



O.S.DEPARTMENT  
7<sup>TH</sup> Floor, Jeevan Prakash Building,  
Tilak Road,  
Ahmedabad::380001,  
Phone No: 079-25511768,

## **EMPANELMENT NOTICE- 2024**

Applications are invited from the vendors/firms (Including existing empanelled vendors under Ahmedabad Division for below mentioned Categories) for the empanelment for various jobs as mentioned below for **DIVISIONAL OFFICE, AHMEDABAD.**

### **Category of Vendor/Firm for supply of:**

#### **(A) FURNITURE AND FIXTURES:**

- 01) Furniture & Fittings (Wooden & Iron) Safes, Fire/Water proof storage equipments, Policy Racks, All Types of office furniture (Table/Chair/Storage Rack etc.) & services of it separately.
- 02) Purchase of Water cooler, Water Purifiers, Air coolers,, R.O. Systems
- 03) Telecommunication equipments such as EPABX, Fax, Intercom etc.
- 04) Purchase of Note Counting Machine, Fake note detectors
- 05) Flex Board, Foam Sheet Board, Employees' name plates, Information display board etc.
- 06) Purchase of electrical items like all type of fans, Emergency light, Wall clock etc.
- 07) Purchase/Maintenance of All Types of curtains.
- 08) A M C for Water coolers, Air coolers, Water purifiers/ R.O. Systems /Aqua guard, Note counting Machine, EPABX, Fake Note Detectors, Fax Machines etc.
- 09) Security Systems, CCTV cameras procurements and its maintenance
- 10) Pest control, Termite, Rat Control etc. services.(10A) Destruction of old & unserviceable items.

#### **(B) PRINTING AND STATIONERY:**

- 11) Printing & Stationery such as Forms, Paper etc.
- 12) Table and Office Stationery
- 13) Computer Continuous Stationery – Printed/Blank
- 14) Envelopes Suppliers, PVC/Plastic Wallet, Folder Suppliers
- 15) IT Consumables–Computer peripherals such as cartridges, printer ribbons, print heads, Lap top Batteries/charger etc.
- 16) Printing of Identity Cards for our Employees
- 17) Rubber stamps/Computer Nylo stamps, Binding work

#### **(C) ESTATE RELATED MATTERS:**

- 18) Housekeeping & Maintenance services for Office Premises/Guest House/Drainage cleaning-services/Lift man services.
- 19) Waste paper purchase with lifting services
- 20) News paper Advertising Agencies
- 21) Supply of cleaning material
- 22) Laundry services
- 23) Drinking water suppliers
- 24) Security Services
- 25) Fire extinguishers (All type) including refilling
- 26) Cleaning of underground and over head water tanks
- 27) Gardening/mali etc.

#### **(D) OTHER ITEMS:**

- 28) Railway and Air Ticket Booking
- 29) Courier Service
- 30).Services for Network Cabling

The vendors/firms desirous to be empanelled with us for above said jobs (**Category No. 1 to 6,11 to 15 and 24,25,27 and 28**) and fulfilling conditions as per Annexure” A “enclosed, may apply for empanelment at **DIVISIONAL OFFICE, AHMEDABAD**. For jobs undertaken at division office Ahmedabad for **Category No.7, 8,10,16 to 23, 26,29 and 30** Form is to be used Annexure – B(PART-III)

For clarity, it should be clearly understood that :-

- 1) Questionnaire for empanelment under Part-I General Information is mandatory for all categories (from 1 to 30)
- 2) Those who wish to be empanelled for categories falling under ‘Printing & Stationery’ are required to fill Part-II ‘Technical Information’ along with above mentioned questionnaire (PART-I)
- 3) Those who wish to be empanelled for Group under **Category No.7, 8,10,16 to 23, 26,29 and 30** are required to fill Annexure- B (PART-III) along with above mentioned questionnaire (PART-I)

The applications in questionnaire form along with the enclosures i.e. necessary certificates in evidence for the facts mentioned in the forms are to be sent at the following address so as to reach us on or **before 24/01/2024 UPTO 4:30 p.m.**

**Sr. Divisional Manager**  
**L I C of India, 7<sup>th</sup> Floor, O. S. Department,**  
**“JEEVAN PRAKASH” Bldg.**  
**Tilak Marg, AHMEDABAD – 380001.**

The cover should be super scribed as “Application for empanelment under \_\_\_\_\_ (Mention category listed above) with Category No. \_\_\_\_\_. Application form fee Rs. 590/- to be paid by Cash/Demand Draft favoring “LIC OF India” payable at Ahmedabad.

