NOTICE FOR ENROLMENT OF VENDORS FOR UPS SUPPLY

LIC of India invites application for enrolment from reputed VENDORS of UPS for supply, installation, testing & commissioning Of Modular On line UPS for various offices in Uttar Pradesh & Uttarakhand in the prescribed Enrolment Form. The interested UPS Manufacturing firms who are having valid ISO 9001 Certificate and having enlisting with Banks, Central or State Public Sector undertaking, CPWD, Central, State Govt. may apply in the prescribed enrolment form. Only the agencies which are having service centre at Uttar Pradesh, Uttarakhand and fulfilling the below criteria are eligible. Last date for submission of enrolment form is 29.08.2016 upto 15.00 Hrs.

Name of the work	Estimated Cost (Rs. In Lac)	Completion period (in months)	Min Bank Solvency (Rs. In Lac) (The Solvency certificate should not be more than 3 months old prior to date of this Publication.)	Avg. Annual Turnover During last Four Financial years (Rs. In Lac)	Qualifying Value of Single work Completed during last 07 years (Rs. In Lac)
	A	B	C	D	E
1.- Supply of Modular online UPS upto 40 kva along with 30 minutes battery backup.	20 Lac	3 months	40.0 Lac	200 Lac	1) Three work costing not less than Rs. 8.0 Lacs OR Two work costing not less than 12.00 Lacs OR One work costing not less than 16.00 Lacs AND 2) One completed work of any nature (either part of above or a separate one) costing not less than 9.6 lacs with any central Govt. department, Central Autonomous Body/ Central Public sector undertaking / state public sector undertaking/ City Development Authority/ Municipal Corporation of City Formed under any act by Central /State Government and published in Central/State Gazette.

Note:-

1. The Company should be in existence for a minimum period of 10 years.

2. **The companies should have quality certification like ISO-9001 and the products (UPS) having respective quality certifications from CPRI/ any Govt. testing facility shall only be eligible for empanelment.**
3. **The Firm should have well equipped manufacturing unit with all the latest equipments for manufacturing of Modular UPS and all testing facility as per latest IS codes.**

Agencies who desire for enlistment for the above work should apply to the Dy. Chief Engineer (I/C), LIC of India, Engineering Department, Jeevan Vikas,16/275- Civil Lines, Kanpur-208001 in the prescribed "Enrolment Form" along with Demand Draft /Pay Order / Bankers Chq. of Rs.2000.00/- (Rupees Two Thousand only) drawn in favor of "LIFE INSURANCE CORPORATION OF INDIA" payable at Kanpur (Non-refundable). Blank Enrolment form may be downloaded from our website www.licindia.in. **Any delay including postal shall not be entertained. Agencies who are already enlisted with us may also apply in fresh for enrolment.**

Dy. Chief Engineer (I/C) reserves the right to reject for selection of any manufacturer/agency at his sole discretion without assigning any reason whatsoever.

DY. CHIEF ENGINEER (I/C)

PRE-QUALIFICATION OF VENDORS FOR SUPPLY OF UPS - INSTRUCTIONS FOR FILLING AND SUBMISSION OF ENROLMENT FORM

1. The Enrolment Form along with the Annexure I to IV & A1,A2 and B to G & shall be completely filled in all respects along with non refundable processing fees Rs 2000/- by way of DD/ pay order/Bankers Chq. in favour of LIC of India payable at Kanpur shall reach to the DY.CHIEF ENGINEER (I/C), Life Insurance corporation of India , North Central Zonal Office, First Floor, Jeevan Vikas, 16/275 – Civil Lines Kanpur along with these instructions for filling and submission of enrolment form on or before 29.08.2016. Please note that no consideration will be given for postal delay

2. Contractors 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. Simply enclosing copies of partnership deeds, Printed Brochures printed list of work or certificates from authorities & stating refer to the enclosures without filling the entries in the form / Annexure does not meet the requirement. It is also essential to furnish full details of name of work, Location, full postal address with fax and telephone No etc of the employers and authorities under whom the work is carried out in the enrolment form and annexure.

3. The forms not submitted strictly as per the above instructions within stipulated period are liable to be rejected.

4. The list of eligible contractor for enrolment will be uploaded on LIC web site. This empanelment of the contractor will be valid for three years from the date of enrolment.

5. The eligible contractors who will be selected for issue of tenders (after scrutiny of enrolment forms) shall be informed by a letter as and when the tenders are ready for issue. Please note that no enquiries or correspondence regarding the selection for issue of tenders shall be entertained.

6. Latest Solvency Certificate from any Nationalized/Scheduled Bank (not be more than three months old as on the date of submission of enrolment form) should be submitted along with Enrolment Form. Self attested Xerox copy of the solvency certificate will be entertained.

7. **The contractors are advised to follow the instructions given below**:-

   a. Enrolment Form shall be filled-up in clean handwriting in capital letters 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 latest Income-tax Returns, duly audited by CA or as per Audited balance sheet copy should be submitted.

