

QUESTIONNAIRE FORM FOR EMPANELMENT

SL.NO.	DETAILS OF THE FIRM/ COMPANY	
1	Name of firm / Company	
2	STATUS : Proprietor / Partnership/ Private Limited Company/ Public Limited Co.	
3	Date of Establishment/ Registration	
4	Name of the Proprietor/ Partner/ Director etc	
5	Name of Representative who would be calling on us and attending to our Jobs.	
6	Address of Head Office	
7	Address of Site Office/ Work shop	
8	Address of local office in DEHRADUN	
9	Address of site office/ Work shop in DEHRADUN	
10	TELEPHONE NOS.	
	OFFICE	
	MOBILE NO.	
	E MAIL	
11	Registration Nos. of the Firm (Please attach Copies)	
	PAN NO.	
	TAN NO.	
	GST NO.	
	Any Other	
12	Has your Firm been Blacklisted earlier by LIC or any Other Govt. Department YES/ NO	
13	Name of the Banker with Address and Telephone Nos.	
14	Are you agreeing to make deliveries at LIC's Office at Divisional Office DEHRADUN and its Branches under its jurisdiction? YES/ NO	

15	Details of Empanelment with any office in LIC or any other Govt. Department.		
16	Total Turnover of last three years (Please attach audited Revenue Accounts, P&L A/C and Balance Sheet of last three years)		
	TURNOVER FOR LAST 3 YEARS	GROSS TURNOVER	NET INCOME
16	F.Y. 2022-23		
	F.Y. 2023-24		
	F.Y. 2024-25		
17	Are you strictly abide by the terms and conditions of the as described in attached "Eligibility Criteria & Other Conditions" YES/NO		

PLEASE TYPE THIS FORM OR FILL IT LEGIBLY IN INK. USE SEPARATE SHEET, IF SPACE PROVIDED IS INSUFFICIENT.

1. I/We request the Life Insurance Corporation of India, Divisional Office, Dehradun to consider/inclusion of my/our firm/company in the list of approved suppliers/vendors and hereby assume to extend full co-operation in the event of their doing so.
2. All the information furnished by me hereunder is correct to the best of my knowledge and belief.
3. I/we agree that the decision of LIC in selection of contractors will be final and binding to me/ us.
4. I/We agree that I/ We have no objection if enquiries are made about the work listed by me/ us in accompanying sheet.
5. I/ We also confirm that single application is submitted by our firm /Company.
6. I/We agree to abide by all the rules and regulations framed by the Corporation time to time.

This..... Day of 2025 at

Signature
Name
Office Seal