

The Manager (Estates),
 OS/Estates Department,
 Divisional Office – 1
 Post box no.6694, I floor,
 Jeevan Prakash Building
 J.C. Road, Bangalore 560002

TECHNICAL BID

**SECURITY SERVICES AT VARIOUS LOCATIONS
 COMING UNDER TUMAKURU / TUMAKURU DIST RURAL BRANCHES**

| SL. NO. | INFORMATION SOUGHT | INFORMATION PROVIDED |
|---------|---|----------------------|
| 1) | Name of the Firm (In Block Letters) | |
| 2) | Date of Establishment/Incorporation & Registration No. for shop & establishment registration. | |
| 3) | Registration No. for registration Under Companies Act 1956. (Please enclose photo copy of certificate) | |
| 4) | Correspondence address and Telephone No. with email id | |
| 5) | Address of Head Office (if separate) and Telephone No. | |
| 6) | Status Proprietary / Partnership Private Limited Company/ Public Limited Company. | |
| 7) | Names of other partners / Directors | |
| 8) | Name of Chief Executive with his Present address and Telephone Nos. | |
| 9) | Name of Representative(s) With Designation who would be Calling on us and attending to our jobs. | |
| 10) | Name of Bankers with Address & Telephone Nos. IFSC Code & A/c. No. | |
| 11) | PAN No. of Income Tax Dept. (please enclose photo copy) | |
| 12) | Labour Licence Nos. and validity under Various section of Labour Laws(Central Govt) (please enclose photocopy of certificate | |
| 13) | Goods & Service Tax Registration No. | |
| 14. | E.P.F Registration No. (please Enclose Photocopy of certificate) | |
| 15 | ESI No. (please enclose photocopy of certificate) | |
| 16 | Experience Certificates preferably from Public sector/ Govt. organization. | |
| 17 | Details if registered with any other Government Authority (ies) | |

| | | |
|----|---|---|
| 18 | 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) | |
| 19 | Turnover for last three years | |
| 20 | Details of empanelment with any office of LIC OF INDIA and /or Prestigious P.S.Us (Central)(Please enclose list giving full details and name and telephone no. for person who may be contacted for confirmation). | |
| 21 | Approximate value of your output Turnover Per year | |
| 22 | Mention any other specialties of your Establishment | |
| 23 | Total number of Security personnel employed as on 01-12-2017. | |
| 24 | Any court case pending before labour court (if yes, details of the case) | |
| 25 | EMD particulars : DD. No. | Date : Amount |
| 26 | Copy of Documents enclosed for verification a) Firm Registration Certificates b) Status of Firm (Individual/sole Proprietor /partnership/pvt ltd / public Ltd., Etc) and related document copies c) Proof for PPF and ESI benefits and other statutory liabilities d) TAN number copy e) PAN number copy f) A copy of Registration Certificate of Goods & service Tax (GST) g) Copy of Shop and establishment registration h) Income tax returns submitted for the past three years i) Details of organizations where you are maintaining Offices currently, with nature of duties (Format enclosed) j) Licence issued under the Private Security Agency Regulation Act. k) Licence issued under contract Labour Act 1970 and contract Central rules 1971. | Yes/ no Yes/no Yes/no Yes/no Yes/no Yes/no Yes/no Yes/no Yes/no Yes/no |
| 27 | Police Licence No/ Validity | Yes/no |

I declare that the above information is correct and complete to the best of my knowledge and belief.

SIGNATURE WITH SEAL

Note: Please type this form of fill it legibly in ink. If space provided is insufficient, please type or write the replies on a separate sheet giving appropriate question number duly authenticating the same with seal and signature and attach it to the form.