

MUNICIPAL CORPORATION SHIMLA
OFFICE OF THE COMMISSIONER

REQUEST FOR PROPOSAL (RFP) FOR
CONDUCTING ANIMAL BIRTH CONTROL (ABC)
PROGRAMME UNDER CNVDR PROCESS
[INDIVIDUAL VETERINARY PROFESSIONALS]

1. Introduction

Municipal Corporation Shimla (MCS) invites applications from eligible **Individual Veterinary Professionals** for conducting Animal Birth Control (ABC) surgeries in accordance with Animal Birth Control Rules, 2023.

The programme aims to humanely manage stray dog population and control rabies through sterilization, vaccination, deworming and release under CNVDR protocol.

Note: In accordance to ABC Rules 2023 (Catching and transportation of stray dogs, shall be arranged by Municipal Corporation Shimla (MCS). These activities will not form part of the scope of work for Individual Veterinary Professionals, who will be engaged solely for conducting Animal Birth Control (ABC) surgeries and related veterinary procedures under the CNVDR protocol.)

2. Scope of Work

- Sterilization of stray dogs as per ABC Rules, 2023
- Anti-rabies vaccination and deworming

3. Eligibility Criteria

- Open to individual veterinary professionals
- Individual must possess BVSc & AH degree and valid VCI/SVC registration (self attested copy)
- Minimum 1 year experience in ABC work (proof mandatory)
- PAN mandatory (self attested copy)
- GST registration where applicable or declaration (self attested copy)
- ITR for last 3 years (self attested copy)
- Proof of EMD

- Experience certificates/work orders
- Affidavit of non-blacklisting

4. Earnest Money Deposit (EMD)

- Earnest Money Deposit (EMD): Rs. 45,000/- in the shape of Bank Draft & RTGS under the name of Commissioner, M.C Shimla :

Name of Bank: State Bank of India, Kalibari, The Mall, Shimla

Name of Beneficiary: Municipal Corporation, Shimla

Type of A/c: Current

Beneficiary A/c No.: 10835924882

IFSC Code: SBIN0000718

PAN No.: AAALM0544K

TAN No.: PTLM1982F

Telephone No.: 0177-2802771

GSTIN No.: 02AAALM0544K1ZD

E-Mail Address: mcsml-hp@nic.in

CC Mail Address: yphomcshimla@gmail.com

- No exemption allowed
- EMD liable for forfeiture in case of withdrawal, false information or failure to execute contract

In case of any processing fees, it has to be borne by the Individual Veterinary Professional..

NOTE: Payment details (UTR/transaction reference number, date, and amount) of the Rs. 45,000/- RTGS/NEFT transfer shall be shared on the official email address, with a copy (CC) to the designated departmental email mentioned above.

5. Performance Security

- Individual veterinary professionals shall furnish Performance Security equal to 5% of contract value within 10 days
- Failure shall result in forfeiture of EMD

6. Manpower Requirement

- Veterinary Surgeon – 1 (mandatory BVSc & AH with registration)
- Veterinary Pharmacist – 1

7. Roles & Responsibilities

- Deployment of qualified manpower
- Provision of medicines, anesthesia and consumables

8. Service Level Agreement (SLA)

- All dog catching, management and transportation shall be undertaken exclusively by the Municipal Corporation Shimla (MC) team.
- Individual Veterinary Professionals will be responsible only for conducting Animal Birth Control (ABC) surgeries and associated veterinary procedures as per the CNVDR protocol under ABC Rules 2023.
- Individual Veterinary Professionals (IVPs) have to **submit their price quotations, with or without provision of medicines**, for anti-rabies vaccination, deworming, anesthesia, and all medicines required during pre-operative, post-operative care and recovery.”
- All wards shall be covered as directed by MCS.

9. Penalties

- Rs. 2,000 per procedural violation
- Repeated violations may lead to termination of agreement.

10. Payment Terms

- Monthly payment based on verified work
- Invoice submission by 2nd week of each month
- Payment within 2 weeks subject to deductions

11. Termination Clause

- MCS reserves right to terminate contract for non-performance or breach without compensation.

12. Dispute Resolution

- All disputes shall be subject to jurisdiction of Shimla courts.

13. Additional Clauses

- Force Majeure applicable
- Confidentiality to be maintained
- Fraud or malpractice will lead to disqualification
- Proper handover required at end of contract

14. Operational Responsibilities for Stray Dog Birth Control under MC Shimla

In pursuance of the Stray Dogs Birth Control Program, the following responsibilities shall be undertaken exclusively by the Municipal Corporation Shimla (MC) at the Animal Birth Control (Dog)

Center, under the aegis of the Stray Dogs Birth Control Society (SDBS):

1. Arrangement of dog catching ambulance, driver, and fuel.
2. Deployment of dog catchers.
3. Catching of stray dogs.
4. Transportation of dogs.
5. Provision of Operation Theatre and OT helpers.
6. Cleanliness and hygienic upkeep of kennels.
7. Record keeping by para-veterinary staff (veterinary pharmacist) and Animal Health Assistant (AHA).
8. Pre-operative care and management of dogs.
9. Post-operative care and management of dogs.
10. Arrangement of food for dogs.
11. Maintenance of cleanliness and hygiene at the Animal Birth Control (Dog) Center.
12. Release of dogs after recovery.
13. Provision of minimum 3 days post-operative care before release.
14. Addressing public complaints related to stray dogs and Animal Birth Control activities.

