



**Annexure-A-1**

**APPLICATION FORM FOR PRINTERS**

**PART-I: GENERAL INFORMATION**

<b>Serial No.</b>	<b>Information sought</b>	<b>Information Provided</b>
1	Name of the Printers (In Block Letters)	
2	Date of Establishment / Incorporation	
3	Correspondence address and Telephone No.&e-mail ID	
4	Address of Head Office (If Separate ) and Telephone No.& e-mail	
5	Status: Proprietary/Partnership/ Private Limited Company / Public Limited Company	
6	Names of the Partners / Directors	
7	Name of Chief Executive with his present addresses and Telephone Nos.	
8	Name of Representative (s) with Designation who would be calling on us and attending to our jobs with mobile no.	
9	Name of Bankers with Address & Telephone No . A/C No. IFS Code No.	
10	i. Factory License Number . ii.Date of last renewal of license (Copy of license to be enclosed) iii.EPF Registration No. iv.ESIS Registration Code No. v.Income Tax PAN Card No. vii. GST Registration no.	
11	Whether holding certificate under	

	Shops & Establishment Act, duly Renewed (Copy should be enclosed)	
12	State the latest Income Tax Assessed year and the amount of Tax assessed (Copies of last 3 years, IT Returns Balance Sheets & Revenue A/C to be enclosed )	
13	Turn over for last three F/Year F Y 2017-2018 F y 2018-2019 F Y 2019-2020 (Attach audited Revenue A/c & Balance sheet / I.T. Return)	
14	Are you agreeable to abide strictly by the Terms and Conditions of the Tenders and Contracts	
15	If your firm is empanelled with any office of L I C Of India or any other PSU (Central) , please give name and address and encl the copy.	
16	Name, Addresses and Telephone Nos. of some of your most valued clients (Separate List may be attached)	
17	Name of the LIC whose printing works You may have done during the last 3 years .	
18	Approximate value of your output per year	
19	Are you agreeable to make deliveries to our offices when so directed ?	
20	How do you propose to compensate the loss arising out of theft , fire ,etc	
21	Area occupied by the PRESS	
22	Total no. of workmen deployed on various categories in this year	
23	Total no.of Employees (Permanent) Total no. of Temporary Employees Total no.of skilled & unskilled employees	
24	Timing of shift	

25	Weekly Holiday	
26	Do you carry stock of papers and any other material ? If so What stocks do you generally hold	
27	State the nature of printing jobs undertaken by you. ( Full details to be given )	
28	Do you undertake manufacture of I) Envelopes ii) Policy Docket iii) Office File iv) Stickers v) Policy wallet	
29	Mention any other specialties of your Establishment;	

Note; Please type this form or fill it legibly in ink. If space provided is insufficient , please type or write the replies on a separate sheet giving appropriate question number and attach it to the form .

**PART-II : TECHNICAL INFORMATION**

<b>Details of Printing Machine Available with the Firm</b>

I/We, \_\_\_\_\_  
request Life Insurance Corporation of India, Guwahati Divisional Office, JEEVAN PRAKASH,  
S S Road , Fancy Bazar , Guwahati-781001 to consider my/your application for Empanelment  
as approved Service Provider / Suppliers / Firms. (strike out whichever is not applicable ) We  
agree to give full satisfaction to the Corporation in the event of their doing so.

Dated at .....this.....day of .....2021.

**Seal & Signature of the Firm**

## **ANNEXURE B-1**

### **Eligibility conditions for Empanelment of PRINTERS**

- ❖ The Printer, Manufacturer, Dealer should be in profession for at least 3 Years (Copy of Registration Certificate must be enclosed)
- ❖ Annual Turnover should be above Rs 5 lacs in any of three Financial years ( Attach ITR/ Balance Sheet for last three years)
- ❖ The Printer, Manufacturer , Dealer should have Office at Guwahati and should be on the approved panel of at least 3 reputed Firms out of which at least one should be Public Sector or Govt, Undertaking (The Firms having empanelment with other Division of LIC I may also apply with such document of empanelment)
- ❖ The Printer, Manufacturer, dealer should have Registration with State & Local Authority for undertaking the profession (copies of Registration certificates including GST Reg. & Trade License with local authorities to be enclosed ).
- ❖ The Firms/Suppliers / Service Providers should have PAN Card No of Income Tax Department & GST Registration No . (Copies of proof to be enclosed)
- ❖ The application fee of Rs 100.00 ( One hundred only ) is to be paid either in our Cash Counter or by DD in favor of LIC I payable at Guwahati. The Receipt should be enclosed with application. The fee is non refundable.
- ❖ The competent authority reserves the right to modify any terms & conditions on a later date without informing the participating firms.

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Firms/Suppliers/Service Provider desirous to get empanelled with us for various jobs & services and fulfilling the eligibility conditions may apply for empanelment with Guwahati Divisional Office for jobs & service undertaken at Divisional Office. The Application Form as per Annexure A1 along with enclosures is to be sent at following address so as to reach us on or before 25/01/2021 up to 3 PM

**To**

**The Manager (OS),  
LIC OF INDIA, Guwahati Divisional Office,  
Jeevan Prakash ,S.S.Road , Guwahati-781001.**

The cover should be superscripted as "Application for Empanelment of Firm/Suppliers/Service Provider / Printers (whichever appropriate ) SI NO....." and to be dropped in Tender Box kept in OS Deptt .In cash of application Sent by post or through courier should reach office on or before prescribed date and time . Application received after the due date & time will not be entertained .

The Firms/Service Providers/ Suppliers/Printer who are in our existing panel should also apply for fresh Empanelment .The Firms/Service Providers/Suppliers/Printers who have been Black Listed/Removed earlier should not apply and if applied their applications will not be considered.

Selected Vendors will only be informed of the decision empanelment. No communication will be made with the firms/Service Providers/Suppliers/Printers whose application is rejected/not considered.

The Corporation reserves the right to cancel the name Firms/Suppliers/Service Providers/Printers from its approved empanelled list at its absolute discretion without assigning any reasons.

**Sr.Divisional Manager**