



LIC

भारतीय जीवन बीमा निगम
LIFE INSURANCE CORPORATION OF INDIA

भारतीय जीवन बीमा निगम मण्डल कार्यालय, मसूदाबाद जी.टी. रोड अलीगढ़
दूरभाष 0571-2420056, 2420070

दिनांक-19.10.2023

"फर्मों के पंजीकरण / सूचीबद्धता (Empanelment) हेतु सूचना"

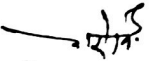
भारतीय जीवन बीमा निगम मण्डल कार्यालय, अलीगढ़ द्वारा 1 कम्प्यूटर कंटेनर/अस स्टेशनरी 2 कम्प्यूटर कन्जुमेबिल 3. पालिसी डाकेट्स 4. लिफाफे 5. टेबिल स्टेशनरी 6 प्रिन्ट हेड रिपेयरिंग 7. फ्लेट फाइल्स 8 कागज सहित विभिन्न प्रकार के प्रपत्रों / रजिस्टर आदि का मुद्रण हेतु इन कार्यों में संलग्न प्रतिष्ठित आपूर्तिकर्ता फर्मों / कम्पनी / अधिकृत डीलरों से आवेदन पत्र सूचीबद्धता (Empanelment) हेतु आमंत्रित किये जाते हैं। आवेदन पत्र मण्डल कार्यालय से किसी भी कार्य दिवस में प्रातः 10:00 बजे से शाम 3:00 बजे तक रूपये 118.00 (100.00 18.00 जी०एस०टी०) आवेदन शुल्क लेखा संख्या (114018) में जमा करके प्राप्त किये जा सकते हैं। आवेदन पत्र निगम की वेबसाइट [www.licindia.in\(link tenders\)](http://www.licindia.in(link tenders)) से भी डाउनलोड किया जा सकता है। वेबसाइट से डाउनलोड किये गये फार्म की दशा में रूपये 118.00 का डिमाण्ड ड्राफ्ट जोकि "Life Insurance Corporation of India" के पक्ष में हो तथा Payable at Aligarh हो संलग्न करें। इच्छुक आवेदक अपने आवेदन बन्द लिफाफे में निम्नलिखित सूचनाओं एवम् प्रमाणकों के साथ निम्न पते पर इस प्रकार प्रेषित करें कि आवेदन दिनांक 31.10.2023 सांय 3:00 बजे तक अवश्य प्राप्त हो जाये। लिफाफे के ऊपर लिखें "पैनल में पंजीकरण हेतु आवेदन कार्य का प्रकार-

पता:- मण्डलीय स्टोर कमेटी, भारतीय जीवन बीमा निगम, "जीवन प्रकाश" मण्डल कार्यालय, मसूदाबाद, जी टी रोड, अलीगढ़-202001

आवेदन में निर्धारित आवेदन प्रपत्र एवम् निम्न वांछित सूचनायें एवम् प्रमाणक संलग्न करे-

1. आवेदन कर्ता का पूरा नाम, पता, दूरभाष एवम् मोबाइल नम्बर तथा Email ID..
2. GST No. PAN No.
3. कागज निर्माता कम्पनी के डीलर / डिस्ट्रीब्यूटर का प्रमाण पत्र
4. मुद्रण कारखाने का विवरण- मशीन / कर्मचारी आदि की संख्या सहित
5. निगम के अन्य मण्डलों / शासकीय / अर्द्ध शासकीय / प्रतिष्ठित संस्थानों में पंजीयन प्रमाण पत्र एवम्
6. फर्म का गत तीन वर्षों का टर्नओवर / इन्कम टैक्स एसेसमेन्ट का प्रमाण पत्र संलग्न करना अनिवार्य है।

