

**Proposal Form**

**1. Instructions**

- 1.1. The proposal shall be duly signed by the authorized signatory.
- 1.2. Proposers are advised to go through the guidelines carefully before submitting the proposal.
- 1.3. Proposers shall follow the format provided in this proposal form for submitting the proposals. Proposers shall provide information and enclose all the supporting documents as detailed.
- 1.4. All proposals will be submitted to the DoP in physical form and soft copy (pen drive/ CD) in a sealed envelope, addressed to Dr. Sumit Garg, Deputy Secretary (Policy), Department of Pharmaceuticals, Ministry of Chemical & Fertilizers, Room No. 228, A-Wing, Shastri Bhawan, New Delhi – 110001.
- 1.5. Proposal has following two sections:
  - I. Proposer Details
  - II. Details of the Proposal

**2. Section I – Proposer Details**

- 2.1 Name of the State
- 2.2 Authorised Signatory Details – Name, Designation, Contact No. (Mobile and Office Landline No.), Email and complete office address.

**3. Section II - Details of the Proposal**

**3.1 Cost of Development of the Park & tentative source of funds (Rs. in crore):**

- i. Cost of Development of the Park (estimated)
- ii. Central Government Share (Grant-in-Aid)
- iii. State Government /Union Territory share with source of funds for share of State Govt./ Union Territory

**3.2 Details of Land:** Total land area (in acres) of the proposed park and estimate of area available for allotment to medical device manufacturing units (which shall be not less than 50% of the total land area).

The State is required to furnish the details on the following specific points (in case, any of the following is applicable to the land, including part of the land, proposed for the park):

- a) Location of the land on google map, mapping of the land and land survey report
- b) Status of ownership, possession and mutation of the land in the revenue records
- c) Status of any encroachment, unauthorised possession or habitation on the land (including part of the land) proposed for the park
- d) Whether the land (including part of the land) is subject to any rehabilitation requirement etc. The status, procedure and timelines of the same should be clearly mentioned
- e) Whether there is any compensation related issue which is pending for the land (including part of the land)
- f) Whether there is any legal dispute or claim, pending in any court of law with any party for the land (including part of the land). If yes, detail about nature of dispute, forum where pending and any timelines for closure to be furnished.
- g) Any other known encumbrance, restriction or relevant information which may have an impact on timely completion of development of the Park, please furnish the details.

### **3.3 Land Lease Rate**

Please specify the land lease rate (*annual rent per square meter in Rs.*) to be offered to medical device manufacturing units to be set up in the park. The state is required to clearly mention the upfront fee payable by the manufacturing unit and all subsequent payment with the periodicity and duration of payment.

The lease rent referred to above shall be a comprehensive levy for allotment of land.

### **3.4 Commitment to provide 24\*7 availability of power and water supply**

The State is required to give a commitment with broad details for sourcing continuous power and water supply, which shall be considered for the evaluation of the proposal. However, the selected States will be required to provide detailed justification and feasibility for sourcing continuous power and water supply in the Detailed Project Report.

### **3.5 Location of the park vis-à-vis connectivity**

The State should specify the distance (in km) of proposed Park from the following:

- a) Nearest National Highway
- b) Nearest Air Cargo/ Airport
- c) Nearest Sea Port / In-land waterway/ Dry Port

Please specify the location and name the National Highway, Air Cargo and Nearest Sea Port/ In-land waterways and Dry Port.

**3.6 Location of the park vis-à-vis eco-sensitive zone of protected area**

Whether the land is in proximity to any of the eco sensitive zone of protected area. The state is required to furnish the detail of distance (in km) of proposed park from nearest such zone.

**3.7 Policy incentives given/proposed by the State government for Medical Device industry**

- a) **Interest subvention scheme:** Whether the State has/proposes any interest subvention scheme on the loan availed by the Medical Device manufacturing units. State is required to provide the detail of percentage of interest rate subvention for a period of 10 years from the date of operation of the park.
- b) **Incentive in the form of GST reimbursement, subsidy etc. against investment:** The State is required to submit detail of all incentives by way of GST reimbursement/ subsidy or any other form of incentive, as a % of the total investment made by Medical Device manufacturing unit. State is also required to submit the calculation of such % of incentive against investment.
- c) Whether State commits to exempt the Stamp Duty and Registration Charges for medical device manufacturing units (Yes/ No).

*Please submit the relevant supporting documents.*

**3.8 Utility Charges**

State is required to submit the following utility charges to be charged from Medical Device manufacturing units. The said charges will have to be committed by the State and undertaking in this regard shall be submitted as appended in this Proposal Form.

<b>Utility</b>	<b>Units (for specifying the charges)</b>
Power	kWh
Water	Per kilo litre
Warehouse	Monthly charges per square meter
Park maintenance charges	Annual charges per square meter

**3.9 Availability of technical manpower**

- a) Specialised research institutes in Medical device sector- Number, Name, Address and recognition status

- b) Engineering, Medical and Pharmacy colleges- Number, Name, Address and recognition status

Institute recognised by concerned State or Central body only shall be considered.

**3.10 Number of Industrial Network in the State**

- a) Ancillary spare part producers – Name and location of engineering ancillaries in the State
- b) Registered MSMEs – Name and location of engineering MSMEs in the State

**3.11 Institutes for technology transfer**

- a) Institute in the State involved in Technology Transfer

*Document required:* Such Institute's Registration Documents or Letter of Intent to State/ SIA to support the Park or MoU with the State.

**3.12 Latest Ease of Doing Business ranking of the State**

### Undertaking

In connection with our application for development of a Medical Device Park as notified vide notification no. - 31026/08/2020-MD, dated - 21/07/2020 and guidelines thereunder, the State of ..... acting through authorised signatory Sh..... do hereby undertake unconditionally and irrevocably that the State of ..... shall ensure to:

- i) adhere to the roles and responsibilities of the State as outlined under these guidelines and fulfil all the commitments made in the proposal.
- ii) set up a State Implementing Agency (SIA) with the roles and responsibilities, as outlined in the Guidelines of the Scheme "Promotion of Medical Device Parks".
- iii) make available balance amount of Project Cost without any delay, as may be required for completion of development of Medical Device Park, through budgetary and/or other sources, as may be necessary.
- iv) not increase the land lease rent and utility charges, as declared in the proposal, beyond 5% per annum, for the next 10 years.
- v) establish a Research and Development facility as a Centre of Excellence in the park to be operated by an institution or by a society. Such centre of excellence shall employ competent scientists with suitable experience and promote industry academia linkage. The State Government shall provide sufficient financial and other support for such centre.
- vi) adhere to the responsibilities as specified in these guidelines and also the SIA, as appointed, and implementing agency, if any, as appointed, shall also adhere to the roles and responsibilities specified in these guidelines.

To be signed by the Authorised Signatory

Mention name and designation