Notes: Compliance with ABC Rules 2023

15. Contact Details

Office of Additional Commissioner, MC Shimla Email: mcsml-
hp@nic.in Phone: 0177-2652452

20. Annexures

Annexure A

Educational qualification of manpower to be deployed by the successful Individual Veterinary Practitioner

S.No	Manpower	Quantity	Qualification
1.	Veterinary Surgeons	1 Nos	Bachelor of Veterinary Science and Animal Husbandry from a recognized University or Institution; Registered with Veterinary Council of India or State Veterinary Council or Union Territory Veterinary Council.
2.	Veterinary Pharmacist	1 Nos	DVP (Diploma in Veterinary Pharmacy) from a recognized University or Institution

Format for Declaration on Blacklisting, Insolvency/Bankruptcy and conviction against the criminal activities

On company Letter head

Date: XX/XX/XXXX

To,

Municipal Commissioner,
Shimla-171001

Subject: Declaration on not being blacklisted, insolvency/ bankruptcy and conviction against the criminal activities

Dear Sir/Madam,

I/We hereby declare that as of date, (Name of the firm/company) including our Directors, Partners and Officers

1. Has not been ever under a declaration of ineligibility for corrupt or fraudulent practices by any State Govt. / Central Govt. / Board, Corporations and Government Societies / PSU for any reason.
2. Has not been ever insolvent, in receivership, bankrupt or being wound up, not have its affairs administered by court or judicial officer, not have its business activities suspended for any of the foregoing reasons.
3. Have not been convicted of any criminal offence related to their professional conduct or the making of false statements or misrepresentations within a period of five years as on date of submission of bid or not have been otherwise disqualified pursuant to debarment proceedings.
4. That the Rates quoted and to be charged are the lowest are also in no way higher than those quoted/charged by us from any other Institutions in the country during the corresponding period wherever applicable.
5. That RFP Document read and understood and fully aware of the nature of the services required.
6. That there is unconditional acceptance of all standard terms and conditions specified in the RFP Document(s)/Corrigendum(s), technical specification, and the instructions to Individual Veterinary Practitioner.

That I/We affirm that the Commissioner MC Shimla is at liberty to take action against me/ the company/firm represented by me, if any, information uploaded by me required as per RFP document proves to be wrong /false at any point of time.

Sincerely Yours,

(Signature of Authorized Signatory)

Name:

Title:

Format for Performance Bank Guarantee

To
The Commissioner
MC Shimla, H.P.

Reg: RFP for Conducting Animal Birth Control (ABC) Surgeries under CNVDR Process in Municipal Corporation Shimla (MCS) from Individual Veterinary Practitioner

WHEREAS (Name and address of the Individual Veterinary Practitioner) hereinafter called “the supplier” has undertaken, in pursuance of contract no__ dated _to provide services herein after called “the contract” AND WHEREAS it has been stipulated by you in the said contract that the supplier shall furnish you with an unconditional and irrevocable bank guarantee in favour of “The Commissioner MS Shimla” issued by scheduled public/private sector bank in India, cashable in Shimla (HP) INDIA, recognized by you for the sum specified therein as Performance security for compliance with its obligations in accordance with the contract. AND WHEREAS we have agreed to give the supplier such an unconditional and irrevocable bank guarantee; NOW THEREFORE we hereby affirm that we are guarantors and responsible to you, on behalf of the supplier, up to a total of Rs. (Amount of the guarantee in words and figures) which is 5% of the total value of the contract, and we undertake to pay you, upon your first written demand declaring the supplier to be in default under the contract and without cavil or argument, any sum or sums within the limits of (amount of guarantee) as aforesaid, without your needing to prove or to show grounds or reasons for your demand or the sum specified therein. We hereby waive the necessity of your demanding the said debt from the supplier before presenting us with the demand. We further agree that no change or addition to or other modification of the terms of the contract to be performed there under or of any of the contract documents which may be made between you and the supplier shall in any way release us from any liability under this guarantee and we hereby waive notice of any such change, addition, or modification. This guarantee shall be valid up to 90 days after date of completion of all contractual obligations by the successful Individual Veterinary Practitioner.

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

Name and designation of the officer

Seal, Name &Address of the Bank and address of the Branch.....

Contact No. of Banker: