distribution of Diets/Food bed to bed on daily basis in 750 bedded hospital-</p>	<p>Definition of Similar has been amended as:-</p> <p><b>Similar work includes the Supply, Installation, Testing, and Commissioning (SITC) of kitchen equipment, along with end-to-end management of kitchen services in a hospital setting for IPD patients and/or private wards (Turnkey).</b> This encompasses the procurement, storage, and quality control of raw materials; food preparation and processing; packing and distribution of meals; waste management; and all necessary documentation and compliance activities. The scope further includes adherence</p>

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			to food safety and quality standards, conducting regular audits and reporting, and implementing effective measures to prevent food adulteration. The overall objective is to ensure the delivery of safe, nutritious, and high-quality meals to patients while maintaining efficient, hygienic, and sustainable kitchen operations with timely service delivery.
5	On tender document page no. 39, you have required extra item rate	Kindly clear that extra item rate will be uploaded in the technical bid or financial breakup folder	The bidder needs to submit with the financial breakup. These extra items will not be included in the financial evaluation, as is already defined in the bid document. The purpose of the rates of extra items is for clarity at the time of billing, in case the patient demands extra items. The price shall not be higher than the MRP.
6	On the GEM Portal you have given only 3 folders for uploading the documents -  1 for Experience with 10 MB and not more than 100 pages 2 for turnover with 10 MB and not more than 100 pages	Kindly add another ATC folder documents on GEM for upload the file of technical bid, As there is lot of pages for upload	Bidders are advised to upload only relevant documents, as it is not possible to modify the bid at this stage.

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	3 for ATC Documents with 10 MB and not more than 100 pages		
7	On the tender document page no.67 under Annexure X for calculation of rate per patient per day and you have mentioned that "Average diet cost per patient per day (D) to be quoted in the financial Bid."	<ol style="list-style-type: none"> <li>1. In the GEM portal you have demanded rate for 1 qty (per patient) for 5 year 1 days</li> <li>2. Kindly clear that you have also required on gem portal for per patient per day rate inclusive of taxes as applicable.</li> <li>3. As per our opinion please called rates year wise like –  1<sup>st</sup> Year rate for per patient per day 2<sup>nd</sup> Year rate for per patient per day</li> </ol>	<ol style="list-style-type: none"> <li>1. Financial excel sheet has already been uploaded in the GeM bid, Please quote the rates as per Financial Quotation Guidelines uploaded in the GeM bid. Display Formula for financial as per GeM <b>(Cost of Diet/ Feed (per Diet/ Feed) per day inclusive of GST*Estimated number of patients per day*Contract Period)</b></li> <li>2. Quotes will be inclusive of all taxes.</li> <li>3. <b>The bidder needs to average out for the entire period of contract. Opinion rejected</b> <b>Note: In case of any extra ordinary situation like pandemic, War, natural calamities (force majeure) the price may be increased or decreased based on the Whole sale Price index.</b></li> </ol>

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		<p>3<sup>rd</sup> Year rate for per patient per day</p> <p>4<sup>th</sup> Year rate for per patient per day</p> <p>5<sup>th</sup> Year rate for per patient per day</p>	<b>The final decision with remain with Director AIIMS Bathinda</b>
8	<p>Pg. 09 Point-30:</p> <p>The contractor will use only the commercial cylinder and ISI marked gas stove for the purpose of cooking. He shall maintain suitable fire-safety equipment at the kitchen site and obtain necessary Fire License required for the operation of LPG ovens at his kitchen-site.</p>	<p>Question: It is necessary to confirm the location for the installation of the Gas Stoves for the purpose of cooking and we have to inspect the fire-safety equipment which are said to be maintain by the contractor at the particular area. It is to be noted that Fire Department doesn't issue any separate Fire License to operate of Gas Stoves / LPG Ovens within the premises.</p>	<p>Fire License for operating gas stoves or LPG ovens may not be mandated, vendor shall be responsible for adhering to fire safety regulations and standards.</p> <p><b>Clause no. 30 Page 09 to be read as :-</b></p> <p>Vendor must adhere to general fire safety norms. For instance, the National Fire Code of India outlines guidelines for the safe storage and handling of Liquefied Petroleum Gas (LPG).</p> <p>In case of fire breakout or any accident due to fire, the loss of property or life will be responsibility of the vendor only and AIIMS Bathinda will not indemnify.</p> <p>For any property loss of the hospital, It will also be the responsibility of the vendor to rectify the</p>



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			<p>same as per satisfaction of the Competent Authority.</p> <p>For the equipment itself, domestic gas stoves intended for use with LPG must comply with Indian Standard norms.</p>
9	In the tender document page no.6 point no. 11 under Criteria of Eligibility and Definition of Similar Work must be added Experience in presently and operating kitchen equipment in minimum 750 bedded Hospitals for dietary services for indoor patients-		<p>Criteria of Eligibility is now amended as below:-</p> <p><b><u>Criteria of Eligibility:</u></b> The contractor who fulfills the following requirements shall be eligible to apply; Joint ventures are not accepted:</p> <p>Bidders shall have following minimum experience criteria.</p> <p><b><i>D. Three similar works successfully completed or substantially progressed (≥70%) (in Government/Private Hospital) having the bedding capacity of in the range of 250-500</i></b></p> <p><b><i>OR</i></b></p> <p><b><i>E. Two similar works (in Government/Private Hospital)</i></b></p>

