



LIFE INSURANCE CORPORATION OF INDIA-TIRUNELVELI DIVISION
QUESTIONNAIRE FOR PRE PRINTED COMPUTER CONTINUOUS STATIONERY

PART I GENERAL INFORMATION

- 1) Name of the Press :
(In Block Letters)
-
- 2) 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) LicenceNo. :
(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 :2021-2022
Assessed year and the amount of
Tax assessed copies of last 3years 2022-2023
(ITreturns,BalanceSheets & Revenue A/c
Tobe enclosed) 2023-2024
-
- 13) Are you having facility and infrastructure :
for printing the required forms,books etc.,
in Hindi and English?
-

- 14) Are you agreeable to make :
deliveries to Corporation's offices
in Tirunelveli Divisional area when so directed?
-
- 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):
-
- 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 3years. Mention only those offices 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 clients:
-
- 21) Approximate Sales per year :
-
- 22) Do you carry stocks of papers and any other:
material.
If so, what stocks do you generally hold?
-
- 23) State the nature of printing jobs undertaken:
by you. (Full details to be given)
-
- 24) Do you undertake manufacture of :
a) Envelopes
b) OfficeFiles
c) Stickers
-
- 25) Mention any other specialties of your Establishment : Like Registration in GeM Portal
etc.

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.

PART II: TECHNICAL INFORMATION

- 1) Particulars of composing facilities
a) D.T.P. Systems

| Make | Packages | Languages | Other Features if any |
|------|----------|-----------|-----------------------|
| | | | |
| | | | |

b) Other composing facilities such as hand composing

2) Particulars of Scanning machines being used

3) Printing Machines

a) Offset Machine

| Make | Size | Colour | Speed | Other Features if any |
|------|------|--------|-------|-----------------------|
| | | | | |
| | | | | |

b) Letter press Machines

| Make | Size | Speed | Other Features if any |
|------|------|-------|-----------------------|
| | | | |
| | | | |

c) Screen Printing Facility-whether available

d) Pre-printed continuous stationery machine

| Make | Size | Colour | Speed | Other Features if any |
|------|------|--------|-------|-----------------------|
| | | | | |
| | | | | |

4) Particulars of Positives and Plate making facility

5) Binding and Finishing

a) Cutting Machines

| Make | Size Blade | Other Features if any |
|------|------------|-----------------------|
| | | |
| | | |

b) Particulars of punching machines

c) Particulars of perforating Machines

d) Particulars of gilding department

6) Have you got photo-type setting 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 _____ request Life Insurance Corporation of India, Divisional Office, Tirunelveli to consider inclusion of my/our firm in the list of their approved printers and agree to give full satisfaction to the Corporation in the event of their doing so.

Dated: _____

Signature with Seal

Note:

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, Tirunelveli-627002. on or before 29.04.2024.

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.