



4th Floor , Engineering Department, Eastern Zonal Office, 4, CR Avenue, Kolkata-700072

**ENROLMENT OF CONTRACTORS FOR ANNUAL
MAINTENANCE CONTRACT FOR AIR CONDITIONING
UNITS INSTALLED AT VARIOUS OFFICES & STAFF
QUARTERS IN WEST BENGAL**

ENROLMENT FORM

ENROLMENT FORM is to be physically submitted if the
Tenderers avail the option of Demand Draft/Pay Order/Banker's
Cheque. etc at the following address by 14.30 hrs on **08.05.2025**

**CHIEF ENGINEER
LIFE INSURANCE CORPORATION OF INDIA
EASTERN ZONAL OFFICE
ENGINEERING DEPARTMENT
HINDUSTHAN BUILDING
4, C. R. AVENUE, KOLKATA – 700 072**

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INSTRUCTIONS FOR FILLING AND SUBMISSION OF ENROLMENT FORM

The Enrolment Form along with the Annexure A1, A2 and B to G shall be completely filled in all respect along with cost of Enrolment Form of **Rs 500.00 + GST @ 18% (As Applicable) (non-refundable)** by way of demand draft /pay order in favour of Life Insurance Corporation of India payable at Kolkata addressed to the **Chief Engineer, Life Insurance Corporation of India, Engineering Department, Eastern Zonal Office, 4, CR Avenue, Kolkata-700072** along with these instructions for filling and submission of Enrolment Form on **or before 08.05.2025 upto 14.30 Hrs.** Please note that no consideration will be given for postal delays.

1. Contractors to note that all particulars required as per the form and Annexures shall be filled in completely in relevant strictly as per the format.
2. The forms not submitted strictly as per the above instructions within stipulated period are liable to be rejected.
3. The eligible agencies, which will be selected for issue of tenders after scrutiny of enrolment forms, shall be informed by a letter. Please note that no enquiries or correspondence regarding the selection for issue of tenders shall be entertained.
4. Latest Solvency Certificate from any Nationalised / Scheduled Bank as per advertisement should be submitted along with Enrolment Form(Not more than Three months old).
5. The Contractors are advised to follow the instructions given below :
 - (a) Enrolment Form shall be filled-up in clean handwriting in capital letters or typed.
 - (b) Full address of the site of work, owner or authority under whom the works have been carried out should be given (Please refer Annexure D & E).
 - (c) The agencies should ensure to submit the satisfactory Completion Certificate giving the value of work, year of completion and it should also tally with the value of final bill in Annexure D.
 - (d) The annual turnover should be based on audited balance sheet, copy of which should be enclosed.
6. Please note that the submission of this enrolment form does not confer any right on you to claim issue of tenders and the Chief Engineer reserves the right not to issue tender to any / all applicants without assigning any reason whatsoever.
Enclo. : Enrolment Form with

Annexure A1, A2 and B to G

Note : These instructions for filling and submission of Enrolment Form shall also be signed and submitted along with Enrolment Form with Annexure A1, A2 and B to G.

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FORM FOR ENROLMENT OF CONTRACTORS

I / We _____ am / are desirous of being enrolled on list of
contractors for _____
_____ and hereby apply for the same.

Sl.No.	Name of the work : Annual Maintenance Contract for Air Conditioning units	Please Tick whether applied or not for all three categories
3	Category-I (Upto 5 Lacs)	YES / NO

I / We give the following details for your consideration.

Sl.No	QUERY	ANSWER
1	Name of the firm	
	Proprietary / Corporate	
2	Address	
	OFFICE	
	RESIDENTIAL	
3	i) What is the constitution of firm viz. Sole Proprietor, Partnership, Pvt. Ltd., Public Ltd., etc	
	ii) Enclosed copy of partnership deed, Articles of Association or Affidavit in case of sole proprietorship as per Annexure A-1.	
	iii) Fill-in enclosed Annexure A-2.	
4	PAN No	
	TIN No.	
	GST Registration No	
5	Registration with EPF and Details	
	Registration as per Labour Act and	

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	Details	
6	Contact Details	
	Office Phone No.	
	Residence Phone No.	
	Mobile No.	
	e-mail	
	Fax No.	
7	Month and year in which the firm was established in present name	
8	Particulars of old firm (if present firm is new) if main partners of the present firm were working as Fire alarm detection system contractors, in some other name in the past (The partnership deed of old firm be Enclosed)	
9	Particulars of sister Fire alarm detection system firms, if any:	
10	Fill and enclose Annexure B giving details of enrolment with LIC of India in the past and with other organizations	
11	Has the applicant or his partners or Directors been black listed in the past by any Central or State Govt. Deptt. / Organization	
12	i) Annual Turn Over for last Four years Documentary evidence as proof to support figure. Annexure "G" -II	YEAR Rs. in Lakh
		2020-21
		2021-22
		2022-23
		2023-24
	ii) What evidence of proof is Enclosed to support the amounts of yearly turnover	