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			<p><b><i>successfully completed or substantially progressed (≥70%) having the bedding capacity of in the range 501-750</i></b></p> <p><b><i>OR</i></b></p> <p><b><i>F. One similar works (in Government/Private Hospital) successfully completed or substantially progressed (≥70%) having the bedding capacity more than 750</i></b></p> <p>(≥70% for each individual project)</p>
10	<p>Pg. 10 Point-40:</p> <p>The proposed kitchen plan and equipment layout are for reference only and can be modified with hospital administration approval. Any additional equipment and installation costs will be borne by the vendor. Upon contract completion, the equipment will become AIIMS Bathinda's property, and the vendor must hand it over in working condition or replace it as directed by the authority.</p>	<p>Question: There is no Kitchen plan or equipment layout attached with the tender, so it is required to place the bid. It is mentioned in the tender that the equipment will be handed over to AIIMS Bhatinda in working condition after the completion of work. If such is the case than how will the department will compensate the amount of equipment purchased by the contractor?</p>	<p>The proposed kitchen plan and equipment layout for reference has been attached.</p> <p>All kitchen-related equipment deployed by the bidder shall remain their property and may be removed from the premises upon the expiry or termination of the agreement, subject to clearance from the competent authority.</p> <p>Accordingly, clause no.40 amended as: - The proposed kitchen plan and equipment layout are for reference only and can be modified with hospital administration</p>

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			approval. Any additional equipment and installation costs will be borne by the vendor. Upon contract completion, all kitchen-related equipment deployed by the bidder shall remain their property and may be removed from the premises upon the expiry or termination of the agreement, subject to clearance from the competent authority.
11	<p>Pg. 14 Scope of Work:</p> <p>The kitchen area in the hospital is around 4200 sq. ft., comprising of</p> <ul style="list-style-type: none"> <li><input type="checkbox"/>receiving area</li> <li><input type="checkbox"/>Raw material (dry) store room</li> <li><input type="checkbox"/>Garbage handling area</li> <li><input type="checkbox"/>Cooking area</li> <li><input type="checkbox"/>Grinding and peeling area</li> <li><input type="checkbox"/>Pot pan wash area</li> <li><input type="checkbox"/>Dish wash area</li> <li><input type="checkbox"/>Vegetable pre-preparation area</li> <li><input type="checkbox"/>Therapeutic feed preparation area</li> <li><input type="checkbox"/>Space for dietician and Manager</li> </ul>	<p>Question: It is briefed in the tender that the above mentioned areas are already erected at the site, we need the layout of the Kitchen floor because as per the FSSAI guidelines Pg. No. 15 Para 1.2 Sub Para 1.2.1 Serial No. F states that “ensure food flow in one direction (as far as possible) that is from the receiving, to storage, to pre-preparation, to cooking, to packing / service dispatch and adequate space should be provided for food pre-preparation, cooking food storage, storage of utensils. So it is necessary to</p>	

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		inspect the drawings before bidding.	
12	Water and Sewerage charges shall also be applicable and shall be adjusted in the monthly bills or may issue separately as decided by the authority.	Question: The criteria on which the monthly bill will be based is not mentioned in the tender.	Water Charges = Rs 1500.00 Per month Sewerage Charges = Nil However, in case if there is any blockade in the sewerage due to discharge of kitchen related waste by the vendor, It will be the responsibility of the vendor to get the blockade cleared at his own cost.
13	Pg. 15 Scope of Work:  It is also to be noted that any kind of NOC required from any department (FSSAI, MC, Fire, Pollution board etc.) to run the kitchen shall be obtained by the vendor at its own level well before commencing the operations.	Question: Will institute provide the required documentation for obtaining the NOC / License from any of the Govt. organization?	Bidders to note that a copy of the requisite document shall be provided only if specifically required by the concerned Government department through their policy, demand letter, or a formal written request.
14	Pg. 16 Para -2:  1.Installation of equipment's, utensils, furniture and fixtures: - The service provider should procure and install automated/electric operated	Question: We need proper BOQ with specification and makes, if possible, to ensure the transparency in the bidding process.	Bidders are to note that the <b>tentative requirements</b> for equipment necessary for the operation of the kitchen have already been specified in <b>Annexure-IX</b> of the bid document. In addition, a <b>layout plan of the kitchen</b> , indicating the proposed

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	equipment's /Machines of different capacities/types, including cooking utensils, crockery, cutlery, food trolleys and serving dishes as detailed in the document at Annexure-IX. All operational and maintenance aspect of the equipment will be the responsibility of the service provider. The important instructions are detailed in the above-mentioned annexure. AIIMS will charge monthly electricity fees based on the units consumed. For this purpose, the vendor shall have to install a separate sub-meter.		<p>placement of equipment, has now been uploaded for your reference.</p> <p>As clearly stated under <b>Clause No. 40</b> of the bid document, <i>"The proposed kitchen plan and equipment layout are for reference only and can be modified with the hospital administration's approval. Any additional equipment and installation costs will be borne by the vendor."</i></p> <p>Accordingly, while the layout and equipment list serve as a guiding framework, bidders are expected to appropriate specifications and makes of equipment in line with operational requirements and as per the norms, subject to final approval by the hospital administration.</p>
15	<p>Pg. 22 Scope of Work:</p> <p>7. Transportation, Packing and distribution of meals:</p> <p>Service provider have to provide the transportation facility for food from central mess (Bulk cooking area) to basement kitchen. Trolley loading food packaging and distribution of food will be done at basement kitchen in covered and spill-proof vessels, using</p>	<p>Question: It is mentioned that the cooking area is far from the basement, so, should we have to consider the gas stove or electrical heaters to re-heat the cooked food especially in the winter season.</p>	<p>It is to be noted that, the area available in the basement of the IPD building can be used for the reheating of the food using Electrical inductions only. The electrical installations shall be in the scope of the vendor. AIIMS Bathinda will provide Sub meter to monitor the electrical usage that will be paid by the vendor to AIIMS Bathinda as per PSPCL norms.</p>

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	thermo transport food trolleys with digital displays only. Every meal will be checked and only after the receipt of approval of dietician, packing of food will be started. The dietician will alert for the packing. Detailed instructions for food packing and distribution are detailed in Annexure-V.		