वर्तमान में पंजीकृत फर्मों को पुनः पंजीकरण कराना होगा यदि पुनः पंजीकरण नहीं कराया जाता है तो उनका पूर्व का पंजीकरण निष्प्रभावी हो जायेगा। प्राप्त आवेदनों की जाँच, फर्मों के निरीक्षण आदि के पश्चात ही आवेदनों पर विचार किया जायेगा। अपूर्ण आवेदनों को निरस्त किया जा सकता है। विलम्ब से प्राप्त आवेदनों पर कोई विचार नहीं किया जायेगा। आवश्यकता पड़ने पर उक्त के अतिरिक्त सूचनायें भी माँगी जा सकती हैं। विक्रय / वाणिज्य कर/ जी०एस०टी० विभाग से यदि किसी औपचारिकता की पूर्ति की आवश्यकता हो तो इसके आपूर्तिकर्ता फर्म स्वयं व्यवस्था करेगी। भारतीय जीवन बीमा निगम को समस्त आवेदनों सम्पूर्ण आवेदन प्रक्रिया अथवा किसी भी आवेदन को बिना कारण बताये निरस्त करने एवं शर्तों में संशोधन करने का अधिकार सुरक्षित है।


वरिष्ठ मण्डल प्रबन्धक

मण्डल कार्यालय : "जीवन प्रकाश", मसूदाबाद, जी. टी. रोड, अलीगढ़-202 001

दूरभाष : 0571-2420074, 2420051, 2420061, 2420055, 2420066, 2420060, 2420073, 2420056, 2420069, 2420068, 2420071
2420065, 2420070, फ़ैक्स : 0571-2420052, तार : बीमामण्डल

Divisional Office : "JEEVAN PRAKASH", Masoodabad, G.T. Road, ALIGARH-202 001

Phone : 0571-2420074, 2420051, 2420061, 2420055, 2420066, 2420060, 2420073, 2420056, 2420069, 2420068, 2420071
2420065, 2420070, Fax : 0571-2420052, Gram : BIMAMANDAL



Ref: 05- Aligarh EMPANELMENT 2023-24

Dated 19.10.2023

TERMS AND CONDITIONS

Life Insurance Corporation of India Aligarh invites applications for empanelment/enlistment of Vendors/ Distributors/Suppliers of various equipments/stationery for three years from Suppliers/Vendors having valid registration for supply/services of the said items to Aligarh Divisional Office mentioned in Notice for Empanelment on or before **31.10.2023** up to 3.00 pm in a closed envelope super scribing "Application for Empanelment.. (Category for which you are applying) addressed to

Chairman Store Committee,
Divisional Office Jeevan Prakash
Masoodabad, G.T.Road,
Aligarh-202001

Basic eligibility requirement for the vendor/Firm:

1. Name of Applicant, address and mobile no with Email Id.
2. GST AND PAN NO..
3. Certificate of Dealer/Distributor of paper company.
4. Details of Machine/s and Number of Employees of printing Firm.
5. Certificate of Registration in any Division/government/semi government /repudiated institutions.
6. It is mandatory to enclose the certificate of Turnover of last three years and Income tax assessment also of the Firm.

Applications with enclosures should be signed by the authorized person and his/her name and status should be indicated below with his/her signature along with official seal/stamping of the firm.

Applications received after the due date and time (including postal delay) will not be entertained and therefore deemed to be rejected.

Applications submitted with enclosures will be evaluated/ scrutinized by the competent committee/ authority and short listing will be done after the recommendations made by the said committee/authority. At any point of time, if any of the documents furnished by the Vendors/ Distributors/ Suppliers are found to be false/ incorrect, it would be deemed to be breach of terms of contract making the firm concerned liable for legal action besides termination of empanelment. .

• Incomplete and conditional applications will be rejected.

. All matters and disputes related to supply are subject to the legal Jurisdiction of Hon'ble Courts situated in Aligarh.

Competent authority reserves the right to modify/ relax any conditions at any point of time.


Sr. Divisional Manager

मण्डल कार्यालय : 'जीवन प्रकाश, मसूदाबाद, जी. टी. रोड, अलीगढ़-202 001

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2420065, 2420070, फ़ैक्स : 0571-2420052, तार : बीमामण्डल

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भारतीय जीवन बीमा निगम
LIFE INSURANCE CORPORATION OF INDIA

