



NATIONAL HEALTH MISSION ALAPPUZHA

District Programme Monitoring & Support Unit
 Kottaram Building, General Hospital Compound
 Iron Bridge Post, Alappuzha-688011
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EXPRESSION OF INTEREST

No. NHM/ALP/40/2026-BME

Dated : 15-01-2026

National Health Mission, Alappuzha invites Expression of Interest (EOI) from eligible Taxi Owners or Travel Agencies for empanelment of 5-seater and 7-seater Taxi Cars for the official use various Programmes under NHM Alappuzha. Interested Service Providers or Individual Vehicle Owners shall submit their EOI in the prescribed format (Annexure-I) in a sealed cover. The EOI Cover should bear the superscription “EOI for Empaneling Taxi Vehicles”

The EOI along with the Technical Bid and Financial Bid should reach the office of the undersigned on or before 30/01/2026 at 2.00 PM. The date and time of opening of the tender shall be 30/01/2026 at 3.00 PM.

Terms & Conditions

- The vehicles offered shall be registered as commercial (Taxi) and shall possess valid RC, Permit, Insurance, Fitness Certificate, and PUC.
- The vehicle age shall not exceed five (5) years as on the date of submission of EOI.
- The empanelment shall be on call basis / as and when required, and submission of EOI does not confer any right for engagement.
- Fuel charges, driver wages, maintenance, repairs, insurance, taxes, and all statutory liabilities shall be borne by the vehicle owner.
- Toll charges and parking fees, if any, shall be reimbursed on actuals subject to production of valid receipts and approval.
- Vehicles shall be provided with drivers holding valid commercial driving licences, and the drivers shall adhere to discipline and official instructions.

- Self-attested copies of RC Book, Insurance Certificate, Fitness Certificate, Permit, PUC Certificate, Driving Licence of driver, Identity proof of owner shall be attached along with the EOI for verification.
- The empanelment shall be valid for a period of one year, subject to satisfactory performance, and extendable as per NHM requirements.
- NHM, Alappuzha reserves the right to accept or reject any or all EOIs without assigning any reason thereof.

Signed by
Koshy C Panicker
Date: 15-01-2026 13:10:15

Dr. Koshy C Panicker
DISTRICT PROGRAMME MANAGER



ANNEXURE - I

FORMAT FOR SUBMISSION OF RATES

(For Empanelment of Taxi Vehicles on 8 Hours / 80 Km Basis)

1. Name of Applicant

(Vehicle Owner/Agency):

2. Address:

3. Contact Details:

Mobile No:

Email ID:

4. Details of Vehicle Offered

No.	Vehicle Make & Model	Registration No.	Seating Capacity	Engine Capacity (CC)

5. Rate Quoted

A. Base Rate (8 Hours / 80 Km)

Category of Vehicle	Rate Quoted (₹)
Motor Cab below 1500 cc	₹
Motor Cab 1500 cc & above	₹

B. Additional Charges

No.	Particulars	Rate Quoted
1	Extra Kilometer (beyond 80 km)	₹ per km
2	Extra Hour (beyond 8 hours)	₹ per hour
3	Night Halt / Detention (if applicable)	₹ per day

6. Declaration

I/We hereby declare that the above rates are quoted in accordance with Kerala Government. The quoted rates are inclusive of fuel charges, driver wages, maintenance, insurance, and statutory taxes. Toll and parking charges, if any, shall be claimed separately on actuals with valid receipts, subject to approval. I/We agree to abide by all terms and conditions stipulated in the EOI issued by NHM, Alappuzha.

Place:

Date:

**Signature of Applicant or
Authorized Signatory:**

Name:

Seal (if applicable)