**Manager (OS)**

- NOTE**
- 1) Vendors/suppliers who are on our existing panel should also apply for fresh empanelment.
  - 2) Vendors/suppliers have been blacklisted/ removed earlier, should not apply. If applied, their application will not be considered
  - 3) The Corporation reserves the right to include/exclude/cancel the name of the Vendors/Suppliers from its approved list at its absolute discretion without assigning any reason.



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e.mail : os.ahmedabad@licindia.com

**Questionnaire for empanelment under**  
**PART – I: GENERAL INFORMATION**

(For all categories )

- 1) Name of the Dealers :  
(In Block Letters)  
\_\_\_\_\_
- 2) Date of Establishment / Incorporation:  
(Enclose certificate)  
\_\_\_\_\_
- 3) Address:-  
Telephone No:- :  
Mob.No.:-  
E-mail Id:-  
\_\_\_\_\_
- 4) Address of Head Office (If Separate) :  
And Telephone No. /Mobile No/  
Fax No./E-mail Id  
\_\_\_\_\_
- 5) Nature of Ownership Status  
Whether Partnership/ :  
Private Limited Company /  
Public Limited Company/  
\_\_\_\_\_
- 6) Names of the Proprietor/Partners/  
Directors :  
& E-mail Id.  
\_\_\_\_\_
- 7) Name of Chief Executive with :  
His present addresses and  
Telephone Nos. /Mobile No.  
& E-mail Id.  
\_\_\_\_\_
- 8) Name of Representative (s) :  
Indicating Designation who would  
Be calling on us and attending to  
\_\_\_\_\_

Our jobs and his/her Mob  
No./ E-mail Id.

- 
- 9) Name of Bankers with :  
Addresses & telephone nos.  
A/C No.:-  
Type of A/cs:-  
IFSC CODE:-  
(Please attaché cancelled Cheque)
- 
- 10) Is the press registered under the  
Factories Act? If so, state –  
(a) License No. :  
(b) Date of Last renewal of license :  
Copy of the license to be enclosed  
(c) GST NO. :  
(d) PAN NO. :  
(e) ESIS NO. if any. :  
(f) EPF Registration No. if any. :  
(g) Labour Licence No.&Validity :  
(Photocopies of each of above are to be enclosed) :
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- 11) Whether holding certificate under  
Shops & establishment act, duly  
Renewed. Copy should be enclosed.
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- 12) State the latest Income Tax details.  
Assessed year and the amount of  
Tax assessed Copies of last 3 years, IT Returns, Balance Sheets ,C A Certificate,  
Revenue A/c to be enclosed.  
Please mention your PAN No.  
(Copy to be enclosed)
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- 13) Turnover of last three years 2022-23, 2021-22,2020-21
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- 14) Are you agreeable to make free  
Deliveries to our DIVISIONAL OFFICE, AHMEDABAD?
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- 15) Are you agreeable to submit samples Whenever called for?

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16) Are you agreeable to enter into a  
Rate contract or running contract or  
Fixed quantity contract?

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17) Are you agreeable to abide  
Strictly by the Terms and Conditions  
Of the Tenders and Contracts as and when  
Laid down by the corporation.

