

INSURANCE POLICY FOR LOSS OF RATING
ALLOWANCE/LICENCE FOR ATCOs IN AAI DUE TO CLASS-III
MEDICAL UNFITNESS

QUOTATION NOTICE-2011

No.AAI/HR/SSS/CMIP-2011

Dated : 14.03.2011

Sub: Notice inviting quotations for Insurance Policy for loss of rating allowance/licence for ATCOs in AAI due to Class-III Medical unfitness.

Sir,

Airports Authority of India is in the process of inviting quotations (two bid process) for **Insurance Policy for loss of rating allowance/licence for ATCOs in AAI due to Class-III Medical unfitness**. Notice for the same has already been forwarded to you on your email address.

In case you are interested and eligible, you may quote your comprehensive firm premium rate and your offer may be submitted in the Office of Executive Director(HR), Airports Authority of India, Rajiv Gandhi Bhawan, Safdarjung Airport, New Delhi-110003, in a sealed envelope on or before **23rd March'2011 by 3:00p.m.** Quotations received after due date & time will not be entertained and are liable to be rejected.

You may contact Sh. SK Sharma, Joint G.M.(HR), AAI, CHQ, RG Bhawan, New Delhi in person or on Phone No.24623604 (Off.) or on email address: **shivkumar@aai.aero**

(SK Sharma)
Jt. General Manager(HR)

Sub: Notice inviting quotations for Insurance Policy for loss of rating allowance/licence for ATCOs in AAI due to Class-III Medical unfitness

Sir,

1. The Airports Authority of India is a Mini Ratna Public Sector Enterprise under the Ministry of Civil Aviation, Govt. of India. AAI is engaged in development, maintenance & operation of 126 Airports including International, Domestic & Civil Enclaves in India. In addition, it is also handling Import & Export Cargo at its Airports.
2. The Corporate Headquarter is situated at New Delhi & Regional Headquarters are situated at New Delhi, Mumbai, Chennai, Kolkatta & Guwahati.
3. The Authority has on its roll approx. 18403 qualified & trained personnel out of which 1869 number of employees are working as ATCOs. The normal age of retirement is 60 years.
4. Medical Scheme Background : Medical facilities are available to all employees post employment. However, medical examination is compulsory before entering to the services of AAI and during service also for certain category of staff.
5. The Company has several disciplines to function the Operation smoothly. Out of which ATM discipline is one of the pioneer disciplines working for operation of Airports.
6. Background: In AAI, there are 1869 approx. Air Traffic Controllers. The ATC's are entitled for stress allowance/rating allowance per month in addition to the salary. In the event ATCO's is not able to perform duty due to sickness, he is not entitled for above stress/rating allowance. However, he is covered for medical benefit under the in-house medical re-imburement for outdoor and in-door treatment. It is proposed to provide coverage under Insurance Policy for loss of rating allowance.

7. DATA DETAILS REQUIRED FOR THE POLICY AS ON 1.12.2010 :

No. of ATCOs 1869

No. of Participating ATCOS eligible for the policy 1500

Average age of ATCOs 38.88 years

Age distribution: (1) Age less than 30 years:

COUNT=281 and AVERAGE=27.67

(2) Age greater than or equal to 30 but less than 40 years:

COUNT=560 and AVERAGE=35.22

(3) Age greater than or equal to 40 but less than 50 years:

COUNT=497 and AVERAGE=44.57

(4) Age greater than or equal to 50 but less than 60 years:

COUNT=162 and AVERAGE=53.47

Rating details as on 1.12.2010 :

Average rating allowance per month for 1500 ATCOs	Rs. 13,713/-
Total rating allowance for 1500 ATCOs per month	Rs. 2, 05, 56,255/-
Total rating allowance for 1500 ATCOs per year	Rs. 24, 66, 75, 060/-

8. FOR CLASS THREE MEDICAL HISTORY AS ON 1.12.2010 :

Temporary Unfit	3
Permanent Unfit	1

9. The details of the ATCOs rating allowance/licence in AAI due to Class-III Medical unfitness required for the policy are as under :

9.1 AIR TRAFFIC CONTROL OFFICER (ATCO): Air traffic controllers/ officers are the people who operate the air traffic control systems to expedite and maintain a safe and orderly flow of air traffic. They apply separation rules to keep aircraft apart from each other in their area of responsibility and move all aircraft safely and efficiently through their assigned sector of airspace.

9.2 PARTICIPATING CONTROLLERS: The ATCOs for whom compiled data has been given to Insurance Co., Premium will be deducted from their salary of April for the policy. They will be entitled for claim of insured rating allowance for the stipulated periods in case of TMU/PMU or any combination thereof due to class III medical unfitness.

9.3 RATING: It is the authorization for an ATCO, to perform independent duties at the air traffic service unit for the provision of relevant air traffic services after undergoing sufficient training and evaluation by duly constituted rating board. Ratings are station dependent, a person having Mumbai rating does not mean he/she can work at Delhi automatically. A controller can have variable number of ratings in a year. Different Controllers are having different ratings at a station. These ratings are likely to be termed as licence shortly.

9.4 RATING ALLOWANCES: These are the allowances controllers get for the possession of ratings of the air traffic services units and equipment. A controller can have variable amount of rating allowance in a year due to various reasons e.g. acquiring new ratings, loss of rating due to incident, transfer etc. Controllers are having different ratings allowance at a station due to difference in experience. Rating allowances are also reviewed from time to time. Applicable Rating allowances are enclosed as annexure *.

9.5 CLASS III MEDICAL TEST: An ATC shall hold a valid Class III medical assessment by the Doctor prescribed by the regulator of the industry i.e. Director General of Civil Aviation (DGCA) or employer Airports Authority of India. Considering the ICAO [international civil aviation organization (international regulator)] recommendations, Competent Authority has decided that the period of

validity of Medical Assessment for ATCOs up to the age of 40 years shall be 48 months and for ATCOs above 40 years the validity shall be 24 months. Class III medical Performa and its requirements are enclosed as annexure *.

9.6 CLASS III MEDICAL UNFITNESS: ATCOs unable to meet the class III medical standards as prescribed, will be treated as class III medically unfit. The class III medical unfitness may have two categories, namely, temporary and permanent.

1. TEMPORARY MEDICAL UNFITNESS (TMU): In the event of an ATCO being declared 'Temporary Medically Unfit'.

2. PERMANENT MEDICAL UNFITNESS (PMU): In the event of an ATCO being declared 'Permanent Medically Unfit'.

There can be following types of TMU/PMU/TMU AND PMU combination occurring:

An ATCO may become TMU and subsequently fit; in a given policy period of one year: eligible to draw Rating allowances as it will be submitted by AAI in ATCO rating allowance data for a period of TMU up to 12(twelve) months(to be paid by Insurance co. of policy year for the duration of TMU).

An ATCO may become TMU and subsequently PMU in the same policy period: eligible to draw Rating allowances as it will be submitted by AAI in ATCO rating allowance data for a period of TMU up to 12 months thereafter eligible to draw Rating allowances as it will be submitted by AAI in the ATCO rating allowance data for 120 months (one hundred twenty months) or Separation from AAI whichever is earlier (both to be paid by Insurance co. of policy year ATCO became TMU and PMU).

An ATCO may become TMU in a given policy period and Temporary medical unfitness continues in the next policy period and ATCO become fit in the next/subsequent policy period: eligible to draw Rating allowances as it will be submitted by AAI in ATCO rating allowance data for TMU period up to 12(twelve) months (to be paid by Insurance co. of policy year in which controller became TMU for the entire 12 month). **Such TMU ATCOs shall be eligible candidate i. e. Participating controller for the next policy period.**

An ATCO may become TMU in a given policy period and Temporary medical unfitness continues in the next policy period and ATCO become PMU in the next/subsequent policy period: eligible to draw Rating allowances as it will be submitted by AAI in ATCO rating allowance data for TMU period up to 12(twelve) months(to be paid by Insurance co. of policy year in which controller became TMU for up to 12 month) thereafter eligible to draw Rating allowances as it will be submitted by AAI in the ATCO rating allowance data for 120 months (one hundred twenty months) or Separation from AAI whichever is earlier (to be paid by Insurance co. of policy year in which ATCO became PMU). **Such TMU ATCOs shall be eligible candidate i. e. Participating controller for the next policy period.**

An ATCO may become PMU in the policy period: eligible to draw Rating allowances as it will be submitted by AAI in the ATCO rating allowance data for 120 months (one hundred twenty months) or Separation from AAI whichever is earlier (to be paid by Insurance co. of policy year ATCO became PMU).

If there is any other combination of TMU/PMU/TMU and PMU they should be resolved in the spirit of above.

10. CONDITIONS:

10.1 INSURANCE FOR LOSS OF RATING ALLOWANCE IN CASE AN ATCO BECOMES CLASS III MEDICAL UNFIT:

The class III medical unfitness has two categories, namely, temporary and permanent. The insurance of the allowance shall cover both types of unfitness.

TEMPORARY MEDICAL UNFITNESS (TMU): In the event of an ATCO being declared 'Temporary Medically Unfit', he/she shall draw Rating allowances as it will be submitted by AAI in ATCO rating allowance data for a period up to 12(twelve) months.

PERMANENT MEDICAL UNFITNESS (PMU): In the event of an ATCO being declared 'Permanent Medically Unfit', he/she shall draw Rating allowances as it will be submitted by AAI in the ATCO rating allowance data for 120 months (one hundred twenty months) or Separation from AAI whichever is earlier.

The rating allowance data shall be provided by AAI as on First day of January every year. The rating allowance in this data will form the basis for claim.

- 10.2 No claim of rating allowances shall be payable in case of dismissal, termination, death, or loss of ratings due to ATC incidents.
- 10.3 ATCOs are already undergoing Class III medical assessment, therefore they shall not be subjected to further medical test separately for insurance.
- 10.4 AAI will be taking a group insurance Policy named "Insurance policy for loss of rating allowance/licence for ATCOs in AAI due to class III medical unfitness".from the Insurance Company for protection of rating allowance of 1500 No. of ATCO. Policy from the Insurance Company will be taken in the name of AAI. **A total premium for the protection of rating allowance/licence of all the 1500 ATCOs due to class III medical unfitness of all combination shall be quoted by the insurance company.** This process can be followed in subsequent years. AAI will be submitting the agreed premium by 01.04.2011. Policy will be effective from 01st April 2011 for a period of one year. AAI will be responsible for submission of premium to insurance company and claim of insured amount from the insurance company.

10.5 CLAIM OF INSURANCE AMOUNT:

ATCO declared class III medically unfit is eligible for the last submitted rating allowance for the duration stated in Condition 3.1.1 and definitions. The following claim will be given to the AAI who in turn will be giving it to the ATCO.

TMU: AAI shall submit the claim along with the claim performa signed by the ATCO, copy of unfitness certificate to the insurance co. at the earliest. The Insurance co. shall pay lump sum amount equal to the 12 times of the submitted monthly rating allowance to AAI. In case an ATCO, who was declared TMU, subsequently becomes fit to perform active ATC duties, the compensation will be immediately stopped. AAI will be responsible for intimating the relevant insurance co and settle the payment of claim by refunding the remaining amount associated with the Fit period after deducting the TMU period amount from twelve months amount.

PMU: AAI shall submit the claim along with the claim Performa signed by the ATCO, and a copy of unfitness certificate to the insurance co. at the earliest. The Insurance co. shall pay lump sum amount equal to the 120 times or no. of months left for retirement from AAI times (whichever is less) of the submitted monthly rating allowance to AAI.

Various combinations of TMU/PMU/TMU & PMU cases, its eligibility, and responsibility of the payment by particular insurance co. are given in the condition 1 and Definitions.

In both the TMU/PMU/TMU & PMU cases lump sum insured amount shall be paid to AAI by the insurance co within one month of receipt of claim from AAI.

- 10.6 As per the Comprehensive medical insurance policy of ATCO the ATCOs are required to pay 50% of the premium (equally divided among all the participating controllers) for the Insurance Policy and the remaining 50% of the premium of the Insurance Policy will be borne by the AAI. The recovery in this regard will be uniform for all the ATCOs irrespective of their location / ratings. All the participating controllers (for whom compiled data has been given to Insurance Co.) will be paying equal premium and onetime payment will be deducted from ATCO salary every year from the salary of April. It is observed that the Policy from the Insurance Company

will be taken in the name of AAI as being followed on other Insurance Policies where the total premium is remitted to Insurance Company by AAI. In case of settlement of claim due to temporary or permanent medically unfit the Insurance Company will be making lump sum payment to AAI thereafter AAI will make the payment to the ATCOs on monthly basis. **(It is an internal process of premium collection and disbursement of insurance claim in AAI, may not be given as a part of NIT)**

- 10.7** The existing ATCOs other than the 1500 participating ATCOs and ATCOs joining AAI after 01.04.2011, may be considered for Comprehensive Medical Insurance Policy for ATCOs after 01.04.2012 subject to availability of required data. The same process may be adopted for future inclusion of ATCO in the subsequent policy. For inclusion of TMU ATCOs and If temporary medical unfitness of an ATCO continues in the next policy period, then such TMU ATCO of preceding year policy period i.e. Year 2011 onward shall be the eligible candidate for the policy of the subsequent year
- 10.8** The Insurance co. should also quote the bonus in term of %, on increase in the no. of ATCO, no claim and very less claim separately for future continuation of policies.

