OFFICE OF THE SENIORE MEDICAL SUPERINTENDENT SHRI LAL BAHADUR SHASTRI GOVT. MEDICAL COLLEGE & HOSPITAL AT NER CHOWK, DISTT.MANDI HP-175008 e-mail – mssllbsgmchmandi02@gmail.com , Telephone-01905-243955

No. HFW-SLBSGMC&H/MS/AB-Jan-Aushadhi/2026- Dated:

Corrigendum

This is with reference to Pre-bid Meeting held on 28-10-2026 at 11:30 AM regarding EOI of Jan Aushadhi Generic Drug Store and further representations submitted by the interested parties, the following amendment is hereby made in EOI document:

Sr. No.	Existing Condition	Revised Condition
1	**3.3** Experience of minimum 07 years in pharmacy or any Govt. hospital(s).	Experience of minimum 07 years in pharmacy or any Govt. hospital(s). **Further, the applicant shall submit an affidavit duly attested by the Notary Public/ Magistrate to ascertain the correctness, Veracity and authenticity of the experience certificate as per specimen attached.**
2	e) In case the financial bid (%) of more than one party is same as L-1, then the work will be awarded to the concern as follows: - i). By toss, if tie between the two parties. ii). By lottery, if tie between more than two parties.	e) In case of financial bid of more than one firms/agencies are tie, then personal interview will be conducted by the expert committee for finalization of bidder on the basis of marks obtained in the interview (as per Annexure-B). In case of Tie in marks obtained from the interview in that case final selection will be made on the basis of toss/ Lottery system.

Further, last date for the submission is hereby extended to **12-11-2026** up to **11:00 AM.** Others terms and conditions are remain unchanged.

02/11/2026

Senior Medical Superintendent,
SLBSGMC&H Mandi at Ner Chowk,
Distt. Mandi (HP)

Endstt. No. as above 11211-14 Dated: 02/11/26

Copy to:

1. The Website Manager for uploading the "Corrigendum" in official Website www. Slbsgchmandi.com.

Senior Medical Superintendent,
SLBSGMC&H Mandi at Ner Chowk,
Distt. Mandi (HP)

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Annexure-B

The selection committee shall examine the candidates knowledge in the following field:-

1. Knowledge of Generic Medicine.
2. Knowledge of up keeping of Medical Records.
3. Knowledge of computer operation software.
4. Knowledge / Skill to store the Medicine.
6. Knowledge of regarding life saving drugs.
7. Knowledge of keeping & updations financial records. i.e. bills Vouchers etc.
8. Knowledge to maintain record and disbursement of narcotic drugs.
9. Knowledge of local customs & culture.
10. Knowledge of local dialect.

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AFFIDAVIT

I, Shri/Smt. ..... S/o / D/o / W/o ....., resident of ....., do hereby solemnly affirm and declare as under:

1. That I have submitted my experience certificate(s) along with the Expression of Interest (EOI) for outsourcing the services of a Pharmacist to run and manage the Jan Aushadhi Generic Drug Store at SLBS Govt. Medical College & Hospital, Mandi at Nerchowk.
2. That the experience certificate(s) submitted by me is/are genuine, true and correct and has/have been issued by the concerned employer/competent authority.
3. That the particulars, period of experience and other information mentioned in the experience certificate(s) are true and correct to the best of my knowledge and belief.
4. That I take full responsibility for the correctness, veracity and authenticity of the experience certificate(s) submitted by me which can be verified by the competent authority at any stage.
5. That in case any information furnished or document submitted by me is found to be false, forged or misleading at any stage, I shall be liable for rejection of my candidature/cancellation of the selection and such other action as may be permissible under the terms and conditions of the EOI and applicable rules/law.

DEPONENT

Signature: .....

Name: .....

Date: .....

Place: .....

VERIFICATION

Verified at ..... on this ..... day of ....., 20.... that the contents of the above affidavit are true and correct to the best of my knowledge and belief and nothing material has been concealed therefrom.

DEPONENT

(Affidavit before Notary Public/ Magistrate)

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Check List (Revised)

(Documents to be attached)

1	Whether the signature on EOI each page has been made by the bidder or not.	
2	Valid Pharmacy Registration up to date.	
3	Experience certificate alongwith Affidavit duly attested by the Notary Public/ Magistrate.	
4	Bonafide Himachali Certificate.	
5	Age proof (Matric Certificate)	
6	Certificate of Good performance from the Authorities/ Agencies with whom previously worked.	
7	Aadhar Card (Please attach copy)	
8	PAN No. (Please attach copy)	
9	Details of the FD/DD/TD/CD of bid security (EMD) FD/DD/TD/CD No: and tender fee i) **EOI Fee** ii) EMD No.	

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