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18) Area occupied by the Shop/Press:

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19) Total Number of Employees:  
Permanent \_\_\_\_\_ Temporary \_\_\_\_\_  
Skilled \_\_\_\_\_ Unskilled \_\_\_\_\_

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20) Number of shifts you work normally :  
Timing of shifts :

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21) Weekly Holidays:

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22) Name, Addresses and Telephone Nos.  
Of Three of your most valued clients:  
(Separate list may be attached)

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23) If your firm is already empanelled with any  
office of LIC Or any other PSUs.:  
(Details of jobs given by LIC and completed by you, enclose certificates)

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24) Whether firm is registered under NSIC/MSME  
(If yes , enclose copy of same)

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25) Do you carry stocks of papers and any other  
Material ? If so, what stocks do you generally hold?

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26) Do you possess certificate of authorization from manufactures of  
Cartridges etc. If yes, please provide copy of the same.

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27) Mention any other specialties of your Establishment:

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28) Is the firm owned by SC/ST  
Entrepreneurs, If yes, Please Enclose copy

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I/WE \_\_\_\_\_ request **Life Insurance Corporation of India, AHMEDABAD DIVISIONAL OFFICE**, to consider inclusion of my/our name in the list of their approved vendors and agree to give full satisfaction to the Corporation in the event of their doing so.

**P.S.: Application form fee Rs. 590/- paid by Cash/Demand Draft vide  
M.R.No. \_\_\_\_\_ dated \_\_\_\_\_.**

**Dated:**

**Signature:**

**Note (1) Please type this form or fill it legible in ink. If space provided is insufficient, Please write the replies on a separate sheet giving appropriate question number and attached it to the form.**

**Please affix your firm/company seal with authorized signature on every page.**

**Note (2) The corporation reserves the right to include/exclude/cancel the name of the Vendors/suppliers from its approved lists at their absolute discretion without assigning any reason.**

**PART – II: TECHNICAL INFORMATION**

(For Printing & Stationery Suppliers )

1) Particulars of composing facilities:

a) D. T. P. Systems

<b>Make</b>	<b>Packages</b>	<b>Languages</b>	<b>Other Features, if any</b>

b) Other composing facilities such as hand composing

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2) Particulars of scanning machines being used.

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3) Printing Machine

a) Offset Machine

<b>Make</b>	<b>Size</b>	<b>Colour</b>	<b>Speed</b>	<b>Other features, if any</b>

b) Pre-printed continuous stationery machine

<b>Make</b>	<b>Size</b>	<b>Colour</b>	<b>Speed</b>	<b>Other features, if any</b>

c) Letter press machines

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d) Screen printing facility

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4) Particulars of Positives and Plate making facility.

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5) Binding and Finishing.

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a) Cutting Machines

Make	Size of Blade	Hand/Power Driven

b) Particulars of Punching Machines.

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c) Particulars of perforating machines.

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d) Particulars of gliding department.

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6) Have you got photo-typesetting machine if so, please furnish full details of type faces.

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7) If any of the equipments mentioned above is under lease, loan or hire purchase Agreement should be furnished.

8) Please furnish details particulars any other agreements you may have entered in to which are subsisting and are likely have a bearing on the jobs, which may be entrusted to you.

I/WE \_\_\_\_\_ request **Life Insurance Corporation of India, AHMEDABAD DIVISIONAL OFFICE**, to consider inclusion of my/our name in the list of their approved vendors and agree to give full satisfaction to the Corporation in the event of their doing so.

**P.S.: Application form fee Rs590/- paid by Cash/Demand Draft vide M.R.No. \_\_\_\_\_ dated \_\_\_\_\_.**

**Dated:**

**Signature:**

**Note (1) Please type this form or fill it legible in ink. If space provided is insufficient, Please write the replies on a separate sheet giving appropriate question number and attached it to the form. Please affix your firm/company seal with authorized signature on every page.**

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**Annexure "A"**  
**Conditions for empanelment**

