

OFFICE OF THE PRINCIPAL, Dr. RADHAKRISHNAN GOVERNMENT MEDICAL COLLEGE HAMIRPUR(HP)

No.HFW/HMR(Govt. Medical College)Building/. Accommodation/18/- Dated:-

NOTICE INVITING EXPRESSION OF INTEREST FOR RESIDENTIAL , HOSTEL ACCOMMODATION & SPACE FOR HOSPITAL/MEDICAL COLLEGE DEPARTMENTS

Expression of interest is hereby invited from interested parties, building owners, public for hiring of Residential Accommodation & space for Hospital and Medical College departments preferably within/nearby Hamirpur town for Dr. Radhakrishnan Govt. Medical College, Hamirpur as per following specifications on lease basis, initially for two years which may be extended further on yearly basis. The detailed specifications of the required accommodations are as under:-

A) Residential Quarters for faculty:-

- i)Type-IV(03 Bedroom, 01 Drawing room with Kitchen & 2 bathrooms/toilets)= 15 Nos
ii)Type-III(02 Bedroom, 01 Drawing room with Kitchen & 1 bathrooms/toilet)= 15 Nos
iii)Type-II(02 Bedroom with Kitchen & 1 bathroom/toilet)= 15 Nos

The accommodations should be completely furnished with facility of water and electricity, parking etc.

B) Building & Space for the use of Hospital/Medical College Department with following facilities:-

- i)Electricity, Water and Sewerage
ii)Proper road connectivity and parking
iii)Proper attached toilets and washroom facility .
iv) Space available for OT, laboratory, X-ray/USG/ICU with Central Oxygen Supply line
v)OPD Rooms as per MCI norms
vi)IPD as per MCI norms

The accommodation equipped with furniture like table, chair, Almirah with locking system and hospital furniture will be preferred. The maintenance of hospital building will be done by the leaser at his own cost.

The Expression of Interest should reach in the office of **Principal, Dr. Radhakrishnan Government Medical College Hamirpur(HP)** on or before **02-05-2019** upto 2.00 pm. The application format for EOI may be downloaded from the Medical College website: - <http://www.rgmhamirpur.org>/or may be procured from the office of **Principal Dr RKGMC Hamirpur (HP)** on any working day between **10.00 am to 5.00 pm**.

The tender will be finalized after the MCC as per permission from the Election Department, Govt. of HP vide letter No 3-9/2019-ELN-I-53-933 dated 17-03-2019.

d/L
Joint Director(Admn),
Dr. Radhakrishnan Govt. Medical College,
Hamirpur(HP)-177001
e.mail. principal.hamirpur@gmail.com

Dated:- 05/04/19

Endst.No.AA/18/- 3242-45

Copy to:-

- 1) The Principal Secretary(Health) to the Government of Himachal Pradesh, Shimla-02 for information please.
- 2) The Director Medical Education and Research, HP, Shimla-09 for information please.
- 3) The Chief Electoral Officer , Himachal Pradesh Block No 38 , SDA Complex , Kasumpti Shimla-9 for information please w.r.t. letter No 3-9/2019-ELN-I-53-933 dated 17-03-2019.
- 4) **By Regd.Post** :-Director, Public Relations, Himachal Pradesh, Shimla alongwith five copies with the **request to publish above EOI in two leading daily News Papers (preferably Hamirpur page)** on or **before 09-04-2019** for wide publicity please.

d/L
Joint Director(Admn),
Dr. Radhakrishnan Govt. Medical College,
Hamirpur(HP)-177001

**FORM OF EXPRESSION OF INTEREST (EOI) FOR RESIDENTIAL, HOSTEL ACCOMMODATION DR.
RADHAKRISHNAN GOVERNMENT MEDICAL COLLEGE, HAMIRPUR (HP)**

- i) Name of the Legal owner of the premises/building _____
- ii) Address _____
- iii) Type of accommodation (Residential/Hostel) with year of construction _____
- iv) Type of accommodation (Type-IV/III/II & No. of Rooms in case of Hostel Accommodation _____, In case of Hospital Detail of Indoor & outdoor facilities _____
- v) Area (approx) in square meters _____
- vi) In case of hostel accommodation, whether adjoining separate accommodation for Hostel Warden available or not _____ & building has been provided with sufficient Furniture (Bed, Study Table & Chair, Almira etc.) _____
- vii) Whether accommodation is connected to road or not _____
(Please mention exact location /address of accommodation)
- viii) Parking for accommodation available or not _____
- ix) Whether accommodation is well furnished or requires renovation/alterations _____
- x) Whether basic amenities are available or not _____
- xi) In case of Hostel Accommodation, separate dining hall, common room, guest room available or not _____
- xii) Proper electricity & water supply available (Yes/No) _____
- xi) Rate of rent quoted for accommodation per month
Rs. _____
- xii) Any other salient aspect of the building which the party may like to mention _____

Note:- Please submit following documents with the form:- 1) Latest parcha/jamabandi of land showing ownership of the land & building 2) Map/drawing of the building 3) Certificate/permission granted by Municipal Committee for construction, in case of MC area.

Dated:-

Signature _____
Name and Complete Address:-

**FORM OF EXPRESSION OF INTEREST (EOI) FOR HOSPITAL SPACE DR. RADHAKRISHNAN GOVERNMENT
MEDICAL COLLEGE, HAMIRPUR (HP)**

i) Name of the Legal owner of the premises/ building _____

ii) Address _____

iii) Year of Construction _____

iv) No. of Rooms available for Hospital Detail of Indoor & outdoor facilities _____

v) Area (approx) in square meters _____

vi) In case of Hospital following details shall, be furnished :

- a. Detail of hospital furniture available _____
- b. whether Proper attached toilet and washroom facility _____
- c. whether Space available for OT, laboratory, X-ray/USG/ICU with Central Oxygen Supply line _____
- d. whether OPD Rooms as per MCI norms _____
- e. whether IPD as per MCI norms _____

vii) Whether accommodation is connected to road or not _____
(Please mention exact location /address of accommodation)

viii) Parking facility available or not _____

ix) Whether accommodation is well furnished or requires renovation/alterations _____

x) Whether basic amenities are available or not _____

xi) Proper electricity & water supply available
(Yes/No) _____

xii) Rate of rent quoted for accommodation per month
Rs. _____

xiii) Any other salient aspect of the building which the party may like to mention _____

Note:- Please submit following documents with the form:- 1) Latest parcha/jamabandi of land showing ownership of the land & building 2) Map/drawing of the building 3) Certificate/permission granted by Municipal Committee for construction, in case of MC area.

Dated:-

Signature _____
Name and Complete Address:-