We are pleased to invite your offer in two parts in a sealed cover superscribed as :-

Envelope 'A' - Technical Bid for Insurance Policy for loss of rating allowance/licence for ATCOs in AAI due to Class-III Medical unfitness.

Envelope 'B' - Financial Bid for Insurance Policy for loss of rating allowance/licence for ATCOs in AAI due to Class-III Medical unfitness.

10. The bids as above, may be submitted as per the format enclosed herewith in two separate sealed covers superscribing Technical Bid & Financial Bid complete in all respects. The above two envelopes are required to be submitted in one sealed cover.

11. The bids should be submitted during working days in the office of Sh. SK Sharma, Jt.General Manager(HR), Airports Authority of India, RG Bhawan, Safdarjung Airport, New Delhi on or before **23rd March, 2011 by 3.00 p.m.** Quotation(s) received after the due date and time is liable to be rejected. The envelope 'A' containing Technical bid will be opened by a Committee on **23rd March, 2011 at 4.00 p.m.** in the presence of authorized representatives of the Insurance Companies. The names of the qualified Insurance Companies found eligible on the basis of Technical bid will be declared on **23rd March, 2011 at 4.00 p.m.** and the envelope 'B' containing Financial Bid of the qualified Insurance Companies will be opened on **25th March, 2011 at 4.00 p.m.** in the presence of the Authorised representatives from Insurance Companies.

12. The Insurance Companies are advised to go through the terms and conditions of the Policy thoroughly and ensure that all the relevant documents are attached with the Technical bid to avoid further correspondence.

13. AAI reserves all the right to accept/reject any or all the bids without assigning any reason whatsoever. For further clarifications, if any, the undersigned may be contacted on telephone no. 011-24623604.

Yours faithfully

(SK SHARMA)

Jt.General Manager(HR)

Encl: as above

'TECHNICAL BID'
 QUOTATION FOR INSURANCE POLICY FOR LOSS OF RATING ALLOWANCE/LICENCE FOR ATCOS IN AAI
 DUE TO CLASS-III MEDICAL UNFITNESS.

Details of the Insurance Company :

1.	Name of the Insurance Company	:	
2.	Address of the company: a) Head Office : b) Delhi Office :	:	
3.	Fax/E-mail & Phone Nos	:	
4.	Regn.No.	:	
5.	Date of Regn. With IRDA (enclose photocopy)	:	
6.	Name, Designation and contact Phone nos. of the official of the Tenderer to whom all the reference shall be made	:	
7.	Fund under Management	:	
8.	The Insurance co. is maintaining whether similar type of policy of any company, if so, details thereof. Also attach, performance certificate from the Policy Holder.	:	
9.	Net Worth	:	
10.	Solvency Ratio	:	
11.	Mode of premium payment(half yearly)	:	
12.	Latest Balance Sheet for the last 3 years (enclose photocopies)	:	
13.	Any other information	:	

(Signature of the authorized person with stamp)

**QUOTATION FOR INSURANCE POLICY FOR LOSS OF RATING ALLOWANCE/LICENCE FOR ATCOS
IN AAI DUE TO CLASS-III MEDICAL UNFITNESS.**

FINANCIAL BID

Details of the Insurance Company :

1.	Name of the Insurance Company	:	
2.	Number of Employees Covered	:	
3.	Total sum assured Rs.24.67 crores approx. as on 1.12.2010	:	
4.	Experience Rating Adjustment (rate and method) if no ERA during 1 st year what will be the additional benefit.(please quote the formula if rate is quoted with ERA)	:	
5.	Mode of additional payment or refund of premium due to increase in sum assured or decrease in sum assured	:	
6.	Refund of benefits due to separation during the year	:	
7.	Formula for ERA benefit, if applicable	:	
8.	Annual Premium (Lump Sum inclusive of all the taxes) A). Words :- B). Figures:-	:	

Date :

(Signature of the authorized person with stamp)

CERTIFICATE OF DECLARATION FOR CONFIRMATION OF IRDA/TAC GUIDELINES

I, _____ hereby certify on behalf of _____ that our offer no. _____ dated _____ against tender specification No. _____ does not breach of Insurance Act/IRDA/TAC and applicable guidelines. I further confirm that in the event of disclosure at a later stage that the same is in breach and AAI is put to any disadvantage or face cancellation of the Policy or any claim becomes substandard/untenable, the whole liabilities arising out of this shall lie wholly on us and will bear all consequences thereof.

I, further certify that there is no tariff violation. In case some violation is pointed out at a later date, the same shall be taken care of.

Authorised representative's signature with name and address.

DECLARATION SHEET

I, _____ hereby certify that all the information and data furnished by me with regard to this Tender Specification No. _____ are true and complete to the best of my knowledge. I have gone through the specifications, conditions and stipulations in detail and agree to comply with the requirements and intent of specification.

I, further certify that I am the duly authorized representative of the under mentioned tenderer and valid power of attorney to this effect is also enclosed.

Authorised representative's signature with name and address.

APPENDIX-I

POINTS TO BE CONSIDERED WHILE SUBMITTING THE BID

1. The insurance company has to provide insurance cover to the employees without any medical examination. All the eligible ATCOs of AAI on the date of Policy shall be covered under the Policy irrespective of the condition that they are actively on duty or otherwise.
2. Bidder company should be holder of licence from IRDA for undertaking general insurance business.
3. Bidder should be in general insurance business for atleast one year.
4. Net worth of the bidder on the closing day of the last financial years should be positive.
5. Solvency margin should be more than 2:0.
6. The bidder shall be required to submit all the technical documents including the balance sheet for the last one year in support of their claim of having the prescribed eligibility criteria in Envelop 'A' containing the technical documents.
7. The Technical Bid will be opened in the presence of the representatives of the Insurance Companies on the fixed date & time. The financial bid will be opened only of those Insurance Companies who will be found technically qualified.
8. The bid shall remain valid for a period of 90 days from the date of opening of Financial Bid.
9. The lowest bidder in the financial bid shall be considered/awarded the job for issuance of the insurance policy.
10. Under no circumstances the change in price shall be allowed. However, clarifications in the case of any doubt are allowed.
11. Unsolicited fresh/revised Bid shall not be entertained.
12. AAI reserves the right to accept/reject, partly or in full, any or all the quotations without assigning any reason.

