

भारतीय जीवन बीमा निगम, मंडल कार्यालय, पंडरी, रायपुर (छग) 492004 Annexure-A: Application Form

For "Empanelment of suppliers/Vendors/Manufacturers / Service Providers/Firms required by L.I.C of India, Divisional Office-Raipur, Pandri, Raipur Chhattisgarh-492004

(To be provided on Vendor's Letterhead, compulsorily along with the requisite annexure)

Serial No.	
Nature of Job Empanelment	

Sl.No.	Description	Details
1	Name of Supplier/Manufacturer/Vendor/Firm	
2	Type of Vendor: Supplier/ Authorized dealer or Service provider	
3	Year of establishment	
4	Status of the firm: (Whether Pvt. Ltd. company/Public Ltd. Company/partnership firm/Proprietorship Firm)	
5	Whether registered at micro small / medium enterprises (MSME) within relevant authority, if yes please enclose the certificate.	
6	Company's/ Firm's Registered/Head office Address, Land line telephone no. & email- id	
7	Company's /Firm's Local office (at Raipur) Address, Land line telephone no. & Email- id. (if any)	
8	Company's /Firm's Local office (in the state of Chhattisgarh) Address, Land line telephone no. & Email- id. (if any)	
9	Name of the Chairman/Managing Director/CEO/Country Head (as the case may be), his address & telephone no.	
10	In case of a partnership, name of Partners / Directors	
11	Name & full contact details of the representative(s) who would be calling on us & attending to our jobs.	
12	Whether registered with the Registrar of companies/Register Firms in India. If so, mention Number and date and attach Registration Certificate copy.	
13	Profession related license No. & date of last renewal of the license. Copy of license to be enclosed. (If Applicable)	
14	Certificate Number of certificate under Shops & Establishment Act 1953? Is it duly renewed? Copy of certificate to be enclosed.	
15	Turn Over for last three years (Please attach a copy of audited Balance Sheet and P&L A/C) 2020-21 2021-22 2022-23	
16	PAN (Please Attach Copy)	
17	ESI Registration No. (if applicable, attach copy)	
18	EPF Registration no.(If applicable, attach copy)	

19	GST Registration Number (Please Attach Copy)	
20	Are you registered in GeM portal/CPPP/Tender Wizard etc, if yes, specify the Registered number.	
21	Have you ever been debarred by LIC of India or Govt./semi Govt./Quasi Govt. department/ PSU/ Banks as on the date of submission of bid.	
22	NEFT Details (Please Attach Cancelled Cheque having Firm name on the Cheque	
	BANK NAME & BRANCH ADDRESS TYPE OF ACCOUNT AND ACCOUNT NUMBER	
	IFSC	
23	Empanelment details with LIC of India with whom you are empanelled in the last 3 financial years in the specified trade/profession? If yes, enclose contract copies and give full details.	
24	Names of PSU/ Govt. organizations/Pvt Firm with whom you are empanelled in the last 3 financial years in the specified trade/profession? If yes, enclose contract copies and give full details.	
25	Web site address of the Firm/Company	
26	Mention any other specialty of your Firm/Company.	

Note: Write NA (Not Applicable) for information column that does not apply to your Firm/ Company. No column should be left blank. Make sure to type this form or to fill it legibly in ink. If space provided be insufficient, please type/ write your replies on a separate sheet giving appropriate reference to the question and attach it to the form.

Note:

- 1) Please type this form or fill it legibly in ink. If space provided is insufficient please type or write the replies on separate sheet giving appropriate question number attach it to the form.
- 2) The Corporation reserves the right to cancel the name of the firm/ supplier/service providers from its approved lists at this absolute discretion without assigning any reason.

All the pages of application form and documents must be signed with seal

Date at day of 202	2	4	ŀ
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