8. Please note that the submission of this enrolment form does not confer any right on you to claim issue of tenders and The Dy. Chief Engineer (I/C), LIC NCZO, Kanpur, reserves the right not to issue tender to any/all applicants without assigning any reason whatsoever.

9. The contractors should be ready to Supply and install the UPS at all locations in Uttar Pradesh & Uttarakhand.

Note: Any Agencies applied and fulfilling the above criteria may not be considered for enlistment if unsatisfactory performance reports are received for the completed projects/works from their previous employers.

Dy. Chief Engineer (I/C)

Encl : Enrolment Form with Annexure ‘A1,A2,B to G & I to III’

LIFE INSURANCE CORPORATION OF INDIA
ENGINEERING DEPARTMENT

NORTH CENTRAL ZONE

FORM FOR ENROLMENT OF CONTRACTORS

I / We _____am / are desirous of being enrolled on list of contractors for "Supply of Modular online UPS upto 40 kva with 30 minutes battery backup" at various LIC Offices in Uttar Pradesh and Uttarakhand 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		
		TIN No.		
		VAT Registration No.		
		Service Tax Registration No.		
4	Contact Details	Office Phone No.		
		Residence Phone no.		
		Mobile No.		
		Fax No.		
		Email		
	Telegraphic Address, if any			
5	Month and year in which the firm was established in present name whether the Company was existing for a minimum period of10 years			
6	What is the constitution of firm viz. Sole Proprietor, Partnership, Pvt.Ltd., Public Ltd., etc. (Enclos copies of Deed/Articles of constitution of the company)			
7	Whether the firm is a manufacturer of UPS or whether an authorized channel partner/ dealer during the last 5 Years and is in force during the current year (Enclose Channel Partner/ Dealership letter from OEM)			

Sl.no	QUERY		ANSWER	
8	Particulars of dealer ship/channel partnership			
9	The firm should have quality certification like ISO-9001, PRODUCT CERTIFICATE CPRI, Enclose copies			
10	Has the firm been black listed in the past by any Central or State Govt. Deptt. /Organization			
11	Should have executed contracts for Supply of up to 40 KVA capacity Modular online UPS for Public/ Pvt. Sector during the last 3 years (Enclose Copies of Purchase Orders)			
12	List of clients to whom similar capacity UPS is supplied (To be enclosed)			
13	Product must have been deployed in the Market and working satisfactorily (Enclose Copies of Purchase Orders).			
14	i) Annual Turn Over for last four years (enclose documentary evidence or proof to support figures)		YEAR	Rs. in Lac
		i.	2011-12	
		ii.	2012-13	
		iii.	2013-14	
		iv.	2014-15	Certificate of TDS should be submitted.
	ii) What evidence of proof is enclosed to support the amounts of yearly turnover			
	iii) Enclose latest audited balance sheet of CA		Certificate enclosed for Assessment year _____	
15.	Whether service centers details given in Annexure – I & II			
16.	Whether the firm is able to provide break-down services within 4 to 6 hrs. in cities like Allahabad, Agra, Aligarh, Bareilly, Dehradun, Faizabad, Gorakhpur, Haldwani, Kanpur, Lucknow, Meerut, Varanasi etc. and within 12 to 24 hrs in other locations in UP & Uttarakhand.			
17.	If the bid is submitted by Authorized Dealer/ Channel Partner. (Enclose Letter from OEM) a) Dealership/ Channel Partnership Certificate from OEM & b) Commitment Letter from OEM to Honour Warranty/ AMC commitments.		Not Applicable	

Sl.no	QUERY		ANSWER
18.	Quality/Performance/Benchmark Certifications for the products, Service etc, If any.		
19.	MAKE/BRAND OFFERED		
20.	Any other information the applicant might like to give		
21.	i) Name and complete postal address of bankers		
	ii) Enclosed solvency certificate indicating amount. **(The certificate should not be more than 3 months old).**		
	iii) Bank Guarantee limit with Various banks		i) Rs._____ Lac with _____ ii) Rs._____ Lac with _____ iii) Rs._____ Lac with _____
			TOTAL
	Value of tools & plants		Rs.
	Other Assets		Rs.
	Total		Rs.
	ii) Whose reference is enclosed?		
22	Whether full information regarding permanent technical staff employed given in **Annexure 'F'**		

DECLARATION

I/We agree to notify the officer accepting this application and registering my/our names on list of supplier /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 contractors in the event of my/our furnishing false particulars in the enrolment form or submitting non-bonafide 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 contractors and any contract that I/We may be holding at the time may be rescinded.