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13	i) Name and complete postal address of bankers and statement of accounts of last 3 consecutive years duly certified by Chartered Accountant with registration number etc.	
	iii) Enclosed solvency certificate indicating amount (The certificate should not be more than One Year old).	
	iv) Net worth certificate amount and name of certified Chatered accountant and his registration number.	i) Rs. _____ Lac with ii) Rs. _____ Lac with iii) Rs. _____ Lac with TOTAL: _____
14	i) Enclosed list of immovable properties with complete postal addresses, full description & reasonable market value of property duly self attested/certified	
	Note: If called for, valuer's certificate for above declared list and value, to be submitted by contractor.	Rs. _____
	i) Particulars of movable properties duly self attested / certified	
	Value of tools & plants	Rs.
	Other Assets	Rs.
	Total	Rs.
	Note : If called for, valuer's certificate for above declared list and value, to be submitted by the contractor	
16	Fill in and Enclosed list of tools & plants as per Annexure-C enclosed.	

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17	<p>Fill in & Enclosed Annexure-D giving full particulars about Annual Maintenance Contract executed during past seven years</p> <p>NOTE: . <u>Work completion certificate for qualified projects must be Enclosed with address & contact numbers of issuing authority</u></p>
18	<p>Work in Progress:</p> <p>i) Whether full details of major Annual Maintenance Contract in hand given in Annexure 'E' Note: The details must be notarised.</p> <p>ii) Are copies of work orders for such large works Enclosed</p>
19	Whether full information regarding permanent technical staff employed given in Annexure 'F'
20	How do you normally carried out fire alarm system/ Fire fighting works
21	How do you normally carrying out periodical maintainance and breakdown maintenance of Air Conditioning units
22	Do you carry out the maintenance of different makes window/Split Air Conditioning units
23	Any other information the applicant might like to give.

SIGNATURE OF CONTRACTOR

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DECLARATION

I/We agree to notify the officer accepting this application for Pre-Qualification of Life Insurance Corporation of India, of any changes in the foregoing particulars as and when they occur and to verify and confirm.

I/We understand and agree that the appropriate Authority of Life Insurance Corporation of India has the right as he may decide, not to open Financial Bid tender in any particular case and also to suspend, remove or blacklist my/our name from Life Insurance Corporation of India list of contractors in the event of my/our furnishing false particulars in the prequalification bid form or submitting non-bonafide tenders or for technical or other delinquency in regard to which the decision of appropriate Authority of Life Insurance Corporation of India shall be final and conclusive.

I/We certify that the particulars furnished in the Pre qualification bid forms are correct and that should it be found that I/We have given a false certificate or that if I/We fail to notify the fact of my/our subsequent amalgamation with another contractor or firm, the Life Insurance Corporation of India may disqualify my/our name from the opening Financial bid.

PLACE:

DATE :

SIGNATURE OF CONTRACTOR

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ANNEXURE – A1

AFFIDAVIT

(On Non Judicial Stamp paper of Rs.100.00/- (One Hundred Only) in case the individual who is the sole proprietor of the firm)

I
s/o age years, occupation
business r/o do hereby state on oath as
under:

That I am residing in locality of District
..... since last years.

That I am the sole proprietor of a proprietary concern name and style as
“.....” having it's office at
District dealing in business of Government, civil contracts and
ancillary works attached therefore.

Hence this affidavit.

Deponent _____

Note: **This Affidavit should be notarized.**

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ANNEXURE A2

LIFE INSURANCE CORPORATION OF INDIA

CONSTITUTION OF FIRM – SOLE PROPRIETORSHIP/PARTNERSHIP/LTD.CO./OTHER

DETAILS OF CONSTITUTENTS

Sr. No	Name of sole partner or Director / other High Officials	Age	Share	Technical Experience			Whether power of attorney Holder
				Year to Year	As Employee	As Contractor	
1	2	3	4	5	6	7	8

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ANNEXURE – B

LIFE INSURANCE CORPORATION OF INDIA

PARTICULARS OF ENROLMENT WITH LIC AND OTHER ORGANIZATION

I. Name of works for Which enrolled by L.I.C. in the past	1)
	2)
	3)
	4)
Sr. Nos. for which tenders were submitted	
Sr. Nos. for which work order was received	

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II. ENROLMENT WITH OTHER ORGANISATIONS:

Sr. No	Name & Address of Authority with whom you are enrolled	FIRST TIME ENROLMENT		LAST RENEWAL OR ENROLMENT			
		Year to year	Is copy of letter enclosed	Year to Year	Class or Category	Limit (Rs. In Lac)	Is copy of letter enclosed
1	2	3	4	5	6	7	8