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16	As per tender document page no. 70 & 72 you have asked that- "Cost incurred in setting up the kitchen (Equipment Cost Only) & Annual value executed (The Annual Cost borne by the hospital excluding equipment costs should be mentioned)"	Kindly change it "Equipment cost certificate is issued by the Chartered Accountant with UDIN Number as some hospitals not paid equipment cost separately to the vendor as same in this tender	Necessary amendments have been made in the annexure as attached.
17	On page no. 6 point no. 11 "Definition of Similar Work "Kindly Add "Similar Project/Works means Supply, Installation & commissioning of Kitchen Equipment, Preparation Cooking and	On page no. 6 point no. 11 "Definition of Similar Work "Kindly Add "Similar Project/Works means Supply, Installation & commissioning of Kitchen Equipment, Preparation Cooking and distribution of Diets/Food bed	Definition of Similar has been amended as:- <b>Similar work includes the Supply, Installation, Testing, and Commissioning (SITC) of kitchen equipment, along with end-to-end management of kitchen services in a hospital setting for IPD patients and/or private wards.</b> This encompasses the procurement, storage,

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	distribution of Diets/Food bed to bed on daily basis in 750 bedded hospital	to bed on daily basis in 750 bedded hospitals	and quality control of raw materials; food preparation and processing; packing and distribution of meals; waste management; and all necessary documentation and compliance activities. The scope further includes adherence to food safety and quality standards, conducting regular audits and reporting, and implementing effective measures to prevent food adulteration. The overall objective is to ensure the delivery of safe, nutritious, and high-quality meals to patients, while maintaining efficient, hygienic, and sustainable kitchen operations with timely service delivery.
18	On page no. 11 point no. 2 Completion/ completed work required "Kindly change it completed/ongoing work as these contracts called for 8 to 10 years-	On page no. 11 point no. 2 Completion/ completed work required "Kindly change it completed/ongoing work as these contracts called for 8 to 10 years-	<p>For wider participation criteria of Eligibility is now amended as below: -</p> <p><b><u>Criteria of Eligibility:</u></b> The contractor who fulfills the following requirements shall be eligible to apply; Joint ventures are not accepted:</p> <p>Bidders shall have following minimum experience criteria.</p>

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			<p><b><i>A. Three similar works successfully completed or substantially progressed (≥70%) (in Government/Private Hospital) having the bedding capacity of in the range of 250-500</i></b></p> <p><b><i>OR</i></b></p> <p><b><i>B. Two similar works (in Government/Private Hospital) successfully completed or substantially progressed (≥70%) having the bedding capacity of in the range 501-750</i></b></p> <p><b><i>OR</i></b></p> <p><b><i>C. One similar works (in Government/Private Hospital) successfully completed or substantially progressed (≥70%) having the bedding capacity more than 750</i></b></p> <p><b>Subsequently</b> Sr. no. 2 of Criteria of evaluation shall be read as:-  <b>Experience in the completion or substantial progress (i.e., 70% or more physical and</b></p>



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			<p><b>financial completion) of similar number of works as comply with Clause 11."</b></p> <p>A. Bidder has successfully completed or substantially progressed (<math>\geq 70\%</math>) <b>one</b> project falling under categories (A, B, C) mentioned at Clause 11</p> <p>B. Bidder has successfully completed or substantially progressed (<math>\geq 70\%</math>) <b>two to five</b> projects under categories (A, B, C) mentioned at Clause 11</p> <p>C. Bidder has successfully completed or substantially progressed (<math>\geq 70\%</math>) <b>more than five</b> projects under categories (A, B, C) mentioned at Clause 11</p> <p><b>(Note: - Pls note that if the bidder <i>successfully completed or substantially progressed</i> (<math>\geq 70\%</math>) (<i>in Government/Private Hospital</i>) having the bedding capacity of in the range of 250-500 , then it will be considered as One Project and shall be considered accordingly for others)</b></p> <p><i>Note: For ongoing works, relevant Satisfactory certificates from the client clearly indicating the physical and financial progress (<math>\geq 70\%</math>) must be submitted.</i></p> <p><i>Marking scheme remains the same</i></p>

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19	On tender document page no. 67 under Annexure—X, Kindly call Year wise (per patients per day) rates in the tender like 1 <sup>st</sup> , 2 <sup>nd</sup> , 3 <sup>rd</sup> , 4 <sup>th</sup> , & 5 <sup>th</sup> year and for the extended period 6 <sup>th</sup> , 7 <sup>th</sup> , 8 <sup>th</sup>	On tender document page no. 67 under Annexure—X, Kindly call Year wise (per patients per day) rates in the tender like 1 <sup>st</sup> , 2 <sup>nd</sup> , 3 <sup>rd</sup> , 4 <sup>th</sup> , & 5 <sup>th</sup> year and for the extended period 6 <sup>th</sup> , 7 <sup>th</sup> , 8 <sup>th</sup>	Financial model can't be changed at the moment. <b>The bidder needs to average out for the entire period of contract. Opinion rejected</b> <b>Note: In case of any extra ordinary situation like pandemic, War, natural calamities (force majeure) the price may be increased or decreased based on the Whole sale Price index.</b> <b>The final decision with remain with Director AIIMS Bathinda</b>

S.No.	Tender Page No.	Tender Content	Queries/ suggestion of the bidder	Reply of AIIMS Bathinda.
20	<b>Page No. 8</b> <b>Note No.17</b>	Payment Terms: AIIMS, Bathinda shall pay the agreed amount on production of monthly bill (in duplicate) for the amount due towards services rendered during the preceding one month. The monthly bill shall include supporting documents, satisfactory performance certificate by the authority designated by AIIMS,	We would like to point out that the tender document does not specify the number of days within which payment will be released after submission of the monthly bill.  For better clarity and planning, we kindly request you to define the payment timeline—such as <b>within 15 or 21 days</b> —from the date of	We would like to clarify that, as per standard procedure in Government institutions, <b>payments are processed</b>  While we understand the importance of having a defined payment timeline for financial planning, <b>the time taken for payment release may vary depending on the</b>