13. Sum insured is only indicative and is liable to change at the time of taking the policy. AAI also reserves the right to enhance the sum insured by paying additional premium on pro-rata basis for the balance period of the policy.
14. The rates to be quoted are net of all discounts and are inclusive of taxes and duties and effect of all statutory orders, if any applicable as on the date of submitting of offer in the Price Schedule.
15. It will be for the bidders to comply with all the rules and regulations pertaining to insurance as per IRDA guidelines. The bidder will alone be responsible for any breach thereof and for all its implications including financial ones.
16. Certificate of Declaration for confirmation of IRDA/TAC Guidelines is annexed at Annexure-III.
17. The tenderer has so furnish a Declaration as per the proforma at Annexure-IV.

ISSUES RELATED TO STIPULATIONS OF THE POLICY

1. The policy shall cover all the eligible ATCOs during insured period.
2. The statement of rating allowance shall be provided by AAI as on 1st day of January every year. The rating allowance in this data will form the basis for claim of rating allowance in both the TMU & PMU cases lumpsum insured amount shall be paid to AAI by Insurance Co.
3. The underwriter will be required to settle the claims within 30 days of submission of all requisite papers. The set of claim documents/formats will be provided by the underwriter while issuing the cover. An intimation of medical unfitness by the AAI will be considered adequate for the purpose of settlement of the claim.
4. Policy can be terminated by AAI by giving one month's notice. However, the claims occurred upto the date of the termination will be settled by the underwriter and the termination will not jeopardize the settlement of claims upto the period the policy in force in any manner.

ANNEXURE-V

REFERENE CHQ LETTER A60011/31/2008-PP DATED 17.10.2008 ON

RATING ALLOWANCE FOR ATCOS

SN	NAME OF THE EXISTING RATING	RATING AMOUNT PER MONTH TO AN ATCO	
1.	AERODROME CONTROL RATING	RS.	4500/-
2.	SURFACE MOVEMENT CONTROL RATING	RS.	2000/-
3.	ASMGCS RATING	RS.	1000/-
4.	APPROACH RATING	RS.	3000/-
5.	ASR/MSSR RATING	RS.	4500/-
6.	ACC RATING	RS.	3000/-
7.	ARSR/MSSR RATING	RS.	3000/-
8.	ADS CPDLC RATING	RS.	1500/-
9.	FIC RATING	RS.	NIL
10.	OCC RATING	RS.	2000/-
11.	FLIGHT DATA PROCESSING RATING	RS.	1500/-

RATING ALLOWANCES ARE SUBJECTED TO REVIEW FROM TIME TO TIME.

7. MEDICAL STANDARDS OF ATCs

7.1 An Air Traffic Controller shall hold a valid medical assessment.

7.2 An ATC shall hold a valid medical assessment in accordance with the International Standards and Recommendations Practices contained in ICAO Annex-I , Chapter 6 and the medical requirements laid down by DGCA.

7.3 An ATC for a Medical Assessment shall undergo a medical examination based on the following requirements:

7.3.1 Physical and Mental

7.3.2 Visual and colour perception; and

7.3.3 Hearing

7.3.4 An applicant for a Medical Assessment shall be free from :

7.3.5 Any abnormality, congenital or acquired, or

7.3.6 Any active, latent, acute or chronic disability, or

7.3.7 Any wound, injury or sequel form operation.

7.4 All Controllers for a Class III Medical Assessment shall undergo routine haematological investigation such as Hb, TLC, DLC and routine urine analysis, at the time of initial and renewal medical examinations. Also at initial medical examination radiography of the chest shall be done. Subsequent radiography of the chest will only be undertaken at the discretion of Medical Authority.

7.5 The Medical Assessment for issue (initial assessment) and renewal (subsequent assessment) shall be carried out in accordance with the general provisions of Annex I, Chapter 6, para(s) 6.2 and the specific provisions for Class III Medical Assessments of Annex I, Chapter 6, para(s) 6.5.

8. FACTORS AFFECTING MEDICAL STANDARDS

8.1 ATCs suffering from any brief illness/infection which in the opinion of a Registered Medical Practitioner will affect a Class III Medical Examination for the purpose of issue/renewal certification shall be allowed to defer a test by a period suggested by the RMP and in any case not greater than 30 days.

8.2 An expert in Aviation Medicine shall be empanelled as a consultant and s/he shall carry out a comprehensive study of the effects of stress related factors and submit periodical reports to the authorities.

9. APPELLATE AUTHORITY

9.1 The service provider shall appoint an Appellate Authority for the purpose of appeal/review of medical assessment which is not favourable to an ATCO who shall dispose of the same speedily.

9.2 In the event of a ATCO being declared temporarily medically unfit for more than three months at a stretch or in aggregate or permanently unfit for performing duties as Controller may appeal to the Member (Ops) for a review of the medical assessment within a period of 90 days from the date of having been declared unfit.

9.3 The appeal shall be addressed to The Member (Operations), Airports Authority of India, Rajiv Gandhi Bhawan, Safdarjung Airport, New Delhi - 110003. The appeal shall be sent through the RED/Principal (CATC). The appeal must be accompanied by the following documents:

9.3.1 All documents in original obtained by the applicant from reputed medical institutions/specialists clearly certifying that the applicant is fit for performing assigned ATCO duties with specific reference to the cause of unfitness stated in the medical assessment issued by the office of Member (Operations). The medical practitioner/specialist certifying the fitness in such a case should give sound reasons justifying his opinion.

9.3.2 Reports of the medical examination and results of investigations, in original, conducted by the medical practitioner/specialist giving the aforesaid certificate.

9.4 The appeal shall be considered by Member (Operations). If adequate medical evidence is provided for medical review, Member (Ops) may recommend a review medical examination at any place and may also ask for any such investigation/report or opinion of any specialist to determine the fitness of the Controller. In case the appeal for medical review is not found justified, Member (Operations) will give the reasons and the ATCO shall be informed accordingly.