PLACE :

DATE : SIGNATURE OF CONTRACTOR

: FOR OFFICE USE ONLY:

ENROLMENT FORM NO._____ ISSUED TO _____

NOTE: **THE FILLED IN ENROLMENT FORM SHOULD REACH IN THE OFFICE ON OR BEFORE 29.08.2016.**

SIGNATURE OF ISSUING OFFICER

ANNEXURE - I

Particulars of Regional / Branch Offices/Service Centres

Number of Offices: Within the state of …….. :

Within the State of …….. :

Other Places

Total Number of Offices:

Please furnish information about Regional/ Branch Offices/ Service Centers in the following format …….. (Specify states to cover) states

City / State	Address	Name of Person In-charge and Phone No	No. Of Qualified Support Engineers & their qualifications	Whether adequate trained Manpower, knowledge base & stock of spares available for support

Date:
with Seal

Signature of Authorized Official

ANNEXURE - II

Particulars of Service Centers Managed by Third Parties / Franchisee

Number of Offices: Within the State of West Bengal & North Eastern State

Rest of India

Total Number of Offices

City / State	Name and Address of the service provider	Name of Person In-charge and Phone No	No. Of Trained Service Engineers	Whether adequate trained Manpower, knowledge base and stock of spares maintained

Date: Signature of Authorized Official with Seal

ANNEXURE – III

A. List of Major Clients and related references: supplied during the last three years – provide copies of major contracts executed/ copy of Purchase Orders for each of the model)

Name of the clients & contact details	Details of equipment supplied

Date: **Signature of Authorized Official with Seal**

ANNEXURE – A1

A F F I D A V I T

(On Non Judicial Stamp paper of Rs. 100/- 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**.

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

SIGNATURE OF CONTRACTOR

ANNEXURE – B

LIFE INSURANCE CORPORATION OF INDIA

PARTICULARS OF ENROLMENT WITH LIC AND OTHER ORGANIZATION

I. ENROLMENT WITH LIC :

Name of works for 1)

Which enrolled by 2)

L.I.C. in the past 3)

4)

Sr. Nos. for which tenders were submitted :

Sr. Nos. for which work-order was received :

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)

SIGNATURE OF CONTRACTOR

ANNEXURE – C

LIFE INSURANCE CORPORATION OF INDIA

PARTICULARS OF TOOLS AND PLANT

Sr. No.	Item	Specification	Quantity	Estimated Value	Remarks
(1)	(2)	(3)	(4)	(5)	(6)
1.	a- Power Analyzer b- Oscilloscope				
2.	Earth Resistance Testing Equipments				
3.	Meggers				
4.	HT jointing kits				
5.	Resistance load for testing				
6.	Welding Equipments				
7.	Crane				
8.	Cable tester				
9.	Steel ladders				
10.	Others				

SIGNATURE OF CONTRACTOR

ANNEXURE – D

LIFE INSURANCE CORPORATION OF INDIA

LIST OF MAJOR WORKS COMPLETED DURING LAST SEVEN YEARS

Sr. No.	Name and Complete Postal Address of			Order			Value of work as per final bill (Rs. in Lac)	Commencement of work month Year	Completion of work month Year	Penalty levied for delay of completion, if any
	Site of Work & Nature of Work	Owner	Authority under whom work was carried	Ref. No. & Date	Contract Amount (Rs. in Lac)	Is copy enclosed				
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)

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 commence-ment of work	Scheduled date of completion 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			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)

SIGNATURE OF CONTRACTOR

भारतीय जीवन बीमा निगम
LIFE INSURANCE CORPORATION OF INDIA

ANNEXURE – F

LIFE INSURANCE CORPORATION OF INDIA

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)

भारतीय जीवन बीमा निगम
LIFE INSURANCE CORPORATION OF INDIA

ANNEXURE – G

ENROLMENT CHECKLIST

CHECKLIST FOR ENROLMENT:

Sr. No.	Description of Enclosure	Refer Item of form
1.	**Bidding Capacity (Rs. In Lac) Separate enclosure with details calculation as per prescribed formula. (An affidavit duly notarized in support of this statement is must)**	Not Applicable
2.	Partnership deed / Articles of Association / Affidavit (*) (*) Annexure A-1	9 (ii)
3.	Annexure (A-2) as supplied	9 (ii) (Particulars of Partners)
4.	Annexure – E (as supplied)	10 (Particulars of enrolment in LIC and other Organization)
5.	Proof of Turnover	12 (ii)
6.	Latest I.T.C.C. or consolidated balance sheet of CA	13 (ii)
7.	Solvency Certificate	14 (ii)
8.	Certificate of Bank Guarantee	14 (iii)
9.	Immovable Property Certificate	15 (ii)
10.	Movable Property reference	16 (i)
11.	(☐) Annexure 'C' (as supplied)	17 (Particulars of shuttering tools/ plant)
12.	(☐) Annexure 'D' (as supplied)	18 (List of major works completed during last 7 years)
13.	(☐) Annexure 'E' (as supplied)	19 (List of work in hand)
14.	(☐) Copies of work order	19 (ii)
	(☐) Annexure 'F' (as supplied)	20 (Particulars of permanent technical staff)

SIGNATURE OF THE CONTRACTOR