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S.No.	Tender Page No.	Tender Content	Queries/ suggestion of the bidder	Reply of AIIMS Bathinda.
		Bathinda along with documents verifying payment by the agency to its employees in the previous month. No other charges of any kind shall be payable. No advance payment shall be made to the Agency. The Income-tax as applicable shall be deducted from the bill unless exempted by the Income-tax Department. The payment will be made based on the number of Diets supplied and there will no minimum assured diet payment for a given period of time. Also Payment will be made based on the unit cost quoted, and actual diets served and verified by the user department.	<p>submission of the bill, duly verified by the concerned authority.</p> <p>Clear mention of this timeline will help ensure smooth financial management and timely service delivery.</p>	<p><b>completeness of documentation and internal approval workflow.</b> However, we would like to assure you that <b>every effort will be made to process payments promptly upon due verification and approval.</b></p>
<b>21</b>	<b>Page. 8 Point No. 18</b>	The successful Tenderer will have to deposit the Bank Guarantee and commence the work within 30 days of acceptance of tender otherwise the contract may be cancelled and EMD will be forfeited.	With reference to the stipulated timeline for commencement of work within 30 days, we would like to submit that this may not be practically feasible. Procuring and installing all the required equipment within this time frame involves coordination with	It is to inform that 30 Days are sufficient for the vendor to submit the PBG.

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S.No.	Tender Page No.	Tender Content	Queries/ suggestion of the bidder	Reply of AIIMS Bathinda.
	<b>Pg-66 Point No. 2</b>	The time limit for this work will be 2(Two) months from the date of work order	<p>multiple vendors and logistics, which typically requires a minimum of <b>60 days</b>.</p> <p>Moreover, we would like to highlight that <b>Page No. 66, Point No. 2 of the Notes</b> already mentions a timeline of <b>2 months</b>, which supports this requirement.</p> <p>In view of the above, we kindly request you to consider allowing a period of <b>60 days (2 months)</b> from the date of issuance of the Work Order or Layout Approval, whichever is later, for commencement of work.</p>	<p>It is also mentioned here that the value of PBG shall be the 5% of the bid value/Tendered amount.</p> <p>Accordingly, the Clause no.15 has been amended as: -</p> <p>1. <b><u>Performance Bank Guarantee:</u></b> PBG having a value of <b>5% of the Bid value/Tendered</b>. Same shall be submitted within 30 days from the date of issue of LOI. The same shall be valid for 60 months plus for minimum of 180 days. After recording of the completion certificate for the work by the competent authority, the performance guarantee shall be returned to the contractor, without any interest.</p>

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S.No.	Tender Page No.	Tender Content	Queries/ suggestion of the bidder	Reply of AIIMS Bathinda.
				For the mobilisation of resources, manpower etc, Time limit of two months will be given from the date of issue of LOI.
<b>22</b>	<b>Page No. 9 Point No. 29  Page No. 10  Point No. 41</b>	<p>Quality of food/ services provided will be inspected/ checked periodically from time to time by duly appointed committee and if found unsatisfactory the contract may be cancelled at any time by the Institute with/ without furnishing any notice. The Institute reserves the right to impose a fine, as per penalty clauses if deemed necessary.</p> <p>notice AIIMS, Bathinda would have the right to terminate the contract without notice before the expiry of the term, in case the work performance is not up to the standard, or in case there is any violation of AIIMS, Bathinda rules &amp; regulations, or if there is any lapse in compliance of any labour legislation, or if there is any incident of indiscipline on the part of the Tenderer or his staff.</p>	<p>we would like to submit that in a <b>long-term contract</b>, especially one involving a service-based industry such as catering, it is practically not feasible to ensure <b>100% error-free performance</b> at all times, despite best efforts and professional standards.</p> <p>In this context, we respectfully request that the termination clause be revised to include the provision for a <b>mandatory show cause notice</b> before any termination action is initiated.</p> <p>Before any termination for any reason—whether operational lapses, quality issues, or non-compliance—it is only fair and just that the <b>vendor is given an opportunity to explain or rectify the issue</b>. This will foster</p>	<p>With respect to <b>Page No. 9, Point No. 29 and Page no.10 Point no. 41 has been amended as:-</b> while AIIMS Bathinda reserves the right to inspect the quality of food and services periodically and take necessary action in case of deficiencies, it is clarified that in the event of unsatisfactory performance, the contractor will be issued a <b>written Show Cause Notice</b>, outlining the specific deficiencies observed. The Institute reserves the right to impose a fine, as per penalty clauses if deemed necessary. However, in case the vendor fails to rectify the complaints in the stipulated time that affects the overall functionality of the</p>

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S.No.	Tender Page No.	Tender Content	Queries/ suggestion of the bidder	Reply of AIIMS Bathinda.
			<p>transparency, mutual accountability, and a more balanced working relationship between both parties.</p> <p>We hope you will consider incorporating this safeguard in the agreement to ensure that service providers are treated equitably, especially when substantial investment are involved over an extended period.</p>	<p>kitchen services and in cases involving <b>serious health hazards, gross negligence, or deliberate misconduct</b>, the Institute may proceed with <b>termination without prior notice</b>, as originally stated.</p>
<b>23</b>	<b>Page No. 9 Point No. 30</b>	<p>The contractor will use only the commercial cylinder and ISI marked gas stove for the purpose of cooking. He shall maintain suitable fire-safety equipment at the kitchen site and obtain necessary Fire License required for the operation of LPG ovens at his kitchen-site.</p>	<p>We would like to bring to your kind attention that the <b>Fire Safety License</b> is generally issued for the entire building and not separately for individual sections such as the kitchen.</p> <p>In this regard, we request you to kindly <b>share a copy of the Fire License</b> that has been obtained for the building, as this will fulfil the compliance requirement from our end.</p>	<p>Copy of Fire License/ NOC will be provided as and when requested.</p>

