Appendix-G18

Life Insurance Corporation of India Divisional Office , Varanasi "Jeevan Prakash" B 12/120 Gauriganj, Bhelupur, Varanasi- 221001

Technical Bid

Referenc	No
(Note: Th	reference number to be filled up by the tenderers for the particular Premises offered and noted in price Bid also for easy and correct identification.
	economic o
Sr	Datail

			Detail	Remarks
1	1		Name of the Lessor	richars
10	2	a	Address of the Lessor	
		b	Phone No.	
		С	Fax No.	
		q	E - Mail ID	
		e	Permanent Account Number (PAN)	
	3	ā	Name of the contact person duly authorized.	
		b	Phone No.	
	4	а	Constitution of vendor/ firm (Proprietary/ Partnership/ Private/ Pvt.Ltd./ Public Ltd/ PSU etc)	
		b	PAN numbers of the Directors/ Partners/ Firms,	
	Deta	ails of t	he property:	
	1	Name	of the Owner	
T	2	Addre	SS:	· · · · · · · · · · · · · · · · · · ·
1	3	Phone	≥ No.	
	4	Name	of the building	The state of the s
	5		s of encumbrances, if any?	
	6		on and address of the property	
1			of the property (as approved by the Competent	

i		١	Detail -	Remarks
į		Au	thority).	****
	8	a	Residential	
	*	b	Gommercial	
	*****	C	Residential cum Commercial	
1		d	Shopping centre	
	9	Wr bui	ether the proposal for Office premises in a multi - storied ding.	
	-	а	Number of floor in the building.	
		b	At which floor, the office premises are offered.	
	10	CTS	S No	
1	11	Sun	vey No	
7	12	War	d NO	
1	3	Whe	ther the plot is free hold or lease hold?	
+			If lease hold, please mention the details of	
1	1	ij	i Name of the Tille Holder/ Lessor	
+	\dashv		ii Tenure of the land	
+	-		iii Residual lease period	
	-	_	iv Annual lease rents and amount.	
-	+	c I		
			Whether the property is mortgaged? If yes mention the letails.	
			Name of the Organization where the property is mortgaged.	
			Address of the Organization with phone no.	The state of the s
		77	ii Amount of loan availed.	
		. i	Tenure of mortgage	
		1	Residual mortgage period	
		ν	i EMI paid.	
14	10	hara	cter / Type of locality	
	ε.	R	esidential	والمراجع والم والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراج
) b	C	ommercial	
	C	C	ommercial cum Residential	

Sr			Detail	Remarks
		d	Industrial	
		е	Slum	-
	15	Are	ea of the plot	
	16	Siz	e of the plot	
		а	Frontage in meters	
		b	Depth in meters	
	17	Sci	hedule of the plot i.e. boundaries of the plot on	
		3	North	
		b	East	
		С	South	
		þ	West	
	18		nether the locality is free from Special hazards like fire / od etc.	•
	19		nether the locality has protection from adverse influence ch as	·
	İ	а	Encroachment.	
		b	Industrial nulsance, smoke, noise etc.	
	20	Ple	ease enclose copy of Property Card or Patta etc.	
	21	Pl€	ease also indicate distance from the nearest	
		i	Railway (local) station	
		ii	Bus Stand	
		iii	Bank (Nearest)	·
		iv	Airport	
		ν	Hospital/ Schools/ Colleges/ Universities.	
	22	100	ear of construction. Enclose a attested copy of NOC or coupancy certificate issued by the Municipal Authority or y other Government Bodies.	
i i	23	а	Incase of old constructions, NOC from the Society may be enclosed	
		b	Mention year of completion (as given in Completion Occupancy Certificate Issued by the Authority).	
		C	Indicate in whose name the conveyance deed is executed.	
	24	Da aft	ate on which Office premises can be handed over to LIC er finalization of the deal.	÷

Sr		Detail	Remarks
	25	Built up area of the premises being offered now for office usages on lease basis. Please enclose copies of approved plans.	
•	26	What is the carpet area (for consideration purpose).	
3	Spe	eifications	
	1	Type of building (Residential/Semi commercial)?	
	2	Type of structure (RCC / Steel framed/ load bearing).	
1.	3	Type of wall (Brick/ Cement block). Mention thickness of external wall and internal partition wall.	
	4	Details of Flooring (M.M.Tiles/ Ceramic/ Vitrified/ Marble) or any other.	
	5	Details of Door frames (Sal wood/ Teak Wood/ Hard wood/ Aluminum) or any other.	
	6	Details of Door shutters (Flush door/ Teak wood/ Aluminum / PVC) or any other.	
	7	Details of Window frames (Sal wood/Teak Wood/ Hard wood/ Aluminum) or any other.	·
	8	Details of window shutters (Teak wood / Aluminum / steel) or any other with security grills or without security grills.	
	9	i No of toilets in each floor.	
		ii Details of Floors and Dado in Toilets.	
4		ether Structural stability certificate enclosed (Certificate shall rom Licensed Structural Engineer of Municipal Corporation)	
5	Sen	/ice	
	1	If Lift facility is available, please give details of Number of lifts, capacity, make and the year of installation.	
	2	Please indicate source of water supply.	:
	3	is bore well provided? If so what is the yield and depth of bore well.	
	4	Capacity of the over head tank feeding to the office premises under consideration for leasing.	
	5	Please give details of sewerage system and for storm water disposal.	
	6	Please indicate whether the building is prone to flooding.	:
6	Elec	aricity	
	٦	i What is the connected load to the building in KW / KVA?	<u> </u>
		ji Type of electric connection.	Commercial / Residential.
	5	Please indicate the type of wiring used , Aluminum or copper?	

Sr		Detail	Remarks
	3	Whether ELCB is provided	Yes / No
7	Cor	nmon services .	
	1	Car parking	Reservednos. Opennos.
	2	Two wheeler parking	Reservednos.
	3	Power / Electricity supply available.	Yes / No
	4	24 Hrs. water / Overhead tanks available.	Yes / No
	5	Generator for emergency. If yes mention, capacity of the Generator.	Yes / No
	6	Anti lightening device arrangement.	Yes / No
	7	Security arrangements, please give details.	
8	Oth	er Information	
	1	Whether any ready built flats / Office premises have been constructed and sold by the builder to any government and semi government institutions/Financial Institutions? If so please give name and addresses of such clients.	
9	Det	alls of Plan / Blue Prints / Sanctioned Plan	
	1	Whether the plan of the property is sanctioned by the Competent Authority.	
	2	If sanctioned, please enclose copy of approved Floor Plan/s, Sections, Elevations and Site Plan of the building.	
	3	Name/s and Address Phone No. of the Architect / Engineer.	
	4	Provision for proper arrangement of fire safety.	
10	1	Are the safety measures taken?	, , , , , , , , , , , , , , , , , , , ,
	2	If yes, give details of arrangement.	
	3	Is No Objection certificate obtained / Secured from fire control authorities.	
	4	If yes, produce copies of proof / certificates.	The second state of the second se
11	List	of Enclosures	

Signature of vendor with seal and date.

Date:	446	.,.,,,,,,,,,,,,,	********	
			*	
Place.				