9.5 If the medical review is accepted, it shall be carried out at the centre specified for the purpose. The fresh medical examination reports will be considered to assess the medical fitness of the Controller. The result thereof shall be intimated by the Medical Board to The Member (Operations), Airports Authority of India, Rajiv Gandhi Bhawan, Safdarjung Airport, New Delhi - 110003.

10. CONCLUSION

10.1 All correspondence/instructions issued on the subject made till date, shall stand superseded by this instruction, as this Policy comes into effect from the date of issue.

**[D.C. MEHTA]
GP. CAPT.
ED(P&A)**

Encl. : As above

APPENDIX – A

1 Requirements for Medical Assessments

1.1 General

An applicant for a Medical Assessment issued in accordance with the terms of ICAO Annex I, 1.2.4.1 shall undergo a medical examination based on the following requirements:

- a) physical and mental;
- b) visual and colour perception; and
- c) hearing.

1.2 Physical and mental requirements

An applicant for any class of Medical Assessment shall be required to be free from:

- a) any abnormality, congenital or acquired; or
- b) any active, latent, acute or chronic disability; or
- c) any wound, injury or sequelae from operation; or
- d) any effect or side-effect of any prescribed or nonprescribed therapeutic medication taken;

such as would entail a degree of functional incapacity which is likely to interfere with the safe operation of an aircraft or with the safe performance of duties.

1.3 Visual acuity test requirements

The methods in use for the measurement of visual acuity are likely to lead to differing evaluations. To achieve uniformity, therefore, Contracting States shall ensure that equivalence in the methods of evaluation be obtained.

1.3.1 The following should be adopted for tests of visual acuity:

- a) Visual acuity tests should be conducted in an environment with a level of illumination that corresponds to ordinary office illumination (30-60 cd/m²).
- b) Visual acuity should be measured by means of a series of Landolt rings or similar optotypes, placed at a distance from the applicant appropriate to the method of testing adopted.

1.4 Colour perception requirements

Medical Authorities shall use such methods of examination as will guarantee reliable testing of colour perception.

1.4.1 The applicant shall be required to demonstrate the ability to perceive readily those colours the perception of which is necessary for the safe performance of duties.

1.4.2 The applicant shall be tested for the ability to correctly identify a series of pseudoisochromatic plates in daylight or in artificial light of the same colour temperature such as that provided by CIE standard illuminants C or D65 as specified by the International Commission on Illumination (CIE).

1.4.3 An applicant obtaining a satisfactory result as prescribed by the Licensing Authority shall be assessed as fit.

An applicant failing to obtain a satisfactory result in such a test shall be assessed as unfit unless able to readily distinguish the colours used in air navigation and correctly identify aviation coloured lights. Applicants who fail to meet these criteria shall be assessed as unfit except for Class 2 assessment with the following restriction: valid daytime only.

Guidance on suitable methods of assessing colour vision is contained in the Manual of Civil Aviation Medicine (Doc 8984).

1.4.3.1 *Sunglasses worn during the exercise of the privileges of the licence or rating held should be non-polarizing and of a neutral grey tint.*

1.5 Hearing requirements

Hearing requirements are established in addition to the ear examinations conducted during the medical examination for the physical and mental requirements.

1.5.1 The applicant shall be required to be free from any hearing defect which would interfere with the safe performance of duties in exercising the privileges of the licence.

- *In the choice of speech material, aviation-type material is not to be used exclusively for the above tests.*
- *A quiet room for the purposes of testing the hearing requirements is a room in which the intensity of the background noise is less than 50 dB when measured on "slow" response of an "A"-weighted sound level meter.*
- *For the purposes of hearing requirements, the sound level of an average conversational voice at point of output ranges from 85 to 95 dB.*

2 Class 3 Medical Assessment

2.1 Assessment issue and renewal

2.1.1 An applicant shall undergo an initial medical examination for the issue of a Class 3 Medical Assessment.

2.1.2 Except where otherwise stated in this section, holders of air traffic controller licences shall have their Class 3 Medical Assessments renewed at intervals not exceeding 24 months.

2.1.3 When the Licensing Authority is satisfied that the requirements of this section and the general provisions of the medical policy for ATCs have been met, a Class 3 Medical Assessment shall be issued to the applicant.

2.2 Physical and mental requirements

The medical examination shall be based on the following requirements.

- 2.2.1 The applicant shall not suffer from any disease or disability which could render that applicant likely to become suddenly unable to perform duties safely.
- 2.2.2 The applicant shall have no established medical history or clinical diagnosis of:
- a) a psychosis;
 - b) alcoholism;
 - c) drug dependence;
 - d) any personality disorder, particularly if severe enough to have repeatedly resulted in overt acts;
 - e) a mental abnormality, or neurosis of a significant degree;

such as might render the applicant unable to safely exercise the privileges of the licence applied for or held, unless accredited medical conclusion indicates that in special circumstances, the applicant's failure to meet the requirement is such that exercise of the privileges of the licence applied for is not likely to jeopardize flight safety.

A history of acute toxic psychosis need not be regarded as disqualifying, provided that the applicant has suffered no permanent impairment.

- 2.2.3 The applicant shall have no established medical history or clinical diagnosis of any of the following:
- a) a progressive or non-progressive disease of the nervous system, the effects of which, according to accredited medical conclusion, are likely to interfere with the safe exercise of the applicant's licence and rating privileges;
 - b) epilepsy;
 - c) any disturbance of consciousness without satisfactory medical explanation of cause.
- 2.2.4 Cases of head injury, the effects of which, according to accredited medical conclusion, are likely to interfere with the safe exercise of the applicant's licence privileges shall be assessed as unfit.
- 2.2.5 The applicant shall not possess any abnormality of the heart, congenital or acquired, which is likely to interfere with the safe exercise of the applicant's licence privileges. An applicant indicated by accredited medical conclusion to have made a satisfactory recovery from myocardial infarction may be assessed as fit.

Such commonly occurring conditions as respiratory arrhythmia, occasional extrasystoles which disappear on exercise, increase of pulse rate from excitement or exercise, or a slow pulse not associated with auriculoventricular dissociation may be regarded as being within "normal" limits.

