



NATIONAL HEALTH MISSION (AROGYAKERALAM)

Office of the District Program Manager
Kottaram Building, General Hospital Compound
Iron Bridge PO, Alappuzha-688011
Phone: 0477-2230711

No-DPMSU-ALPY/1652/ABMO/2025/DPMSU

EXPRESSION OF INTEREST

National Health Mission, Alappuzha invites Expression of Interest (EOI) from qualified Chartered Accountant / Cost Accountant firms for conducting Concurrent Audit of the District Programme Management Support Unit (DPMSU), NHM Alappuzha and its peripheral institutions for the Financial Year 2025–2026. Only firms having their Head Office or branch offices in Ernakulam, Alappuzha, Kollam, or Kottayam districts are eligible to apply. The EOI Cover should bear the superscription “EOI Concurrent Audit (FY 2025-26) NHM Alappuzha,”

The EOI along with the Technical Bid and Financial Bid should reach the office of the undersigned on or before 15/01/2026 at 2.00 PM. The date and time of opening of the tender shall be 15/01/2026 at 3.00 PM. The undersigned reserves all the right to accept/reject the tenders without assigning any reason/notice.

Approval Valid

Digitally Approved By

Dr.Koshy C Panicker

Date: 29.12.2025

Reason: Approved

The document is digitally approved. Hence signature is not needed.

**NATIONAL HEALTH MISSION (AROGYAKERALAM), ALAPPUZHA
DISTRICT HEALTH & FAMILY WELFARE SOCIETY**

CONCURRENT AUDIT 2025-26

Sealed super scribed, competitive tenders are invited in separate tender forms for Concurrent Audit of accounts of DPMSU, Ernakulam and other Peripheral Institutions for the year 2025-2026 under the following terms and conditions:

1. Only registered firms with the ICAI/ICWA.
2. Blacklisted firms, if any, by the National Health Mission or by any other Government department/agency shall not be eligible to apply.
3. There should a track record of 3 years in the field of audit of established firms/Govt. sponsored organization and certificate for the same should be attached along with the tender.
4. The firm will have to conduct Concurrent Audit of the account of the District Programme Management supporting Unit, Ernakulam and peripheral Institutions.
5. Monthly regular audit of the District Office and minimum 3 blocks should be conducted in every month.
6. The firm has to make arrangement for the conveyance to peripheral Institutions.
7. Advance audit programme of peripheral Institutions should be intimated to this office before 1st week of the Audit Programme.
8. The successful bidder will have to carry out the work regularly and submit audit report without delay to the office of the undersigned in duplicate.
9. The tender should reach at the Office of the District Programme Manager, NHM Ernakulam on or before **15/01/2026** at **2.00 PM**. Tender will be opened on **15/01/2026** at **3.00 PM** in presence of bidder or their agents present.
10. Rate, terms and conditions of contract quoted, once accepted by NHM shall not be altered during the currency of the contract for any reason and shall be valid till the expiry of contract. There shall not any price increase in the rated quoted during the currency of the contract. The contract can be terminated by giving a notice of one month on either side.
11. The rate should be quoted in the enclosed proforma (Financial Bid) and tender should be put and sealed in separate sealed covers along with technical bid.
12. No advance will be made and the payment will be made only on a monthly basis on presentation of bill after deducting statutory recoveries.
13. If the services of the contractor are not satisfactory, NHM reserves the right to cancel the contract at any point of time without giving any reasons thereof.

14. Terms and conditions of contract quoted and accepted by the District Program Monitoring Support Unit shall not be altered during the contract period. The financial aid will be taken into consideration only after taking into the technical bid.

15. Normally, the contract will be awarded to the lowest tenderer but NHM reserves the right to accept/reject any or all the tenders without assigning any reason/notice. In case of same amount being quoted in the financial bid, preference will be given to those firms having more experience in the relevant field. If any dispute arises out of his/her contract, the same shall be referred to the Chairman, Executive Committee, District Health & Family Welfare Society, Arogyakeralam, Alappuzha or any other Officer nominating by him for the purpose, and his decision shall be final and binding and provisions of law relating to arbitration for the time being shall apply to such arbitration.