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S.No.	Tender Page No.	Tender Content	Queries/ suggestion of the bidder	Reply of AIIMS Bathinda.
24	Page No. 10 Point No. 40	<p>The proposed kitchen plan and equipment layout are for reference only and can be modified with hospital administration approval. Any additional equipment and installation costs will be borne by the vendor. Upon contract completion, the equipment will become AIIMS Bathinda's property, and the vendor must hand it over in working condition or replace it as directed by the authority.</p>	<p>We kindly request you to share the <b>kitchen plan and equipment layout</b>, as this is essential for understanding the available infrastructure and planning operational requirements accordingly.</p> <p>Additionally, we seek clarification on the following point regarding equipment deployment:</p> <ul style="list-style-type: none"> <li>In the event of <b>mid-term removal or completion of the 5-year contract period only</b>, will the <b>vendor be required to take back the equipment</b>, or will the <b>institute retain the equipment and compensate the vendor accordingly</b>?</li> </ul> <p>Clarity on this matter is important for us to evaluate investment planning, depreciation, and asset recovery for the proposed project.</p>	<p>The proposed kitchen plan and equipment layout for reference has been attached.</p> <p>All kitchen-related equipment deployed by the bidder shall remain their property and may be removed from the premises upon the expiry or termination of the agreement, subject to clearance from the competent authority.</p> <p>Accordingly, clause no.40 amended as: - The proposed kitchen plan and equipment layout are for reference only and can be modified with hospital administration approval. Any additional equipment and installation costs will be borne by the vendor. Upon contract completion, all kitchen-related equipment deployed by the</p>

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S.No.	Tender Page No.	Tender Content	Queries/ suggestion of the bidder	Reply of AIIMS Bathinda.
				bidder shall remain their property and may be removed from the premises upon the expiry or termination of the agreement, subject to clearance from the competent authority.
<b>25</b>	<b>Page No. 11 Point No. 2</b>	<p>Experience in the completion of similar number of works as comply with the clause 11.</p> <p>A. Bidder Successfully completed one project falling under any one of the categories (A, B, C) as mentioned at Clause 11</p> <p>B. Bidder Successfully completed two or more than two up to Five project falling under any one of the categories (A, B, C) as mentioned at Clause 11</p> <p>C. Bidder Successfully completed more than five project falling under any one of the categories (A, B, C) as mentioned at Clause 11</p> <p>(Note: - Pls note that if the bidder has completed 3 similar works in</p>	<p>We submit that the current structure is not aligned with the practical market scenario, due to the following reasons:</p> <p><b>1. Completion of Five Projects &gt; 750 Beds:</b> Very few contractors have had the opportunity to serve five hospitals with &gt;750 beds, making this condition unrealistic.</p> <p><b>2. Turnover Benchmarks vs. Experience:</b></p> <ul style="list-style-type: none"> <li>Under <b>Point No. 3</b>, the highest score can be achieved with a turnover of ₹4 crore, which is possible even with a <b>single hospital &gt;750 beds.</b></li> </ul>	<p>Criteria of Eligibility is now amended as below:-</p> <p><b><u>Criteria of Eligibility:</u></b> The contractor who fulfills the following requirements shall be eligible to apply; Joint ventures are not accepted:</p> <p>Bidders shall have following minimum experience criteria.</p> <p><b><i>G. Three similar works successfully completed or substantially</i></b></p>



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		40% of 750 bedded hospitals, then it will be considered as One Project)	<ul style="list-style-type: none"> <li>Under <b>Point No. 4</b>, turnover &gt;₹10 crore is achievable with <b>only 2 hospitals of &gt;750 beds</b>.</li> <li>Under <b>Point No. 1</b>, <b>10 years of experience is required only for 250-bedded hospitals</b>, indicating that hospital size has not been previously tied to duration of experience.</li> </ul> <p>Considering these contradictions, we request the following revisions in <b>Point No. 2 – Experience in Completion of Similar Projects</b>:</p> <table> <tr> <td><b>No. of Contracts (Completed for Hospitals &gt;750 Beds)</b></td> <td><b>Suggested Marks</b></td> </tr> <tr> <td>A – 1 Project</td> <td>10</td> </tr> <tr> <td>B – 2 Projects</td> <td>20</td> </tr> <tr> <td>C – 3 or more Projects</td> <td>30</td> </tr> </table> <p>This would ensure parity with the other QCBS criteria and enable fair participation from competent bidders</p>	<b>No. of Contracts (Completed for Hospitals &gt;750 Beds)</b>	<b>Suggested Marks</b>	A – 1 Project	10	B – 2 Projects	20	C – 3 or more Projects	30	<p><b><i>progressed (≥70%) (in Government/Private Hospital) having the bedding capacity of in the range of 250-500</i></b>  <b>OR</b>  <b><i>H. Two similar works (in Government/Private Hospital) successfully completed or substantially progressed (≥70%) having the bedding capacity of in the range 501-750</i></b>  <b>OR</b>  <b><i>I. One similar works (in Government/Private Hospital) successfully completed or substantially progressed (≥70%) having the bedding capacity more than 750</i></b></p>
<b>No. of Contracts (Completed for Hospitals &gt;750 Beds)</b>	<b>Suggested Marks</b>											
A – 1 Project	10											
B – 2 Projects	20											
C – 3 or more Projects	30											

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S.No.	Tender Page No.	Tender Content	Queries/ suggestion of the bidder	Reply of AIIMS Bathinda.
			<p>with proven performance in large-scale operations.</p> <p>Additionally, we humbly request that <b>Work Orders and Completion Certificates</b> (where available) be considered valid documentation in support of experience. For <b>ongoing contracts</b>, many institutions do not issue Experience Certificates frequently, making Work Orders the only official proof of engagement.</p>	<p><b>Subsequently</b> Sr. no. 2 of Criteria of evaluation shall be read as: -</p> <p><b>Experience in the completion or substantial progress (i.e., 70% or more physical and financial completion) of similar number of works as comply with Clause 11."</b></p> <p>A. Bidder has successfully completed or substantially progressed (≥70%) <b>one</b> project falling under any one of the categories (A, B, C) mentioned at Clause 11</p> <p>B. Bidder has successfully completed or substantially progressed (≥70%) <b>two to five</b> projects under any one of the categories (A, B, C) mentioned at Clause 11</p> <p>C. Bidder has successfully completed or substantially progressed (≥70%) <b>more than five</b> projects under any one of</p>

