भारतीय जीवन बीमा निगम
LIFE INSURANCE CORPORATION OF INDIA
उत्तर क्षेत्रीय कार्यालय

Annexure-"A"

Sl. No.	Information Sought	Information Provided
1.	Name of the Firm / Agency / Dealer (In Block Letters)	
2.	Nature of Ownership	
3.	Date of Establishment / Incorporation of the Firm. Registration No. (Please enclose photocopy of Certificate)	
4.	Address for Correspondence & Telephone nos., Mobile no./s E-mail Id Website Address of the Firm / Agency / Dealer if any.	
5.	Complete Address of Head Office (if separate) and Telephone no., Fax no. & E-mail Id.	
6.	Status: Whether Proprietary / Partnership / Private Ltd. Company	
7.	Names of the Proprietors / Partners / Directors / Head of Firm or Agency / Dealer.	
8.	Profile of Firm / Agency / Dealer	

9.	Name(s) of the representative(s) with Designation who would be coordinating with us, with their mobile numbers.	
10.	Name of the Banker with address and Telephone nos. Bank Account Details : (Please enclose a cancelled cheque Or Copy of Bank Statement) Bank : Branch : IFSC Code : A/c type : A/c number :	
11.	PAN No. (Please enclose photo copy)	
12.	Labour License no. and validity under section of Labour Laws. (Please enclose photo copy)	
13.	Whether holding certificate under Shops & Establishment Act duly Renewed? (Please enclose copy of certificate)	
14.	GST No. (Please enclose photo copy of certificate)	
15.	Turn Over For Last 3 Years Gross Revenue/Net Income FY-2018-2019 FY-2019-2020 FY-2020-2021	
16.	Details of empanelment with any office of LIC of India? If yes, please give full details and enclose the copy of the Empanelment letter.	
17.	Have your firm ever blacklisted / removed by any Govt. Deptt. / PSU or any office of LIC of India? If yes, then Give details.	

18.	Are you agreeable to abide strictly by the Terms and Conditions for Empanelment (as per Annexure B) and for Contracts, if awarded, from time to time as per Prevailing LIC Rules.	
19.	Mention any other specialties and services of your Establishment	
20.	Details of previous Work Experience as Testimonials. Names and addresses and telephone numbers of three (3) of Your most valued clients. (separate list may be attached)	
21.	Are you agreeable to make deliveries of material/items to Divisions (i.e. in States/UTs- Himachal Pradesh, Punjab, Haryana, Rajasthan, Delhi & Chandigarh, J&K) under the North Zone of the Corporation.	
22.	Details of Application Fee of Rs.118/- Mention DD NO. / Date / Bank details etc. OR LIC Miscellaneous Receipt No. / Date :	

Please type in this form or fill it legibly in ink. If space provided is insufficient, please type or write the replies on a separate sheet giving appropriate question number and attach it to the form.
All the pages of the Application Form (Annexure-A) must be signed and required copy of documents should be self-attested with seal and signature. All original certificates / documents should be submitted for verification, if required by LIC of India.
Refer Annexure B for Terms and Conditions. Submit Annexure B duly signed with seal, along with Application [Annexure A] and other documents and Application Fee of Rs.118/ [DD / LIC Miscellaneous Receipt].

I/We _____ request Life Insurance Corporation of India, Northern Zonal Office, New Delhi to consider inclusion of my / our firm / company in the list of their approved Firm/Agency/Dealer and hereby assure to extend full co-operation to the satisfaction of Corporation upon being considered/ selected for empanelment.
I/We agree to abide by the rules and instructions of LIC of India given from time to time.

DECLARATION

1. I / We have read the 'Terms and Conditions" for empanelment listed by LIC of India in 'Annexure-B' and understand that if any false information is detected at a later date, any

future contract made between ourselves and Corporation, on the basis of the information given by me/ us, can be treated as invalid by the Corporation and I/We will be solely responsible for the consequences.

2. I/We understand and agree that mere submission of Application form for empanelment does not confer the right of Empanelment and agree that LIC of India reserves the right to decide / modify/ change / alter the empanelment criteria/process and/or accept or reject any application for empanelment or cancel the process of empanelment without assigning any reason thereof for which LIC of India will not be liable in any way whatsoever.

3. I/We understand that the application for empanelment or selection in empanelled list does not confer on me/us/our firm any right whatsoever in any aspect pertaining to the process of empanelment or initiation of purchase/calling for purchase/selection for purchase or any other decision as may be taken by LIC of India or its Officials.

4. I/We agree that the decision of the Corporation in selection of Firm/Agency/ Dealer will be final and binding on me/us. I/We agree that I/We have no objection if enquiries are made about the work performance with our clients and my/our premises/ workshop, shop etc. is inspected by the officials of the Corporation.

5. I/We understand that my/our application and declarations and documents submitted will form the basis of any decision of LIC of India regarding empanelment / selection for purchase etc and in case of any doubt/clarification/dispute etc., the decision of LIC of India or its Officials will be binding on me/us/our firm.

Dated at _____this ____ day of _____2022.

Signature with Seal:

Name:

Designation: