

**EXPRESSION OF INTEREST (EOI) DOCUMENT FOR
TRANSFER OF TECHNOLOGY**



**Biomedical Technology Wing
Sree Chitra Tirunal Institute for Medical Sciences & Technology
Satelmond Palace, Poojappura – 695012
Kerala State, India**

I. INSTRUCTION TO BIDDERS PARTICIPATING IN EOI

1. A bidder interested in submitting an EOI may request for a pre-bid meeting, if required, during the specified period.
2. The EOI should be submitted in two parts (i) Company Profile (ii) Financial bid.
The company profile must specify details and strength of the company as specified in **Annexure -1** and the Financial bid may be made as per the **Annexure -2**. The Company profile and Financial bid must be **submitted in a sealed cover**.
3. The bidder should clearly mention the name of the technology/product for which the EOI is being submitted.
4. Failure to furnish the required information or submission of an EOI not adhering to the bidding formats may result in the rejection of the bid.
5. To assist the bidding evaluation process certain clarifications may be asked by SCTIMST. Both the clarification and the replies shall be in writing. No other clarification from the bidder shall be entertained in the post-bid phase.
6. All cost associated with the bidding shall be borne by the bidder.
7. Bidders shall clearly indicate their legal entity status and the person submitting the EOI must be an authorised signatory.
8. The bid super scribed with **“Company profile and financial bid for(name of tech/product) ”** shall be addressed to :

The Head, BMT wing
SCTIMST
Biomedical Technology Wing
Satelmond Palace, Poojappura – 695012
9. The bidder should submit the details within the last date either by post, courier or hand delivery.
10. SCTIMST reserves the right to reject any application if the firm is found unsuitable in compliance of instructions, without citing reasons.
11. The selected bidder/s shall enter into a Memorandum of Understanding/ Technology Transfer agreement with SCTIMST as per agreed terms and conditions.
12. All the cases of disputes shall be under the jurisdiction of courts of Thiruvananthapuram.

Annexure 1

COMPANY PROFILE FOR TECHNOLOGY TRANSFER

1. Organizations, startups or entrepreneurs interested in seeking technology from the Institute may kindly provide background information on their organization/experience. This information will help the Institute identify the suitable industry partner for technology transfer.
2. Kindly attach copies of **annual report, product brochures/ pamphlets** and any other relevant information along with this form. Add additional sheets if needed.

Name of technology / product (s) sought with reasons of choosing the technology: (i) (ii) (iii)
Name and registered address of the company /entrepreneur
Nature of Entity (e.g. company, partnership, proprietorship)
Year of establishment
Phone / Fax
Email
Website
Names and Addresses of Board of Directors/ Partners
Name and address of contact person

Annual sales turnover (last 3 years)	Year	Sales Turnover	Net Profit

Please state nature and details of business carried out at present
(Please add separately, if needed)

Major Products / Brands with market share

Please describe your marketing set up and plans for marketing the product (domestic and export)

Does the bidder have the necessary/related manufacturing facility that may be required for the technology selected? Yes / No. (If No, what is the alternative strategy that the bidder proposes?)

Please describe your manufacturing set up/strength with brief description of facilities/ equipment / processes handled.

Please describe your human resources and highlight qualification / experience of key technical and managerial persons

Please describe your R&D setup / strength / technology tie up with other organizations

Please state your experience in commercializing technology / technology absorption (if any)

Please state your experience in health care sector/ linkages with clinicians

Please highlight any other relevant information such as synergy in technology or marketing of this product.

Does the bidder have previous experience in manufacturing and marketing of products of this kind or any other medical device? Yes /No. If Yes, kindly share the similarities

If No, kindly share your plan of action on accomplishing the technology commercialization of this technology. If there is any plan for other alliances in accomplishing this, please also specify the same.

How is the scaling up of the technology planned.

- (a) If the technology requires clinical trials what shall be the plan of action from the bidder. Please elaborate with respect to the technology being bid.
- (b) If the technology requires modification in terms of aesthetics and convenience, shall you be able to take care of the same?

How do you plan to carry out the quality control during the manufacturing? Do you have your own facility or will it be outsourced?

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What support do you anticipate from SCTIMST?

If the support requires SCTIMST personnel to be at your premises will you be prepared to meet the expenses for the same including the remuneration?

If you are a start up or a new entry to the field how do you justify yourselves to be selected as a successful bidder?

Date
Place

Signature:

Name and Designation

Seal

Annexure 2
FINANCIAL BID

In general, the fee for the technology shall include the following:

OPTION 1 -EXCLUSIVE LICENCE

Exclusivity for a period of _____ years from date of signing agreement

Upfront Lumpsum Payment	Rs
Royalty rate for royalty payment based on annual sales	_____ % Royalty as % of the ex-factory sales price of the product, payable annually, for as long as the product is sold

OPTION 2 – NON EXCLUSIVE LICENCE

Non- Exclusive licence

Upfront Lumpsum Payment	Rs
Royalty rate for royalty payment based on annual sales	_____ % Royalty as % of the ex-factory sales price of the product, payable annually, for as long as the product is sold

Note:

1. **Exclusive licence will require substantially higher lumpsum depending upon period of exclusivity sought.**
2. **Exclusivity is subject to the company commercialising the product within the prescribed time period.**
3. **You may choose to quote for only one or both options**
4. Any lumpsum fee paid will not be refunded
Upfront Lumpsum Payment is generally calculated as a percentage of the investment estimated to be made initially for the project.