



Eastern Zonal Office, OS Deptt: 4th Floor, Hindusthan Bldg., 4, C.R. Avenue, Kolkata-700 072. Phone No. 2212-7618 ; Fax No. 22124971 ; E-mail ID : ez_os@licindia.com

NOTICE

Date: 16/10/2023

Supplementary Empanelment of vendors for Water Purifier for Purchase/AMC by Eastern Zonal Office, Kolkata

Applications are invited from interested firms for addition to our existing list of approved vendors, from Kolkata/Howrah only, **for Purchase/AMC of Water Purifiers** of Eastern Zonal Office, to be valid for three years. The Vendors desirous to be empanelled with us for **Water Purifier for Purchase/AMC servicing along with change of candle / iron guard (RO machine) / additional or defective parts**, if necessary, of our Eastern Zonal office/Guest Houses and staff quarters under its jurisdiction, fulfilling conditions as per Annexure 'A', may apply for getting empanelled on the panel of Eastern Zonal office.

Applications along with enclosures as per Annexure 'A' are to be sent at following address so as to reach us on or before 06/11/2023, 3.00 P.M.

**Assistant Secretary, Office Services Department
LIC of India, Eastern Zonal Office, Hindusthan Building,
4th floor, 4, C.R. Avenue, Kolkata-700072**

The cover should be superscribed as 'Application for Empanelment of Vendors for Purchase/AMC of Water Purifiers' and are to be dropped in Tender Box kept in Stores Section, 5th floor/ Sent by Courier / Post at the above mentioned address. Applications received after the due date and time shall not be entertained.

Zonal Manager

Note:

1. Firms who are already on the Zonal Office existing panel w.e.f. 01.04.2023, shall continue to be in the panel and need not apply for fresh empanelment
2. Firms / suppliers, who have been blacklisted/removed /cautioned earlier, should not apply. If they apply, their applications will not be considered.
3. In case of any dispute, the decision of the Zonal Manager shall be final and binding on all.
4. Vendors should have office in Kolkata/Howrah only.

(Annexure-A)
Life Insurance Corporation of India
Eastern Zonal Office

Application for Supplementary Empanelment of Vendors for AMC/Purchase of Water Purifier

Conditions for Empanelment:

1. We have three Types of Water Purifiers: (a) Purifiers manufactured by Eureka Forbes (b) Purifiers manufactured by Hindusthan Unilever Ltd. (c) Purifiers manufactured by Ace Hygiene Products Pvt. Ltd. Vendor should have license for servicing of water purifier of at least one of the above companies.

2 The Dealers should be in the profession of **Water Purifier Purchase/AMC** for at least 3 years before the date of applying for this Empanelment (Copy of Registration Certificate must be enclosed).

3 Annual turnover should be as per following table below:

(Attach P & L A/C & Balance sheet for last 3 years.)

Notice for Empanelment of Vendors for AMC/Purchase of Water Purifier	Minimum Annual Turnover Needed
	Rs. 5 lakh

4 The Dealer should be on the approved panel of at least 3 reputed Firms out of which at least two should be Public Sector Undertaking or Government Offices.

5 The Dealer should have registration with State & Local Authorities for undertaking the profession (Copies of State registration & license to be enclosed).

6 The Dealer should have at least 600 sq. feet area of operating office in Kolkata only.

7 The Application Fee for Empanelment is Rs.236/- (including GST @18%) for each category. Mode of payment of the fee can be (a) Depositing at ZO cash counter or (b) paying by Demand Draft in favour of 'LIC of India payable at Kolkata'. Application Fee is mandatory for all applicants irrespective of status of the Firm and it is non-refundable.

8 Integrity Pact (duly signed and witnessed) is to be submitted.

Details of the Dealer/Firm		
1	Name of the Dealer/ Firm (in Block Letters):	
2	Are you a service provider of water purifier of Eureka Forbes/Hindusthan Unilever/Ace Hygiene Products Pvt Ltd/All (Write clearly in right side and submit document)	
3	Date of Establishment/ Incorporation:	
4	Correspondence Address and Telephone No.	
5	Address of Head Office (if separate) and Telephone No.:	
6	E-mail ID:	
7	Status: Whether Partnership/ Private Limited Company/ Proprietorship Company etc.	
8	Names of the Partners/Directors:	
9	Name of Chief Executive (CEO) with his present address & telephone number:	
10	Name and Designation of Representative(s) who would be calling on us and attending to our jobs	
11	Bank Details	Bank Name:
		Bank Address:
		Bank Account No.:
		IFSC Code:
12	Is the firm registered under the factories Act?	
	If yes, state License No.	
	License valid up to (enclose a copy)	
13	PAN No.	

14	ESIS No	
15	GST Registration details	
16	EPF No.	
17	Whether holding certificate under Shops & Establishment Act, duly renewed. (Copy should be enclosed.)	
18	State the latest Income Tax Assessed year and the amount of Tax assessed (attested copies of last three years, IT Returns, Balance Sheets and Revenue A/c to be enclosed).	A.Y.
		Amount Tax assessed:
19	Turnover last year (CA Certificate to be enclosed):	2020-21
		2021-22
		2022-23
20	Office Area occupied by the Dealer (in square feet):	
21	Names of the offices of the LIC where you are presently empanelled (if any). (Enclose letters of Empanelment)	
22	Name, Addresses and Tel No of three of your most valued clients:	
23	Are you an MSME? (If yes, enclose certificate.)	
24	Do you agree to abide strictly by the Terms and Conditions of the Tenders and Contracts?	
25	Mention other specialties of your establishment, if any.	
<p>Note: Please type 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.</p>		

Date:

Signature and Name of the Authorized Person

Seal of the Firm

Mobile No:

CHECK LIST OF ENCLOSURES
(Advised to tick YES or NO)

S. No.	ITEM	PROOF ENCLOSED
1	MSME registration certificate valid as on date	YES/NO
2	Status Proprietary/Partnership/Private Limited Company/Public Limited Company	YES/NO
3	Is the firm registered under the factories Act? If so, state (a) License No	YES/NO
4	(b) Date of validity of License (copy of license to be enclosed)	YES/NO
5	PAN No.	YES/NO
6	ESI Registration No, if any	YES/NO
7	EPF Registration No. if any	YES/NO
8	G.S.T No.	YES/NO
9	Whether holding certificate under shops & establishment act, if "YES" duly renewed copy should be enclosed	YES/NO
10	Latest Income Tax Assessed year and the amount of tax assessed (Attested copies of last 3 years, IT Returns, Balance Sheets & Revenue A/c to be enclosed)	YES/NO
11	Annual turnover [CA certified copies to be enclosed]	YES/NO
12	If your firm is empanelled with any of office of LIC of India or any other PSU (Central) please give name, address & since when you are empanelled with them	YES/NO
13	Name, Addresses and Telephone Nos of some of your most valued Clients (Separate list may be attached)	YES/NO
14	Supporting documents to prove the service provider of the company for which he is applying	YES/NO