



Delhi Division II Scope Minar 9th Floor, Core-I & Core-II, Laxmi Nagar Delhi -92

Empanelment of Vendors/Supplier/Printer/Manufacturers

Applications are invited from reputed/manufacturers/printers/vendors/service providers for empanelment for following items:

CATEGORY S.NO.	CATEGORY	Min. Turn over in Lacs (During last 3 Years)
A-1	Table & Office stationery such as pens, files, photocopier paper, Punching Machines, Staplers, dusters, towels etc.	10.00
A-2.	Computer continuous stationery.	30.00
A-3.	(i) Computer Consumables .Such as ink Cartridges, CD'S, Pen Drives etc (ii) Repair of Printer head, Drums etc., Refilling of Toner Cartridges, Printer Ribbons etc.	10.00
A-4	Offset/ Screen printers for printing stationary of forms/ledgers, visiting cards etc. with or without papers.	10.00
A-5	Manufacturer/Supplier of Cloth/Kraft Envelops./Ordinary Envelops, policy docketts	10.00
A-6	Supply/Maintenance/Serviceing of telecommunication equipments such as Fax, EPABX systems ,telephone instruments etc	5.00
A-7	Courier Service all over India.	10.00
A-8	Supply/Maintenance/Repair of Note Counting Machine, fake Note Detecting Machine.	10.00
A-9	Supply / Maintenance/Serviceing of Cash Box , Safe etc.	15.00
A-10	Supply / Maintenance/Serviceing of Safety & Fire Fighting Equipment, Fire Alarms systems.	10.00

A-11	Hiring of Gen Set	15.00
A-12	Supply / Maintenance/ Servicing of Water Coolers, Refrigerators, A.C.	25.00
A-13	Supply / Maintenance/ Servicing of Purifiers & R.O. Systems, Dispenser	15.00
A-14	Wooden/Steel/Modular furniture & Fixture manufacturer/supplier.	25.00
A-15	Office upkeep services such as cleaning/ mopping etc.	15.00
A-16	Security Services	50.00
A-17	Signage, Flex, Front lit and Back lit Boards	25.00
A-18	Supply of electrical items viz. tubes, chokes, CFL, starters, holders, hot-case etc.	5.00
A-19	Supply/manufacturing of Desert Coolers/Air Cooler.	5.00
A-20	Hiring of Photocopiers, colour & digital Photostat	5.00
(B)	Categories for which no Turn over is Required	
B-1	Scrap Dealers	0.00
B-2	Binder Services	0.00
B-3	Canteen/Catering Services.	0.00
B-4	Supply of Crockery.	0.00
B-5	Repair/Polish/Dry cleaning of Sofa set, Furniture, Verticals Blind.	0.00
B-6	Pest control services	0.00

1. 1.The separate forms(Annexure-A) are required to be filled up for each category which may be downloaded from our website **www.licindia.com**. Application for empanelment duly completed should be submitted to **O.S. Department LIC of India, Divisional Office, “Scope Minar”,Laxmi Nagar,Delhi-92** in a closed envelope super scribed as **“Application for Empanelment of Suppliers/Vendors/Category Sr.No. ... (Name of category)”** along with **non-refundable** application fee of **Rs. 100/-** in the form of **demand draft in favour of Life Insurance Corporation of India** payable at Delhi or can be deposited at our cash counter in cash during cash hours. **Last date for receipt of application forms duly completed is 23.01.2012 up to 3.00pm.**
2. The applications in questionnaire form (Annex-A) along with the enclosure i.e. necessary certificates in evidence of the facts mention in the forms are to be sent at the above mentioned address on or before 23.01.2012 by 3.00. p.m. The Corporation bears no responsibility for applications received after due date & are liable to be rejected.
3. The firms/suppliers who are already on our panel are required to apply for fresh empanelment, if interested.
4. Firms/suppliers who have been black listed / removed earlier, should not apply. **If they apply, their applications will not be considered.**
5. **Mere submission of Application for empanelment does not mean the right of empanelment.** Life Insurance Corporation of India reserves its right to reject, accept any or all applications or cancel the process of empanelment without assigning any reason thereof for which Life Insurance Corporation of India shall neither be liable nor obligatory to inform the applicant the grounds of any such action.
6. Applications incomplete in any respect will not be entertained and are liable to be rejected.