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<b>S.No.</b>	<b>Tender Page No.</b>	<b>Tender Content</b>	<b>Queries/ suggestion of the bidder</b>	<b>Reply of AIIMS Bathinda.</b>
				<p>the categories (A, B, C) mentioned at Clause 11</p> <p><i>Note: For ongoing works, relevant Satisfactory certificates from the client (Head of the institution or its representative) clearly indicating the physical and financial progress (<math>\geq 70\%</math>) must be submitted.</i></p> <p><i>The marking scheme remains the same</i></p> <p>(<math>\geq 70\%</math> for each individual project)</p> <p>Rest of evaluation criteria will remain same.</p>
<b>26</b>	<b>Page No. 22 Point No. 7</b>	<p>Transportation, Packing and distribution of meals:</p> <p>Service provides have to provide the transportation facility for food from central mess (Bulk cooking area) to basement kitchen. Trolley loading food packaging and distribution of food will be done at basement kitchen in covered and</p>	<p>Yellow bags are not required in kitchen as it is used only for infectious clinical waste. Gloves and masks which are used in food handling is not infectious.</p>	<p>Since the waste generated in the kitchen services is non infectious as per the Bio medical waste management guidelines and will be disposed as per the Municipal Corporation guidelines only.</p>

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		spill-proof vessels, using thermos transport food trolleys with digital displays only. Every meal will be checked and only after the receipt of approval of dietician, packing of food will be started. The dietician will alert for the packing. Detailed instructions for food packing and distribution are detailed in Annexure-V		Colour coding of the bins shall be as per the Municipality guidelines.
<b>27</b>	<b>Page No. 15 Point No.</b>	Annexure II - Details of Patients Diet, RT feeds and cyclic menu.	<p>1. It is mentioned that Mid-Morning and Bedtime Milk services are applicable for the <i>Private Ward</i>. However, the sample menus for <i>General Wards</i> also include a Mid-Morning service. As per standard industry practice, general wards are typically provided with <b>5 meals per day</b>, while <b>7 services</b> are standard for private wards, as correctly indicated on Page 15 of the document.</p> <p>We kindly request you to remove the Mid-Morning service from the General Diet Menu to align with industry norms and the stated standards on Page 15.</p>	<p>1. Meals for General and Private ward has been attached at Annexure XIX. All the other que</p> <p>2. Query rejected.</p>

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			<p><b>2. Milk Packaging – Tetra Pack:</b></p> <p>It is specified that 250ml milk (packed) is to be provided, and on Page 47, it is mentioned that milk should be in tetra pack form. In our experience, <b>tetra pack milk is not commonly consumed by patients in hospital settings</b>, particularly due to taste preferences and acceptability among patients.</p> <p>We request you to kindly consider allowing <b>fresh boiled milk (served hot)</b>, which is more practical and widely accepted in patient care environments.</p>	
<b>28</b>	<b>Page No. 60</b>	<p>The aforementioned work and food-related penalties, staff etiquette issues, delays, etc. are not considered granted as a first warning or a final warning, and the authority reserves the right to:</p> <ul style="list-style-type: none"> <li>- Forfeit the Bank Guarantee (BG) and security deposit for any work</li> <li>- Terminate the contract even upon the occurrence of the first incident</li> </ul>	<p>As per the current clause, the institute reserves the right to terminate the contract even on the first instance of a lapse, without any prior warning or opportunity for corrective action.</p> <p>We submit that this provision appears to be extremely stringent and does not take into consideration the significant</p>	<p>The aforementioned work and food-related penalties, staff etiquette issues, delays, etc. are not considered granted as a first warning or a final warning, and the authority reserves the right to:</p> <ul style="list-style-type: none"> <li>- Forfeit the Bank Guarantee (BG) and security deposit for any work</li> </ul>

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S.No.	Tender Page No.	Tender Content	Queries/ suggestion of the bidder	Reply of AIIMS Bathinda.
		<p>- Debar the contractor from participating in any future contracts at AIIMS Bathinda for a period determined by the competent authority.</p>	<p>financial and operational investment made by the contractor to commence and maintain services as per the terms of the contract.</p> <p>In the interest of fairness and to maintain a long-term, cooperative engagement, we suggest that a structured year-wise penalty clause be introduced. Termination should only be considered in cases where the contractor repeatedly fails to rectify lapses or refuses to comply with directives issued by the institute, even after being given adequate notice and opportunity to improve.</p> <p>This would ensure a balanced approach that protects the interests of both the institute and the service provider, encouraging accountability without creating undue risk of arbitrary termination.</p>	<p>- Terminate the contract even upon the occurrence of the first incident</p> <p>- Debar the contractor from participating in any future contracts at AIIMS Bathinda for a period determined by the competent authority.</p> <p>Above condition has been amended as below:-</p> <p>It is clarified that in the event of unsatisfactory performance, the contractor will be issued a <b>written Show Cause Notice</b>, outlining the specific deficiencies observed. The Institute reserves the right to impose a fine, as per penalty clauses if deemed necessary. However, in case the vendor fails to rectify the complaints in the stipulated time that affects the overall functionality of the kitchen services and in cases involving <b>serious health hazards, gross</b></p>

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<b>S.No.</b>	<b>Tender Page No.</b>	<b>Tender Content</b>	<b>Queries/ suggestion of the bidder</b>	<b>Reply of AIIMS Bathinda.</b>
			We hope you will consider this suggestion positively and revise the clause accordingly.	<b>negligence, or deliberate misconduct</b> , the Institute may proceed with <b>termination without prior notice</b> , as originally stated.
<b>29</b>	<b>Page No. 61-64</b>	Annexure-IX	<p>Annexure-IX currently specifies the make/model of only a single company. This practice may unintentionally limit fair competition during procurement.</p> <p>In the interest of promoting a fair and competitive bidding environment, we request that the specifications in Annexure-IX be revised to include at least two or more equivalent makes/models/brands.</p>	<p>The proposed kitchen plan and equipment layout for reference has been attached.</p> <p>All kitchen-related equipment deployed by the bidder shall remain their property and may be removed from the premises upon the expiry or termination of the agreement, subject to clearance from the competent authority.</p> <p>Accordingly, clause no.40 amended as: - The proposed kitchen plan and equipment layout are for</p>