2.2.5.1 *Electrocardiography should form part of the heart examination for the first issue of a licence, at the first re-examination after the age of 40 and thereafter no less frequently than every five years, and in re-examinations in all doubtful cases.*

- *The purpose of routine electrocardiography is case finding. It does not provide sufficient evidence to justify disqualification without further thorough cardiovascular investigation.*
- *Guidance on resting and exercise electrocardiography is published in the Manual of Civil Aviation Medicine (Doc 8984).*

2.2.6 The systolic and diastolic blood pressures shall be within normal limits.

- *The use of drugs for control of high blood pressure is disqualifying except for those drugs, the use of which, according to accredited medical conclusion, is compatible with the safe exercise of the applicant's licence privileges.*
- *Extensive guidance on the subject is published in the Manual of Civil Aviation Medicine (Doc 8984).*

2.2.7 There shall be no significant functional nor structural abnormality of the circulatory tree. The presence of varicosities does not necessarily entail unfitness.

2.2.8 There shall be no acute disability of the lungs nor any active disease of the structures of the lungs, mediastinum or pleura. Radiography shall form a part of the medical examination in all doubtful clinical cases.

2.2.8.1 *Radiography should form a part of the initial chest examination and should be repeated periodically thereafter.*

2.2.9 Cases of pulmonary emphysema should be assessed as unfit only if the condition is causing symptoms.

2.2.10 Cases of active pulmonary tuberculosis, duly diagnosed, shall be assessed as unfit. Cases of quiescent or healed lesions which are known to be tuberculous, or are presumably tuberculous in origin, may be assessed as fit.

- *Guidance material on assessment of respiratory diseases is published in the Manual of Civil Aviation Medicine (Doc 8984).*
- *Guidance material on hazards of medications is published in the Manual of Civil Aviation Medicine (Doc 8984).*

2.2.11 Cases of disabling disease with important impairment of function of the gastrointestinal tract or its adnexae shall be assessed as unfit.

2.2.12 The applicant shall be required to be completely free from those hernias that might give rise to incapacitating symptoms.

- 2.2.13 Any sequelae of disease or surgical intervention on any part of the digestive tract or its adnexae, liable to cause incapacity, in particular any obstructions due to stricture or compression shall be assessed as unfit.
- 2.2.14 Cases of metabolic, nutritional or endocrine disorders likely to interfere with the safe exercise of the applicant's licence privileges shall be assessed as unfit.
- 2.2.15 Proven cases of diabetes mellitus shown to be satisfactorily controlled without the use of any anti-diabetic drug, may be assessed as fit. The use of anti-diabetic drugs for the control of diabetes mellitus is disqualifying except for those oral drugs administered under conditions permitting appropriate medical supervision and control and which, according to accredited medical conclusion, are compatible with the safe exercise of the applicant's licence privileges.
- 2.2.16 Cases of significant localized and generalized enlargement of the lymphatic glands and of diseases of the blood shall be assessed as unfit, except in cases where accredited medical conclusion indicates that the condition is not likely to affect the safe exercise of the applicant's licence privileges.
- 2.2.16.1 Cases in 4.2.16 due to a transient condition should be assessed as only temporarily unfit.*
- 2.2.17 Cases presenting any signs of organic disease of the kidney shall be assessed as unfit; those due to a transient condition may be assessed as temporarily unfit. The urine shall contain no abnormal element considered by the medical examiner to be of pathological significance. Cases of affections of the urinary passages and of the genital organs shall be assessed as unfit; those due to a transient condition may be assessed as temporarily unfit.
- 2.2.18 Any sequelae of disease or surgical procedures on the kidneys and the urinary tract liable to cause incapacity, in particular any obstructions due to stricture or compression, shall be assessed as unfit. Compensated nephrectomy without hypertension or uraemia may be assessed as fit.
- 2.2.19 An applicant for the first issue of a licence who has a personal history of syphilis shall be required to furnish evidence, satisfactory to the medical examiner, that the applicant has undergone adequate treatment.
- 2.2.20 Applicants who have a history of severe menstrual disturbances that have proved unamenable to treatment and that are likely to interfere with the safe exercise of the applicant's licence privileges shall be assessed as unfit.
- 2.2.21 Any active disease of the bones, joints, muscles or tendons and all serious functional sequelae of congenital or acquired disease shall be assessed as unfit. Functional aftereffects of lesion affecting the bones, joints, muscles or tendons and certain anatomical defects compatible with the safe exercise of the applicant's licence privileges may be assessed as fit.

2.2.22 There shall be:

- a) no active pathological process, acute or chronic, of the internal ear or of the middle ear;
- b) no permanent disturbances of the vestibular apparatus. Transient conditions may be assessed as temporarily unfit.

The details of the hearing requirements are set out in 4.4.

2.2.23 There shall be no serious malformation nor serious, acute or chronic affection of the buccal cavity or upper respiratory tract. Cases of speech defects and stuttering shall be assessed as unfit.

2.3 Visual requirements

The medical examination shall be based on the following requirements.

2.3.1 The function of the eyes and their adnexa shall be normal. There shall be no active pathological condition, acute or chronic, nor any sequelae of surgery or trauma of the eyes or their adnexa likely to reduce proper visual function to an extent that would interfere with the safe exercise of the applicant's licence and rating privileges.

2.3.2 Distant visual acuity with or without correction shall be 6/9 or better in each eye separately, and binocular visual acuity shall be 6/6 or better. No limits apply to uncorrected visual acuity. Where this standard of visual acuity can be obtained only with correcting lenses, the applicant may be assessed as fit provided that:

- a) such correcting lenses are worn during the exercise of the privileges of the licence or rating applied for or held; and
- b) in addition, a pair of suitable correcting spectacles is kept readily available during the exercise of the privileges of the applicant's licence.

An applicant accepted as meeting these provisions is deemed to continue to do so unless there is reason to suspect otherwise, in which case an ophthalmic report is required at the discretion of the Licensing Authority. Both uncorrected and corrected visual acuity are normally measured and recorded at each re-examination. Conditions which indicate a need to obtain an ophthalmic report include: a substantial decrease in the uncorrected visual acuity, any decrease in best corrected visual acuity, and the occurrence of eye disease, eye injury or eye surgery.

2.3.2.1 Applicants may use contact lenses to meet this requirement provided that:

- a) the lenses are monofocal and non-tinted;
- b) the lenses are well tolerated; and
- c) a pair of suitable correcting spectacles is kept readily available during the exercise of the licence privileges.

Applicants who use contact lenses may not need to have their uncorrected visual acuity measured at each re-examination provided the history of their contact lens prescription is known.