16. Any other information required may be had from the Office of the District Programme Manager (NHM), Kottaram Building, General Hospital Compound, Iron Bridge PO, Alappuzha, Pin - 688011, Phone - 0477-2230711, email - dpmalp@gmail.com on all working days between 10.00 am to 5.00 pm.

PLACES OF CONCURRENT AUDIT PROPOSED

No	Institution	Place
1	DPMSU, NHM Alappuzha	Office of the District Programme Manager (NHM), Kottaram Building, Iron Bridge PO, Alappuzha,
2	Arookutty Block	CHC Arookutty, CHC Perumbalam, CHC Thycattusser, PHC Pallippuram, PHC Panavally
3	Thuravoor Block	PHC Aroor, PHC Ezhupunna, PHC Kodamthuruthu, PHC Pallithode, PHC Thuravoor South, PHC Vallethode, PHC Vayalar, PHC Vettakkal
4	Muhamma Block	CHC Muhammam, CHC Thanneermukkom, PHC Cherthala south, PHC Kadakkarpally, PHC Kanjikuzhy, PHC Mararikulam North
5	Chettikad Block	TH Chettikad, PHC Aryad, PHC Kalavoor, PHC Mannancherry
6	Ambalappuzha Block	CHC Ambalapuzha, PHC Ambalapuzha North, PHC Punnappa North, PHC Punnappa South, PHC Purakkad, PHC Thottappally

7	Thrikunnapuzha Block	CHC Thrikkunnapuzha, GFH Pallana, PHC Cheruthana, PHC Chingoli, PHC Haripad, PHC Karthikappally, PHC Karuvatta, PHC Kumarapuram, PHC Pallipad, PHC Veeyapuram, TB Clinic Karuvatta
8	Muthukulam Block	CHC Muthukulam, GFD Arattupuzha, PHC Arattupuzha, PHC Cheppad, PHC Devikulangara, PHC Kandalloor, PHC Krishnapuram, PHC Pathiyoor
9	Chunakkara Block	CHC Chunakkara, LS Noornadu, PHC Bharanikavu, PHC Nooranad, PHC Palamel, PHC Thamarakulam, PHC Vallikunnam
10	Kurathikad Block	CHC Kurathikad, PHC Chennithala, PHC Chettikulangara, PHC Thazhakara
11	Pandanadu Block	CHC Pandanad, CHC Mannar, PHC Ala, PHC Budhanoor, PHC Cheriynad, PHC Eramallikkara, PHC Kadampoor, PHC Mulakkuzha, PHC Puliyoor, PHC Venmony
12	Veliyanadu Block	CHC Veliyanad, PHC Kavalam, PHC Muttar, PHC Neelamperoor, PHC Ramankary
13	Chempumpuram Block	CHC Champakkum, CHC Chempumpuram, CHC Edathua, PHC Kuppapuram, PHC Thakazhy, PHC Thalavady
14	GH, DH, THQH's, TH	GH Alappuzha, DH Mavelikkara, DH Chengannur, W&C Alappuzha, THQH Cherthala, THQH Haripad, THQH Kayamkulam, THQH Pulincunnu, TH Thuravoor, MCH Alappuzha
15	NUHM, NCD and Disease Control Programmes	UPHC Mullathuvalappu, UPHC Mangalam, UPHC Nehrutrophy, UPHC Cheravally, UPHC Karuva, NCD and Disease Control Programmes

**District Programme Manager
NHM ALAPPUZHA**

Expression of Interest for short listing Chartered Accountant Firms/Cost Accountant Firms for the monthly concurrent audit of the accounts of the District Health and Family Welfare Society Alappuzha