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<b>S.No.</b>	<b>Tender Page No.</b>	<b>Tender Content</b>	<b>Queries/ suggestion of the bidder</b>	<b>Reply of AIIMS Bathinda.</b>
				<p>reference only and can be modified with hospital administration approval. Any additional equipment and installation costs will be borne by the vendor. Upon contract completion, all kitchen-related equipment deployed by the bidder shall remain their property and may be removed from the premises upon the expiry or termination of the agreement, subject to clearance from the competent authority.</p> <p>Accordingly, while the layout and equipment list serve as a guiding framework, bidders are expected to appropriate specifications and makes of equipment in line with operational requirements and as per the norms, subject to final approval by the hospital administration.</p>



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<b>30</b>	<b>Pg-6</b>  <b>Point No. 11</b>	Eligibility Criteria	<p>We would like to propose an important addition to the <b>eligibility criteria</b> to ensure that only technically competent and appropriately experienced bidders participate in this tender process.</p> <p>We suggest the following clause be added under the eligibility conditions:</p> <p><b>"The bidder should have experience in similar nature of work, which includes experience in procuring kitchen equipment and executing turnkey catering-related works in central government hospitals or equivalent large-scale healthcare institutions."</b></p> <p>This addition will ensure that bidders possess not only catering experience but also the required expertise in infrastructure execution and equipment handling in sensitive and</p>	<p>Definition of Similar has been amended as: -</p> <p><b>Similar work includes the Supply, Installation, Testing, and Commissioning (SITC) of kitchen equipment, along with end-to-end management of kitchen services in a hospital setting for IPD patients and/or private wards.</b> This encompasses the procurement, storage, and quality control of raw materials; food preparation and processing; packing and distribution of meals; waste management; and all necessary documentation and compliance activities. The scope further includes adherence to food safety and quality standards, conducting regular audits and reporting, and implementing</p>

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<b>S.No.</b>	<b>Tender Page No.</b>	<b>Tender Content</b>	<b>Queries/ suggestion of the bidder</b>	<b>Reply of AIIMS Bathinda.</b>
			<p>regulated environments like central government hospitals.</p> <p>We believe this will contribute to the successful implementation and sustainability of services under the contract.</p>	<p>effective measures to prevent food adulteration. The overall objective is to ensure the delivery of safe, nutritious, and high-quality meals to patients, while maintaining efficient, hygienic, and sustainable kitchen operations with timely service delivery.</p> <p>Completion certificates to be submitted by the bidders for all the completed projects as per required annexure.</p> <p>For Ongoing projects Satisfactory work performance certificate to be submitted by the bidder in required annexure.</p>
<b>31</b>			Reference to the Reverse Auction (RA) enabled for this tender, we would like to raise a critical concern	Query Rejected.

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S.No.	Tender Page No.	Tender Content	Queries/ suggestion of the bidder	Reply of AIIMS Bathinda.
			<p>regarding the quality and sustainability of services, particularly in the context of food services where quality is paramount—especially in healthcare or institutional settings.</p> <p>To prevent unhealthy price undercutting which may compromise on food quality and hygiene standards, it is essential that a <b>minimum base price</b> be set for the RA process. This ensures that bids remain financially viable while maintaining the required service standards.</p> <p>We, therefore, request you to kindly consider setting a <b>non-negotiable base price</b> below which no bidder should be allowed to quote during RA. This step will promote fair competition without compromising on quality and compliance.</p>	

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<b>S. No.</b>	<b>Tender Page No.</b>	<b>Tender Content</b>	<b>Queries/ suggestion of the bidder</b>	<b>Reply of AIIMS Bathinda.</b>
<b>32</b>	<b>Page No. 70 &amp; 72</b>	As per tender document page no. 70 & 72 you have asked that- "Cost incurred in setting up the kitchen (Equipment Cost Only) & Annual value executed (The Annual Cost borne by the hospital excluding equipment costs should be mentioned)"	Kindly change it and demand from bidders "The bidder should have work experience of preparation of diet for Indoor patients with owned Kitchen equipment works for setting up kitchen in any of the Govt./Semi Govt./Autonomous Hospitals with at least 750 bedded during the last 7 years (The certificate is to be issued by the Chartered Accountant with UDIN Number) instead of Hospital, if hospital not paid for equipment.	Relevant Annexures has amended and attached.
<b>33</b>		As per tender document site visit is not mandatory	Kindly ADD "The tenderer must mandatorily visit the site before quoting the rates, they must contact office of medical superintendent AIIMS Bhatinda for clarifications if any and receive a site visit certificate from the department as other hospitals required & demanded in their bid (copy enclosed) to understand proper for working and required equipment.	Please read Clause no.6 of page no. 5 of the bid document

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Apart from it is also to be mentioned that for resolution of disputes following is proposed: -

### **Disputes & Arbitration: -**

The AIIMS and the Contractor shall make every effort to resolve amicably by direct informal negotiation, any disagreement or dispute arising between them under or in connection with the Contract. If a dispute of any kind whatsoever that cannot be resolved the same shall be referred to the sole arbitration of the Executive Director, AIIMS, it is also a term of this Contract that no person other than a person appointed by the Executive Director, AIIMS as foresaid should act as an Arbitrator. As aforesaid the provisions of the Arbitration and conciliation Act

1996 or any statutory modification or re-enactment thereof and the rules made there under and for the time being in force shall apply to the arbitration proceedings under this clause.

### **Legal Jurisdiction:**

No Legal suit or other proceedings relating to performance or breach of Contract shall be filed or taken by the Contractor in any Court of Law except principal court of Ordinary Civil Jurisdiction at Bathinda which shall have exclusive jurisdiction to the exclusion of any outside court.

Apart from it is also inform to all the interested bidders that Subletting shall not be allowed, Institute will right way cancel the contract in the event of subletting of the contract.