2.3.2.2 Applicants with a large refractive error shall use contact lenses or high-index spectacle lenses.

If spectacles are used, high-index lenses are needed to minimize peripheral field distortion.

2.3.2.3 Applicants whose uncorrected distant visual acuity in either eye is worse than 6/60 shall be required to provide a full ophthalmic report prior to initial Medical Assessment and every five years thereafter.

- *The purpose of the required ophthalmic examination is (1) to ascertain normal vision performance, and (2) to identify any significant pathology.*

2.3.3 Applicants who have undergone surgery affecting the refractive status of the eye shall be assessed as unfit unless they are free from those sequelae which are likely to interfere with the safe exercise of their licence and rating privileges.

2.3.4 The applicant shall have the ability to read, while wearing the correcting lenses, if any, required by 4.3.2, the N5 chart or its equivalent at a distance selected by that applicant in the range of 30 to 50 cm and the ability to read the N14 chart or its equivalent at a distance of 100 cm. If this requirement is met only by the use of near correction, the applicant may be assessed as fit provided that this near correction is added to the spectacle correction already prescribed in accordance with 4.3.2; if no such correction is prescribed, a pair of spectacles for near use shall be kept readily available during the exercise of the privileges of the licence. When near correction is required, the applicant shall demonstrate that one pair of spectacles is sufficient to meet both distant and near visual requirements.

- *N5 and N14 refer to the size of typeface used. For further details, see the Manual of Civil Aviation Medicine (Doc 8984).*
- *An applicant who needs near correction to meet the requirement will require "look-over", bifocal or perhaps multi-focal lenses in order to read radar screens, visual displays and written or printed material and also to make use of distant vision, through the windows, without removing the lenses. Single-vision near correction (full lenses of one power only, appropriate for reading) may be acceptable for certain air traffic control duties. However, it should be realized that single-vision near correction significantly reduces distant visual acuity.*
- *Whenever there is a requirement to obtain or renew correcting lenses, an applicant is expected to advise the refractionist of reading distances for the air traffic control duties the applicant is likely to perform.*

2.3.4.1 When near correction is required in accordance with this paragraph, a second pair of near-correction spectacles shall be kept available for immediate use.

2.3.5 The applicant shall be required to have normal fields of vision.

2.3.6 The applicant shall be required to have normal binocular function.

Defective stereopsis, abnormal convergence not interfering with near vision, and ocular misalignment where the fusional reserves are sufficient to prevent asthenopia and diplopia may not be disqualifying.

2.4 Hearing requirements

The medical examination shall be based on the following requirements.

2.4.1 The applicant, tested on a pure-tone audiometer at first issue of licence, not less than once every five years up to the age of 40 years, and thereafter not less than once every three years, shall not have a hearing loss, in either ear separately, of more than 35 dB at any of the frequencies 500, 1 000 or 2 000 Hz, or more than 50 dB at 3 000 Hz. However, an applicant with a hearing loss greater than the above may be declared fit provided that:

- a) the applicant has a hearing performance in each ear separately equivalent to that of a normal person, against a background noise that will simulate that experienced in a typical air traffic control working environment; and
- b) the applicant has the ability to hear an average conversational voice in a quiet room, using both ears, at a distance of 2 m from the examiner, with the back turned to the examiner.

2.4.1.1 Alternatively, other methods providing equivalent results to those specified in 4.4.1 shall be used.

APPENDIX –B

CONFIDENTIAL

**AIRPORTS AUTHORITY OF INDIA
INITIAL MEDICAL EXAMINATION FOR AIR TRAFFIC CONTROLLER LICENCE**

NOTES

THE COMPLETED FORM MUST NOT BE HANDED TO THE EXAMINEE.

1. All medical examinations contained in pages 2 and 3 may be carried out by a Designated Medical Examiner
2. All medical examinations in pages 4 and 5 are to be completed by a Designated Medical Examiner (Specialist) of the respective specialties, viz; ENT and Eye.
3. ECG is required for the first issue of a licence.
4. A Chest X-ray is required for the first issue of a licence.
5. A pure tone audiogram is required for the first issue of a licence.
6. This form is to be completed in duplicate and should be forwarded together with the Assessment fee to:

THE CHAIRMAN
AIRPORTS AUTHORITY OF INDIA
RAJIV GANDHI BHAWAN
NEW DELHI 110023 TEL: 24632950

PART A PERSONAL PARTICULARS To be completed by the Examinee																								
PLACE OF MEDICAL EXAMINATION (CLINIC)																				DATE				
NRIC/PASSPORT NO.										NAME (UNDERLINE SURNAME)														
COUNTRY OF BIRTH										PRESENT OCCUPATION										TYPE OF LICENCE				
DATE OF BIRTH					AGE AT LAST BIRTHDAY					MARTIAL STATUS					PRESENT EMPLOYER									
					YRS.					Single Married														
POSTAL ADDRESS															TELEPHONE NO.									
Have you ever been:																								
Discharged from the Services on medical grounds:					Rejected for admission to the Services on medical grounds:					Rejected for Life Insurance:					Refused a Flying licence:					Treated for Drug Addiction/Alcoholism?				
*YES/NO					*YES/NO					*YES/NO					*YES/NO					*YES/NO				
*Delete as necessary															If 'YES' to any please attach details									

PART B

To be completed by the Designated Medical Examiner:

Questions to be put by the Designated Medical Examiner to the Examinee whose answers are to be entered in the spaces provided.

Have you any history of:-

	Yes	No		Yes	No
Nervous or Mental Trouble	1		Malaria	20	
Insomnia, or Sleep-walking	2		Dysentery	21	
Severe Headaches, or Migraine	3		Any other Tropical Diseases	22	
Fits or Convulsions of any kind	4		Eye Trouble of any kind	23	
Head Injury or Concussion	5		Wearing of Glasses or contact lenses	24	
Lung Trouble or Tuberculosis	6		Colour Blindness	25	
Bronchitis, Pneumonia or Pleurisy	7		Difficulty in seeing in the Dark	26	
Asthma or Hay Fever	8		Ear Trouble, or Discharge from the Ears	27	
Heart Disease, Weak or Strained Heart	9		Deafness, Noises in the Ears or Dizziness	28	
Palpitations or Breathlessness	10		Frequent Colds, Catarrh or Nasal Obstruction	29	
Fainting attacks or Giddiness	11		Prolonged Hoarseness or Loss of Voice	30	
Rheumatism, Rheumatic Fever	12		Sea, Car or Train Sickness	31	
Frequent Sore Throats or Tonsillitis	13		Neuromuscular Disease	32	
Diphtheria, Scarlet Fever (Scarlatina)	14		Any illness or injury not mentioned above	33	
Stomach or Bowel Trouble	15		Have you undergone any surgical operations or X-ray examinations	34	
Chronic Indigestion or Pain after Food	16		Have either of your parents or your brothers or sisters suffered from Tuberculosis, Diabetes, Hemophilia, Nervous Ailments, Mental Trouble or "Fits"	35	
Diabetes	17				
Kidney or Bladder Trouble	18				
Syphilis or Gonorrhoea	19		Are you a blood donor	36	

Additional Remarks by Designated Medical Examiner:

I hereby declare that I have carefully considered the statements made above and that to the best of my belief they are complete and correct. I further declare that I have not withheld any relevant information or made any misleading statement and I give my consent to the examining or assessing Designated Medical Examiner to communicate with any physician who has attended on me.