- 1) The firm should have been established at least three years before. (Copy of registration certificate must be enclosed)
- 2) Annual Turnover should at least Rs.2 lacs. (Attach Balance Sheet for 3 years).
- 3) The firms should be on the approved panel of at least 3 reputed Firms from Gujarat out of which at least one should be public Sector or Government undertaking. (Enclose copy of letter of empanelment duly certified)
- 4) The firms should have at least 300 Sq. Feet area of operation for printing, binding etc. activities and sufficient storage space.
- 5) The firms should have registration with state & local authorities for undertaking the profession (Copies of state registration & License from respective CIVIC authority/GST No. to be enclosed)
- 6) Vendors/Firms should keep sufficient stock in hand, so as to comply with requirements without delay.
- 7) Vendor should furnish the specific brand or make, in case of authorized dealer. (Copy of authorize dealership must be enclosed.)
- 8) Corporation reserves the right to cancel your application without giving any reason.
- 9) Application should reach us on or before **24/01/ 2024 upto 4:30p.m.** with necessary documents/copy stated in Application form Part – I, II /III.(Annexure –B)  
Incomplete application will be rejected.
- 10) Any dispute subject to **AHMEDABAD** jurisdiction
- 11) The approved panel will be valid for 3 (three) Financial Years only .i.e. up to 31.03.2027
- 12) **Existing vendors empanelled under Ahmedabad D.O. have to apply a fresh for Empanelment.**

**SR. DIVISIONAL MANAGER  
AHMEDABAD DIVISION.**



ANNEXURE - B

O.S.DEPARTMENT  
7<sup>TH</sup> Floor, Jeevan Prakash  
Building,  
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Ahmedabad::380001,

(PART-III) Application for empanelment (2024) under GROUP for category  
no.: \_\_\_\_\_

- (7) Purchase/Maintenance of All Types of curtains.
- 08) A M C for Water coolers, Air coolers, Water purifiers/ R.O. Systems /Aqua guard, Copier Machine, Note counting Machine, EPABX, Fake Note Detectors, Fax Machines etc.
- 10) Pest control services
- 16) Printing of Identity Cards for our Employees
- 17) Rubber stamps/Computer Nylo stamps, Binding work
- 18) Housekeeping & Maintenance services for Office Premises/Guest House/Drainage cleaning-services/Lift man services.
- 19) Waste paper purchase with lifting services
- 20) News paper Advertising Agencies
- 21) Supply of cleaning material
- 22) Laundry services
- 23) Drinking water suppliers
- 26) Cleaning of under ground and over head water tanks
- 27) Gardening /Mali etc.
- 28) Railway and Air Ticket Booking
- 29) Courier Service
- 30).Services for Network Cabling

1. Name of the Firm/Agency: \_\_\_\_\_
2. Address of the office: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Tel. No./ Mobile no. \_\_\_\_\_
3. Name of the Proprietors/ Chief Executive with Tel. No./ Mobile no. \_\_\_\_\_
4. Date of establishment: \_\_\_\_\_  
(Enclose Certificate)
5. Name and address of present clients: (Attach separate statement)
6. Whether Registration Certificate under Shop and Establishment Act duly renewed? Yes/No. If yes, attach copy)
7. Whether holding Registration Certificate issued by Regional Provident Fund Commissioner? Yes/ No. (if yes, attach copy )
8. Whether holding Registration Certificate issued by Employees State Insurance

Corporation? Yes/No. (if yes, attach copy )

9. Whether holding Registration Certificate issued by relevant GSTN Authority ?
10. Affidavit by the Proprietor for ownership of the firm should be attached.
11. Income-Tax PAN no. : \_\_\_\_\_  
(enclose copy)
12. Number of Staff employed: \_\_\_\_\_
13. Copy of Income Tax Clearance Certificate and latest Income Tax return should be attached.
14. Copy of License issued by Office of Labour Commissioner should be attached.
15. Address of workshop, if any :  
Tel.no. \_\_\_\_\_ :
16. Do you have dealership of any standard Firm/Brand/Make ?
17. Other details:

**Signature**

**(Name of the Proprietor/s Chief Executive)**

Date: \_\_\_\_\_

Place: \_\_\_\_\_

**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.

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M.R.No. \_\_\_\_\_ dated \_\_\_\_\_.