**ANNEXURE XII**

**Description of experience (similar work for Completed as well as ongoing works) in field of Patient Diet Kitchen Services for hospital with bed capacity.**

(Please furnish copies of completion/Partly completion certificate from the Government Department / Organization/PSU).

S.No.	Description of work	Actual value of work order executed (The annual cost borne by the hospital, excluding equipment costs, should be mentioned. )	Cost incurred in setting up the Kitchen (Equipment cost only)	Work Period		Name of Organization
				Start Date	Finish Date	

**Note-**

1. In case cost of the equipment is not reimbursed or didn't ask by the client and bidder were asked than in such case vendor has to provide the detail of equipment supplied to the vendor along with its costing which is to be verified by the CA. In case the cost of equipment reimbursed by the client the same shall be entered in above column.
2. If the per annum value of work order is not same then year wise data shall be provided by amending the document as above.

(Signature of the Bidder with Seal)

### Format for Completion Certificate

1. Name of Institution where services done :  
.....
2. Address of the Institute with Pin Code :  
.....
3. Contact Details (Cell No. & Email ID) : .....
4. Contract Agreement No. & Date
5. Annual cost borne by the hospital in  
dietary services : .....
6. Cost incurred in setting up the Kitchen  
Equipment cost only : .....
7. Total Cost incurred till the completion  
of the project : .....
8. Date of commencement of services : .....
9. Date of completion of services : .....
10. Average cost of diet per patient per day for general ward: .....
11. Average cost of diet per patient per day for Private ward: .....
12. Performance Report/Certificate
  - a. Quality of work (.....)
  - b. Financial soundness (.....)
  - c. Technical Proficiency (.....)
  - d. Resourcefulness (.....)

e. General Behavior (.....)

Any additional information the bidder wishes to provide may be included by appropriately amending this format; however, the same must be signed by a Competent Authority from a Government or Private Institution.

**Signature of the Performance Certificate issuing Authority  
(Head/Director/MS/Manager with Stamp)**

Place:.....

Dated : .....

**Note-**

1. In case cost of the equipment is not reimbursed or didn't ask by the client and bidder were asked than in such case vendor has to provide the detail of equipment supplied to the vendor along with its costing which is to be verified by the CA. In case the cost of equipment reimbursed by the client the same shall be entered in above column.
2. If the per annum value of work order is not same then year wise data shall be provided by amending the document as above.



## CRITERIA FOR EVALUATION OF TECHNICAL BID

In the first stage, the Technical Proposal will be evaluated on the basis of Applicant's experience, and turn over. Only those Applicants whose Technical Proposals get a score of at least 50 marks or more out of 100 shall qualify for further consideration, and shall be ranked from highest to the lowest on the basis of their technical score (ST).

S. No.	EVALUATION CRITERIA	Marks	Point	Point	Remark
		Breakup	Claimed	obtained	
1.	Total years of experience of continuous work (as on the date of publish of tender) in the field of Patient Diet Kitchen services in AIIMS/INI/Other Hospitals with minimum 250 bedding capacity a. 1–5 years b. 6–10 years c. More than 10 years <b>years must be <i>continuous with no break or cumulative</i>.</b>				Shall be reviewed from Experience Certificate to be Attached at (Annexure - XII)
		10			
		20			
		30			
	<b>Maximum Marks</b>	<b>30</b>			
2.	<b>Experience in the completion or substantial progress (i.e., 70% or more physical and financial completion) of similar number of works as comply with Clause 11."</b> A. Bidder has successfully completed or substantially progressed (≥70%) <b>one</b> project falling under categories (A, B, C) mentioned at Clause 11 B. Bidder has successfully completed or substantially progressed (≥70%) <b>two to five</b> projects under categories (A, B, C) mentioned at Clause 11 C. Bidder has successfully completed or substantially progressed (≥70%) <b>more than five</b> projects under categories (A, B, C) mentioned at Clause 11  <b>(Note: - Pls note that if the bidder <i>successfully completed or</i></b>	10			Shall be reviewed from Experience Certificate to be Attached at (Annexure - XII)
		20			
		30			

	<p><b><i>substantially progressed</i></b> (<math>\geq 70\%</math>) 3 works (<b><i>in Government/Private Hospital</i></b>) <b><i>having the bedding capacity of in the range of 250-500</i></b>, then it will be considered as One Project and shall be considered accordingly for others)</p> <p>Also, Bidder must have completed or substantially progressed (<math>\geq 70\%</math>) similar works, where each project meets at least the minimum bed capacity as defined under Categories. Projects across different categories (A, B, C) will be combined to meet the project count for evaluation marks.</p>				
	<b>Maximum Marks</b>	<b>30</b>			
<b>3.</b>	<p>Th Average annual billing in providing Dietary Services in Hospitals Government/NABH Accredited) during last three financial years.</p> <p>1. Greater than or equal to Rs 2.00 Crores up to Rs 3.00 Crores</p> <p>2. Greater than or equal to Rs 3.00 Crores up to Rs 4.00 Crores</p> <p>3. Greater than or equal to Rs 4.00 Crores</p>	<p>10</p> <p>15</p> <p>20</p>			<p>Shall be reviewed from Experience Certificate to be Attached at (Annexure - XIV)</p>
	<b>Maximum Marks</b>	<b>20</b>			
<b>4.</b>	<p>Average annual turnover for last three financial years between 2022-23 to 2023-24, 2024-25</p> <p>a. Rs 4.00 Crore – Rs. 8.00 Crore</p> <p>b. Rs. 8.00 Crore - Rs. 10.00 Crore</p> <p>c. More than Rs. 10.00 Crore</p>	<p>10</p> <p>15</p> <p>20</p>			<p>Financial statement of concerned year (Turnover) Certified by the CA (Annexure - XI)</p>
	<b>Maximum Marks</b>	<b>20</b>			
	<b>TOTAL MARKS</b>	<b>100</b>			

R-2

# KITCHEN EQUIPMENT LAYOUT PLAN

S 210

S 21A

A

RELOCATE THE DRAIN  
POINTS AS SEWER / GT  
ALL READY INSTALLED  
AT SITE