Date: _____

Signature of Examinee: _____

Name:
(BLOCK LETTERS) _____
Designated Medical Examiner (DME)

Signature of DME: _____

DME's Stamp

Telephone Number: _____

PART C – REPORT OF MEDICAL EXAMINATION

1 Height (without footwear) <p align="right">cm</p>	2 Weight <p align="right">kg</p>	3 Chest Insp in cm Exp in cm	4 Waist <p align="right">cm</p>
5 Identifying Marks, Scars, Tattoos, Deformities: Colour of hair: Colour of eyes: Physical Impression:		6 Injuries or wounds	
Please complete each item and place a tick in the appropriate column	Normal	Abnormal	NOTES: Enter item number before each comment. Any abnormal finding should be given in detail. Attach additional sheet(s) if necessary.
7 Skin			
8 Head & Neck			
9 Respiratory System			
10 Heart: Size, Rhythm, Sounds			
11 Pulse Rate (sitting, standing)			
12 Blood Pressure – Systolic/Diastolic Sitting Lying			
13 Vascular: Varicose Veins, Arterial Wall			
14 Abdomen: Hernia			
15 Liver, Spleen, Glands including Breasts			
16 Alimentary System (Haemorrhoids, Fistula)			
17 Genito – Urinary System			
18 Endocrine System			
19 Upper, Lower Limbs and Joints			
20 Spine – Spinal Movements			
21 Neurological – Cranial Nerves (Reflexes, equilibrium, etc.)			
22 Psychiatric			
23 Last Menstrual Date (if applicable)	Pelvic examination (if applicable)		
24 Investigations			
CXR			
ECG			
EEG (if applicable)			
Urinalysis		Hb and full Blood Count	
Labstix:	Blood _____	Albumen _____	Lipid Profile
	Glucose _____	Ketone _____	
	Bilirubin _____		
Microscopy:	RBC _____	WBC _____	Fasting Blood Sugar
	Casts _____	Crystals _____	
	Epith Cells _____	Others _____	
25 Additional Remarks by the Designated Medical Examiner:			
Date:		Signature:	DME's STAMP

EAR, NOSE & THROAT EXAMINATION

Please complete each item and place a tick in the appropriate column	Normal	Abnormal	NOTES: Enter item number before each comment. Any abnormal finding should be given in detail. Attach additional sheet(s) if necessary.																		
1 Speech																					
2 Mouth																					
3 Teeth Gums																					
4 Pharynx																					
5 Sinuses																					
6 Ears Drums Valsalva																					
7 Vestibular Apparatus																					
8 Cochlear																					
9 Mastoid																					
10 Auditory Acuity Any hearing difficulty with conversational voice at 2 metres with back to examiner?			Yes/No																		
At what distance from examiner can Forced Whisper be heard in each ear separately?			Right _____ Left _____																		
Weber's Test _____ Rinne's Test _____																					
11 Audiometry <table border="1" data-bbox="304 1099 684 1413"> <thead> <tr> <th>RE</th> <th>FREQUENCIES</th> <th>LE</th> </tr> </thead> <tbody> <tr> <td></td> <td>4000</td> <td></td> </tr> <tr> <td></td> <td>3000</td> <td></td> </tr> <tr> <td></td> <td>2000</td> <td></td> </tr> <tr> <td></td> <td>1000</td> <td></td> </tr> <tr> <td></td> <td>500</td> <td></td> </tr> </tbody> </table>				RE	FREQUENCIES	LE		4000			3000			2000			1000			500	
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12 Additional Remarks by the Designated Medical Examiner (Specialist) Date: _____ Signature: _____ DME (Specialist)'s STAMP _____																					
<p style="text-align: center;">OBSERVATIONS AND FINDINGS (TO BE LEFT BLANK FOR ASSESSMENT ONLY)</p> <table border="1" data-bbox="304 1686 873 1951"> <tr> <td colspan="2">Recommended dates for next special exam.</td> </tr> <tr> <td>E.C.G. :</td> <td>E.N.T./AUDIO</td> </tr> <tr> <td>C.X.R. :</td> <td>OPHTH :</td> </tr> <tr> <td colspan="2">Other examinations :</td> </tr> <tr> <td colspan="2">CAMB :</td> </tr> </table>				Recommended dates for next special exam.		E.C.G. :	E.N.T./AUDIO	C.X.R. :	OPHTH :	Other examinations :		CAMB :									
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Date	Chairman, Medical Board	Member, Medical Board																			



भारतीय विमानपत्तन प्राधिकरण
AIRPORTS AUTHORITY OF INDIA

No.AAI/HR/SSS/CMIP-2010/126

Dated : 24.03.2011

Sub: Notice inviting quotations for Insurance Policy for loss of rating allowance/licence for ATCOs in AAI due to Class-III Medical unfitness.

Sir,

Please refer to our letter of even number dated 14.03.2011 on the subject cited above.

2. The date for submission of quotations has been extended upto 13.04.2011 at 11.00am. The revised schedule for opening the above tender is as follows:

- (i) Opening of Technical Bid is 13.04.2011 at 11:00 a.m.
- (ii) Opening of Financial Bid is 15.04.2011 at 3:00 p.m.

3. In view of the above, it is once again requested to submit your quotation as per the extended schedule as mentioned above.

4. The quotations received after due date and time will not be entertained and are liable to be rejected. The other terms and conditions of NIT will remain same. You can contact the undersigned for further clarifications, if any.

Yours faithfully,

(S.K. SHARMA)

Jt.General Manager(HR)

011-24623604(0)