

LIFE INSURANCE CORPORATION OF INDIA-ERNAKULAM DIVISION

 $\frac{\text{QUESTIONNAIRE FOR PRE-PRINTED COMPUTER CONTINUOUS STATIONERY/FORMS/ENVELOPES}}{\text{PART I : GENERAL INFORMATION}}$

Name of the Press (In Block Letters)	:
Date of Establishment / Incorporation	:
3) Address with Telephone No., Fax No. and E-Mail ID.	:
4) Address of Office (If Separate) and Telephone No.	:
5) Status: Whether Sole Proprietorship/ Partnership/ Private Limited Company / Public Limited Company	:
6) Names of the Partners /Directors	:
7) Name of Chief Executive with his present addresses & Telephone No's	:
8) Name of Representative (s) indicating Designation who would be calling on us and attending to our jobs and his/their mobile nos.	:
9) Name of Bankers with addresses & telephone nos.	:
10) Is the press registered Under the Factories Act? If so, state - (a) Licence No. (b) Date of Last renewal of licence Copy of the licence to be enclosed (c) PAN No. (d) ESIS No., If any (e) EPF Registration No. if any (f) GST NO.	: : : : : : : : :
11) Whether holding certificate under shops & establishment act, duly renewed.(Copy should be enclosed)	:
12) State the latest Income Tax Assessed year and the amount of Tax assessed copies of last 3 years (IT returns, Balance Sheets & Revenue A to be enclosed)	: 2020-2021 2021-2022 /c 2022-2023
13) Are you having facility and infrastructure for printing the required forms, books et in Hindi and English?	

14)	Are you agreeable to make deliveries to Corporation's offices in Madurai Divisional area when so direct	: ted?	
15)	Are you agreeable to abide strictly by the Terms and Conditions of the Tenders and Contracts. (copies annexed)	:	
16)	Area occupied by the press (Building only	y):	
17)	Total Numbers Employees :		Permanent Temporary
18)	Number of shifts you work normally	:	
19)	Names of the offices of the LIC whose printing work you may have done during the last 3 years. Mention only those offic for whom you have done sizable jobs or have done constant work. (Details of jobs done to be given)		
20)	Name, Addresses and Telephone Nos. of atleast three of your most valued clier	nts :	
21)	Approximate Sales per year	:	
22)	Do you carry stocks of papers and any of material. If so, what stocks do you generally hold		
23)	State the nature of printing jobs underta by you. (Full details to be given)	ken	:
24)	Do you undertake manufacture of a) Envelopes b) Office Files c) Stickers	:	
-	Mention any other specialties of your Est etc.	ablish	nment :Like Registration in GeM Portal
Not	e: Please type this form or fill it legibly in	ı 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.

PART II: TECHNICAL INFORMATION

- Particulars of composing facilities
 D.T.P.Systems

Make	Pa	ckages	Language	S Other Features if any
b) Other com	posing fac	ilities such as hand	composing	I
•		ng machines being		
2) D : I: M				
 Printing Ma a) Offset Mac 				
Make	Size	Colour	Speed	Other Features if any
			-	
b) Letter pres	s Machina			
Make	Size	Speed	Ot	her Features if any
	0.20			,
			•	
c) Screen Prii	nting Facili	ty - whether availa	ble	
•	•	•		
d) Pre-printed	•	ty - whether availa us stationery mach Colour		Other Features if any
d) Pre-printed	d continuo	us stationery mach	ine	Other Features if any
d) Pre-printed	d continuo	us stationery mach	ine	Other Features if any
d) Pre-printed Make	d continuor	us stationery mach Colour	Speed	Other Features if any
d) Pre-printed Make 4) Particulars	d continuor Size of Positive	colour es and Plate making	Speed	Other Features if any
d) Pre-printed Make 4) Particulars 5) Binding an	d continuou Size of Positive d Finishing	colour es and Plate making	Speed	Other Features if any
d) Pre-printed Make 4) Particulars 5) Binding an a) Cutting Ma	of Positive d Finishing	es and Plate making	Speed g facility	
d) Pre-printed Make 4) Particulars	of Positive d Finishing	colour es and Plate making	Speed g facility	Other Features if any er Features if any
d) Pre-printed Make 4) Particulars 5) Binding an a) Cutting Ma	of Positive d Finishing	es and Plate making	Speed g facility	
d) Pre-printed Make 4) Particulars 5) Binding an Cutting Make	of Positive d Finishing schines	es and Plate making	Speed g facility	
d) Pre-printed Make 4) Particulars 5) Binding an a) Cutting Ma	of Positive d Finishing schines	es and Plate making ize Blade ng machines	Speed g facility	

- 6) Have you got photo-typesetting machine if so; please furnish full details of type faces
- 7) If any of the equipments mentioned above is under lease, loan or hire purchase agreement should be furnished.
- 8) Please furnish details particulars of any other agreements you may have entered into which are subsisting and are likely to have a bearing on the jobs, which may be entrusted to you.

I/WE re	equest	Life
Insurance Corporation of India, Divisional Office, ERNAKULAM to consider my/our firm in the list of their approved printers and agree to give full satisfa Corporation in the event of their doing so.		
Dated : Signature with Sea	 al	

Note:

- 01. 1.The completed applications along with relevant supporting documents, if any, in a sealed cover superscribing Stationery "Application for Empanelment is to be submitted to "The MANAGER (E & O.S), L.I.C of India, Divisional Office, ,"JEEVAN PRAKASH" MG ROAD, ERNAKULAM- 682011 on or before 28.02.2024 (Wednesday) up to 3.00 PM
- 02. 2.The Corporation reserves the right to include or not the name of the applicant in the panel at its absolute discretion without assigning any reason.
- 3.The Corporation reserves the right to cancel the name of the Printer from its approved lists at its absolute discretion without assigning any reason.