Technical Bid

Status of the Firm Partnership Sole Proprietorship

1. (a) Name of the firm (in Capital Letters) _____
- (b) Address of the Head Office _____
- (Please also give telephone no. _____
 And e-mail address) _____
- (c) PAN No. of the firm _____
2. ICAI Registration No. _____ Region Name _____
Region Code No. _____
3. (a) Date of constitution of the firm:
 (b) Date since when the firms have a full time FCA/Cost Accountant
4. Full - time partners/sole Proprietor of the firm as on 1st April 2025

No	Years of continuous association with the firm	No. of FCA	No. of ACA/Cost Accountant
1	Less than one year		
2	1 year or more but less than 5 years		
3	5 years or more but less than 10 years		
4	10 year or more but less than 15 years		
5	15 years or more		

(Please attach the copy of Firm's Constitution Certificate issued by ICAI)

5. Number of part time partners if any, as on 1st April 2025
6. Number of full time Chartered Accountant/Cost Accountant as on 1st April 2025
7. Number of audit staff employed full -time with the firm
 - (a) Articles/ Audit Clerks _____
 - (b) Other Audit Staff (with knowledge of book Keeping and accountancy) _____
 - (c) Other Professional Staff (please specify) _____
8. Number of Branches if any (Please mention Places & locations): _____

9. Whether the firm has conducted statutory/internal audit in institutions/ societies under Kerala Health Services Department and if so, provide complete details (attach separate sheet if space is insufficient)

10. Whether the firm is implementing quality control Policies and procedures designed to ensure : Yes/No
That all audit is conducted in accordance with Statement on Standard Auditing Practices.
(if yes, a brief note on the procedure adopted is to be enclosed)

11. Whether there are any court/arbitration/any
Other legal case against the firm
(If yes, give a brief note of the case indicating its present status)

Undertaking

I we do hereby declare that above mentioned information are true & correct and I/ we also undertake to abide by the terms & condition of the contract and would make compliance of terms laid down in the contract if executed by us with the District Health and Family Welfare Society.

Date:

Place:

Signature of Proprietor/Sole Partner

**Standard Evaluation sheet for Evaluation of the Technical Bids of the Monthly
Concurrent Auditors at State & District Health Societies**

Name of the Firm:

No	Criteria	Remarks
1	No. of partners - (FCA/ACA/ICWA)	
2	Years of experience of the firm	
3	Association with NHM in the previous years and the track record (including good rapport with institutions) (mention also the number of institutions covered during the years under audit)	
4	No. of Staff	
	i. Qualified	
	ii. Semi Qualified	
	iii. Others	
5	Nature of experience (giving Turnover/Project cost/years of experience of the entities/project audited)	
	i. Govt. Social Sector Audit	
	ii. Other Social Sector Audit	
6	Total turnover of the firm in last three years	

Note:

1. In the Invitation Letter, CA/ICWA firms will be asked to give details of all these criteria while applying
2. CA/ICWA firms will also provide their latest Certificate of Firms Constitutions as on 1st January of the current year issued by ICAI/ICWA and their latest Income Tax Return duly acknowledge by IT Department. Firms not able to provide these two documents will not be considered
3. Each member of the evaluation committee will fill up this form separately
4. Only those firms which have qualified for the technical bid will be eligible for financial bid.

Signature of Proprietor/Sole Partner

Expression of Interest for short listing Chartered Accountant Firms/Cost Accountant Firms for the monthly concurrent audit of the accounts of the District Health and Family Welfare Society Alappuzha

Financial Bid

- 1) I, We are agreeable to concurrent monthly audit of the District Health and Family Welfare Society, Alappuzha District and other peripheral Institutions (includes DPMSU and all institutions as mentioned in the tender document) at a fee of Rs..... only per month which is inclusive of cost of travel.
- 2) I understand that TDS will be deducted at source.
- 3) I understand that service tax at applicable rates will be extra.
- 4) Other financial terms are:

Date:

Place:

Signature of Proprietor/Side partner

Copy to -

1. SMD NHM
2. Information & Public Relation Department
3. District Panchayath Alappuzha
4. Collectorate Alappuzha
5. District Medical Office (H) Alappuzha
6. Municipality Alappuzha
7. General Hospital Alappuzha
8. Stock File