

Annexure – A

Performance Bank Guarantee for Hospitals/Eye Care Centre/Dental Clinics

To:

The President of India

Acting through (Additional Director, CGHS Mumbai),

Ministry of Health & Family Welfare

Prathishta Bhavan,

M. K Road,

New Marine Lines,

Mumbai 400020.

WHEREAS _____

(Name of Hospital) has undertaken, Agreement No. _____

dated, _____ 2020 to _____

_____ (Description of Services)

hereinafter called "the Agreement".

AND WHEREAS it has been stipulated by you in the said Agreement that the Hospital selected for empanelment shall furnish you with a bank Guarantee by a nationalized bank for the sum specified therein as security for compliance with the Hospital performance obligations in accordance with the Agreement.

AND WHEREAS we have agreed to give the Hospital a guarantee:

THEREFORE WE (Name of the Bank) hereby affirm that we are Guarantors and responsible to you, on behalf of the Hospital (hereinafter referred to "the Second Party" up to a total of _____ (Amount of the guarantee in Words and Figures) and we hereby irrevocably, unconditionally and absolutely undertake to immediately pay you, upon your first written demand declaring the Second

Party to be in default under the Agreement and without cavil or argument, any sum or sums within the limit of _____ as aforesaid, without your needing to prove or to show this grounds or reasons for your demand or the sum specified therein. This guarantee is valid until the _____ day of _____ 2022.

This Guarantee shall be incorporated in accordance with the laws of India.

We represent that this Bank Guarantee has been established in such form and such content that is fully enforceable in accordance with its terms as against the Guarantor Bank in the manner provided herein.

The Guarantee shall not be affected in any manner by reason of merger, amalgamation, restructuring or any other change in the constitution of the Guarantor Bank or of the Hospital.

Date

Signature and Seal of Guarantors

Address:

Amount of Performance Bank Guarantee to be obtained from the Hospitals at the time of signing the Agreement: -

General Purpose Hospital	Rs. 10.00 lakhs
Specialty Hospitals	Rs. 10.00 lakhs
Super Specialty Hospital	Rs. 10.00 lakhs
Specialty Eye Care Hospital	Rs. 2.00 lakhs
Specialty Dental Clinic	Rs. 2.00 lakhs