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ANNEXURE – C

LIFE INSURANCE CORPORATION OF INDIA

PARTICULARS OF TOOLS & PLANTS

Sr. No.	Item	Specification	Quantity	Estimated Value	Remarks
1	2	3	4	5	6
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					

SIGNATURE OF CONTRACTOR

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SIGNATURE OF CONTRACTOR

ANNEXURE – E

LIFE INSURANCE CORPORATION OF INDIA

LIST OF WORK IN HAND

Sr. No.	Name and Complete Postal Address of			Order			Date of commen ce-ment of work	Schedul ed date of completi on of work	Progress made and expected date of completion and reasons for delay, if any
	Site of Work & Nature of Work	Owner	Authority under whom work was carried out	Ref. No. & Date	Amount (Rs. in Lac)	Is copy enclosed			

SIGNATURE OF CONTRACTOR

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ANNEXURE – F

PARTICULARS OF PERMANENT TECHNICAL STAFF

Sr. No.	Name	Designation	Age	Academic Qualification	Service with the Firm	Details of Experience Year to Year
1	2	3	4	5	6	7

SIGNATURE OF THE CONTRACTOR

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Annexure G

To

Chief Engineer / Dy. Chief Engineer (I/C),
.....Office,

BANKERS CERTIFICATE FROM A BANK

This is to certify that to the best of our knowledge and information that M/s / Shri.....
.....having marginally noted address as a customer of our bank are/ is respectable and
can be treated as good for any engagement up to a limit of Rs..... (
Rupees.....).

This certificate is issued without any guarantee or responsibility on the bank or any of the officers.

(Signature of Authorized official)

For the Bank

NOTE:

1. Banker's certificate should be on letter head of the Bank, addressed to Tender Issuing Authority.
2. In case of partnership firm, certificate should include names of all partners as recorded with the Bank.
3. The bid will not be considered valid if any change to the above format is made.

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Annexure H

FORM FOR CERTIFICATE OF NETWORTH FROM CHARTERED ACCOUNTANT

It is to certify that as per the audited Balance Sheet and Profit & Loss Account during the Financial Year, the Net Worth of M/s.....(Name & Registered Address of Individual / Firm / Company) as on 31st March(previous financial year from the year in which NIT is published/ application invited for Enrolment) is Rs.....(Rupees.....) after considering all liabilities. It is certified that computation of Net Worth based on my / our scrutiny of the Books of Accounts, Records and Documents is true and correct to the best of my / our knowledge.

(Signature of Chartered Accountant)

Name of Chartered Accountant:

Membership No. of ICAI:

Date:

Seal:

Note:

1. The Net worth Certificate should be on letter head of the Chartered Accountant.
2. In case of Contractor is partnership firm, certificate should include names of all partners as recorded with the Chartered Accountants.

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Annexure II

FORM FOR CERTIFICATE OF NETWORTH FROM CHARTERED ACCOUNTANT

It is to certify that as per the audited Balance Sheet and Profit & Loss Account during the Financial Year, the Net Worth of M/s.....(Name & Registered Address of Individual / Firm / Company) as on 31st March(previous financial year from the year in which NIT is published) is Rs.....(Rupees.....) after considering all liabilities. It is certified that computation of Net Worth based on my / our scrutiny of the Books of Accounts, Records and Documents is true and correct to the best of my / our knowledge.

It is further certified that the Net Worth of the company has not eroded by more than 30% in the last three years ending on 31st March(previous financial year from the year in which NIT is published)

(Signature of Chartered Accountant)

Name of Chartered Accountant:

Membership No. of ICAI:

Date:

Seal:

Note:

1. The Net worth Certificate should be on letter head of the Chartered Accountant.
2. In case of Bidder is partnership firm, certificate should include names of all partners as recorded with the Chartered Accountants.

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ANNEXURE-I

Name of contractor:

PRE-QUALIFICATION BID CHECKLIST

Sr. No.	Description of Enclosure	Refer Item of form	Enclosed YES/NO
1	Partnership deed/ Articles of Association/ Affidavit (*) (*) Annexure A-1	8(ii)	
2	Annexure (A-2) as supplied	(Particulars of Partners) 8 (ii)	
3	Annexure – B (as supplied)	(Particulars of enrolment in LIC and other organisation)	
4	Proof of Turn over	11(ii)	
5	Solvency Certificate	12(ii)	
6	Net worth Certificate	12(iii)	
8	Immovable Property Certificate	13(i)	
	Movable property Certificate		
9	(*) Annexure 'C' (as supplied)	Particulars of Tools & Plant 15	
10	(*) Annexure 'D' (as supplied)	(Ist of major works completed during 7 years) 16	
11	(*) Annexure 'E' (as supplied)	(List of work in hand) 17	
12	(*) Copies of work orders	17 (ii)	
13	(*) Annexure 'F' (as supplied)	Particulars of permanent Technical staff)	

SIGNATURE OF CONTRACTOR

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