DIVISIONAL OFFICE, Masoodabad, G.T. Road, ALIGARH

Phone : 0571 – 2420056, 2420070

APPLICATION FORM FOR EMPANELMENT OF FIRM

(With reference to our advertisement published in

- Item for which empanelment is being sought :
1. **Name and Address of the Firm** :
(Proprietary/Partnership/Pvt. Ltd./Ltd. Co.)
2. **Date of Establishment of the Firm-** :
3. **Whether registered with GST Authorities** :
(if yes , then submit your G.S.T. No.)
4. **Whether Empanelled with L.I.C. elsewhere** :
(If yes, then furnish full details)
5. **Annual Turnover of the Firm / Company** :
(Submit last three yrs. ITR)
6. **P.A.N.** :
7. **List of clients/ Business Associate** :
(Having good reputation)
8. **Details of specialization field of the company/Firm** :
9. **Details of machines & necessary infrastructure** :
(to supply these items)

NOTE: Firms who have been black listed/removed earlier should not apply.if applied,their applications will not be considered or may be terminated at any time after empanelment without assigning any reason.

Date :

Encls. :

Signature

Name of Owner/Prop.

Seal of the Firm/Company

QUESTIONNAIRE FOR PRINTING PRESS/FIRMS

Part I : GENERAL INFORMATION

1. Name of the Press / Firm :
(in block letter)
2. Date of Establishment / Incorporation :
3. Address & Telephone No. and Email ID. :
4. Address & Telephone No. of Office :
(if separate)
5. Status : Wether Partnership/
Private/Public Limited Company :
6. Names of the Partners / Directors :
7. Names of Chief Executive :
with his/her present address
& Tel. No.
8. Name of Representative(s) :
indicating Designation who would
be calling on us and attending to
our jobs
9. Name of Bankers :
(with address & telephone Nos.)
10. Is the Press/ Firm 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 :
d) ESIS No., if any :
e) EPF Registration No. if any :
f) G.S.T. No. :
11. Whether holding certificate under :
shop & 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 Return,
Balance Sheets & Revenue A/c
to be enclosed)
13. How do you propose to compensate the :
loss to the Corporation arising out of
theft, Fire or otherwise in respect of
Paper Material supplied to you by LIC

- 14. Are you agreeable to make deliveries within and out of Aligarh when so directed? :
- 15. Are you agreeable to abide strictly by the terms and conditions of the tenders & contracts? :
- 16. Area Occupied by the Press/Factory/Firm :
- 17. Total Number of Employees :

Permanent	Temporary	Skilled	Unskilled
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- 18. Number of shift you work normally :
- 19. Timing of shift :
- 20. Weekly holiday :
- 21. Name of the Office of the LIC whose Printing/work you may have done during the last 3 years. Mention only those offices for whom you have done sizable jobs or have done constant work. (Details of jobs done to be given) :
- 22. Name, Address and Telephone Nos. of some of your most valued Clients. :
- 23. Approximate Value of your output /year :
- 24. Do you carry stocks of papers and any other material. If so, what stocks do you generally hold?
- 25. State the nature of printing jobs under taken by you. (Full details to be given) :
- 26. Are you agreeable to enter into a rate contract or running contract or Fixed Quantity Contract? :
- 27. Mention any other specialities of your Establishment :

Part II : TECHNICAL INFORMATION

1. Particulars of composing facilities :
 - a) DTP System :
(make packages Languages other features etc)
 - b) Other composing facilities :
(such as hand composing)
2. Particulars of scanning machines being used :
3. Printing Machines :
 - a) Offset Machine :
(Make size color speed other features if any)
 - b) Letter Press machine :
(Make size color speed other features if any)
 - c) Screen Printing facility :
 - d) Pre Printed continuous stationery machine :
(make size color speed other features if any)
4. Particulars of positive and plate making facility :
5. Binding and finishing :
6. Cutting Machine :
 - a) Make size of blade Hand/Power driver :
 - b) Particulars of punching Machines :
 - c) Particulars of perforating Machine :
 - d) Particulars of binding department :
7. Have you got photo typesetting machine :
if so, please furnish full details of type faces.
8. If any of the equipments mentioned above is :
under lease, loan or hire purchase agreement
Details should be furnished.
9. Please furnish details particulars of any other :
agreements you may have entered into which
are subsisting and are likely have it bearing on
the jobs, which may be entered to you.

I/We request Life Insurance Corporation of India, Divisional Office, Aligarh to consider inclusion of my / our name in the list of the approved printers/Suppliers and agree to give full satisfaction to the Corporation in the event of the doing so.

Signature :

Date :

Name & Designation :

Seal of the Firm :