Sr. Divisional Manager

APPLICATION FORM FOR EMPANELMENT OF FIRM

S.NO.OF CATEGORY :

NAME OF CATEGORY:

(Separate application is to be filled up for each category)

Conditions for empanelment:

- 1) The applicant firm/supplier should be in profession for at least 3 years as described in application form. (Copy of proof must be enclosed)
- 2) The firm should be on the approved panel of at least 3 reputed Firms.
- 3) The Firm/supplier should have registration with state & local authorities for undertaking the profession (copies of proof to be enclosed)
- 4) Certificate of Satisfactory completion of work/supply issued by concerned departments/Authority/ reputed firm must be attached as proof
- 5) The firm/supplier should keep sufficient stock in hand so as to comply with the urgent needs without delay.

APPLICATION FOR FIRM/SUPPLIER/SERVICE PROVIDER

PART 1: GENERAL INFORMATION

S.NO.	INFORMATION SOUGHT	INFORMATION PROVIDED
1	Name of the Firm (In Block Letters)	
2	Date of Establishment/Incorporation	
3	Correspondence address and Telephone No.	
4	Address of Head Office (if Separate) and Telephone No.	

5	Status Proprietary/Partnership limited company/Public Limited Company		
6	Names of the Partners/Directors		
7	Name of Chief Executive with his Present addresses and Telephone Nos.		
8	Name of Representative (s) with Designation who would be calling on us and attending to our jobs		
9	Name of bankers with addresses & Telephone Nos. with whom you maintain the bank accounts.		
10	Is the firm is registered under the Factories Act? If so, state (a) License No. (b) Date of renewal of License (copy of license to be enclosed) (c) Pan No. (d) ESIS No. if any (e) EPF registration No. if any (f) Sales Tax no. (g) Service Tax No.		
11	Whether holding certificate under shops & establishment act, If "YES" 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/C to be enclosed)		
13	Turnover for last three years	FY 2010-2011	
		FY 2009-2010	

		FY 2008-2009	
14	Are you agreeable to make deliveries to Corporation's offices under Delhi DO-II, and its branches situated in Delhi and Haryana e.g. Faridabad, Palwal & Hodal or other LIC offices outside Delhi when so directed?		
15	Are you agreeable to abide strictly by the Terms and Conditions of the Tenders and Contracts		
16	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.		
17	Name, Addresses and Telephone Nos. of some of your most valued Clients (Separate list may be attached)		
18	Approximate value of your output per year.		
19	Any other information/Extra Ordinary Performance of your Establishment, you want to provide.		

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.

I/WE _____

request Life Insurance Corporation of India, Divisional Office – II, Delhi to Consider/ Inclusion of my/our name in the list of their approved firms/suppliers. We agree to give full satisfaction to the Corporation in the event of their doing so.

Dated at this day of **2012**

Signature with seal

Name:

Designation:

Note: The Corporation reserves the right to cancel the name of the supplier/firm from its approved lists at this absolute discretion without assigning any reason.

DECLARATION

1. I/We have read the instructions appended to the Annexure "A" and I/We understand that if any false information is revealed at a later date, any contract made between ourselves and the corporation, on the basis of the information given by me/us can be treated as invalid at the sole discretion of the corporation and I/We will be solely responsible for the consequences.
2. I/We agree that the decision of the corporation in selection of Manufacturer/printers/vendors/contractor/service providers will be final and binding on me/us.
3. All the information furnished by me hereunder is correct to the best of my/our knowledge and belief.
4. I/We agree that I/We have no objection if inspection of my/our premises/workshop, shop etc.is done by the officials of the corporation.

Signature

Name & Designation

Seal of the firm/company

Place

date