LIC OF INDIA ,JEEVAN PRAKASH BUILDING ,BISTUPUR , JAMSHEDPUR
ENROLMENT FORM

INSTRUCTIONS FOR FILLING & SUBMISSION OF ENROLMENT FORM

Enrolled form duly filled as directed , shall be submitted to the office of **Sr Divisional Manager , LIC of India , Jeevan Prakash Building , Bistupur ,Jamshedpur** on or before 8/08/2018 at 15:00 hrs **. Enrolment form can be obtained from LIC of India , Divisional office building by depositing Rs 500/- by pay order or DD in favoured of LIC of India ,payable at Jamshedpur . Enrolment form can be downloaded from the website of LIC of India www.licindia.co.in**
Please note that no consideration will be given for postal delays.

1. Suppliers to note that all particulars required as per the form and Annexure shall be filled in completely in relevant blanks 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 supplier who will be selected for attending of financial bid shall be informed by a letter/email. Please note that no enquiries or correspondence regarding the selection for issue of tenders shall be entertained.

4. Latest Solvency Certificate from any Nationalized /Scheduled Bank for minimum amount as mentioned in the **"Minimum qualifying requirement"** as per advertisement should be submitted along with Enrolment Form.

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 which the works have been carried out should be given.
   (c) The contractors 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 .
   (d) The annual turn over should be based on latest Income-tax Clearance Certificate, duly cleared by Income-tax Department.

6. Please note that the submission of this enrolment form does not confer any right on you to claim issue of tenders and the Sr Divisional Manager reserve the right not to issue tender to any/all applicants without assigning any reason whatsoever.

Signature of the supplier

Sr Divisional Manager

LIFE INSURANCE CORPORATION OF INDIA
DIVISIONAL OFFICE ,Jamshedpur

FORM FOR ENROLMENT OF SUPPLIER

I/We……am/are desire of being enrolled on the list of contractors for SITC of SMF battery **Name of works:- SITC of SMF battery under Jamshedpur DO** and hereby apply for the same. I/We give the following details for your consideration:

Sl. No.	Query		Answer
1.	Name of the firm	:	
2.	Address	:	
3	PAN No., GST no		
4.	Telephone Number Office	:	
	Residence	:	
	Mobile	:	
	Fax No., if any	:	
	E-Mail, if any	:	
5.	Month and year in which the firm was established in present name and the distributor or dealer for which make battery. Distributor/Dealer license must require. Carrier/Voltas/Blue Star	:	
6.	Particulars of old firm(if present firm is new),	:	
7.	Particulars of sister construction firms (if any)	:	

8 i)	What is the constitution of firm viz. Sole Proprietor, Partnership, Pvt. Ltd., Public Ltd., etc.	:		
ii)	Enclose copy of partnership deed, Articles of Association or Affidavit in case of sole proprietorship as per Annexure A-1	:		
iii)		:		
9.	Giving details of enrolment with LIC of India in the past and with other Organizations	:		
10.	Has the applicant or his partners or Directors been black listed in the past by any Central or State Government Dept./ Organization	:		
11	Has the applicant or his partners or Director been Black Listed in past by any central or state Govt. Department./ Organization.			
12. i)	Annual Turn Over for last Three years (enclose documentary evidence or proof to support figures)	:	Year	Rs. in Lacs
			ii) 2015-16	
			iii) 2016-17	
			iv) 2017-18	
Ii)	What evidence of proof is enclosed to support the amounts of yearly turnover	:		
iii)	Enclose for the last Four years Audited balance Sheet	:	Certificate enclosed for Assessment years ……..	
13. i)	Name and complete postal address of bankers	:		
ii)	Enclose Latest Bank solvency certificate indicating amount	:		
iii)	Bank Guarantee limit with various banks	:	i) Rs…….lacs with……. ii) Rs…….lacs with……. Total Rs.	
ii)	Whose supporting certificate is enclosed	:	Rs…… of…… Date……	

DECLARATION

I/We agree to notify the officer accepting this application and registering my / our names on list of contractors of Life Insurance Corporation of India, of any changes in the foregoing particulars as and when they occur and to verify and confirm these annually on 1st January.

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

I/We certify that the particulars furnished in the enrolment 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 remove my/our name from the list of suppliers and any contract that I/We may be holding at the time may be rescinded.

PLACE:

DATE: **SIGNATURE OF SUPPLIER**

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LIC
भारतीय जीवन बीमा निगम
LIFE INSURANCE CORPORATION OF INDIA