 **ANNEXURE “A”**

**LIFE INSURANCE CORPORATION OF INDIA**

**“JEEVAN PRAKSH” DIVISIONAL OFFICE, NAGPUR RAOD, MADAN MAHAL, JABALPUR APPLICATION FORM FOR EMPANELMENT OF FIRMS FOR THREE YEARS**

**(OTHER THAN PRINTERS i.e. VARIOUS ITEMS AND SERVICES)**

**GENERAL INFORMATION** **NAME OF CATEGORY………………………………..............**

|  |  |  |
| --- | --- | --- |
| **S.NO** | **Information Sought** | **Information Provided** |
| 1 | Name of the Firm (In Block Letters) |  |
| 2 | Date of Establishment/Incorporation of the firm |  |
| 3 | GST Number (Enclosed Copy) |  |
| 4 | Address of Head Office (If Separate) and Telephone No. |  |
| 5 | Correspondence address and Telephone No/Email. Address |  |
| 6 | Status : Proprietary/Partnership/Private Limited Company/Public Limited Company/firm |  |
| 7 | Names of the Partners/Directors |  |
| 8 | Name of Chief Executive with his present addresses and Telephone No. |  |
| 9 | Name of Representative(s) with Designation who would be calling on us and attending to our job. |  |
| 10 | Name of Bankers with addresses & telephone No |  |
| 11 | Is the Firm registered under the Factory/Company Act ?  If so, state   1. Licence Number : 2. Date of last renewal of Licence (Copy of licence to be enclosed) 3. PAN 4. ESIS No, if any 5. EPF Registration No. If any 6. MSME, if any 7. SC, ST, OBC, GEN |  |
| 12 | 1. PAN of Income Tax Deptt. (Copy enclosed) 2. Labour license No and validity under section of Labour Laws (Enclose Photo copy) 3. GST Registration No. (Enclose Copy) 4. EPF Regn. No. (Enclose Photo Copy) 5. ESI No (Enclosed photocopy) |  |
| 13 | Whether holding certificate under Shops & Establishment Act, duly Renewed (Copy should be enclosed) |  |
| 14 | 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) |  |
| 15 | Turn over for last three years  F.Y. 2021-22  F.Y. 2022-23 F.Y. F.Y. 2023-24 |  |
| 16 | Whether Black Listed by any Govt. Deptt./Public Sector Company. |  |
| 17 | Are you agree to make deliveries/ Services to Corporation’s office at Jabalpur and its Branches under its jurisdiction. |  |
| 18 | Are you agree to abide strictly by the Terms & Conditions of the Tenders and Contracts (Copy annexed) |  |
| 19 | If your firm is empanelled with any office of L.I.C. of India or any other PSU (Central), please give name and address of LIC Office/PSU. |  |
| 20 | Name , Address and Telephone No some of your most valuable client.(separate list may be attached) |  |
| 21 | Mention any other specialties of your Establishment. |  |

I/We ----------------------------------------------------------------------------------------------------- request Life Insurance Corporation of India, Divisional Office, Nagpur Raod, Madan Mahal, JABALPUR to consider inclusion of my/our name in the list of their approved firms/ approved vendors /dealers. We agree to give full satisfaction to the Corporation in the event of their doing so.

PS – Application Form Fees Rs 590/- paid by cash/DD vide MR No. ---------------Dt -----------------

**Terms and Conditions of Empanelment**

1. Application has to deposit Rs 590/- in cash at the cash counter of Divisional Office, Jabalpur or in the form of DD/Bankers Cheque payable at Jabalpur favouring LIC OF INDIA along with form.
2. The firm should have at least 3 years experience in this field.
3. Incomplete application will be rejected without assigning any reason there to.
4. Affix your Firm/Company seal with authorized signature on every page.
5. Form should be typed or filled legible in ink. If space provided is insufficient , please type or write the replies on a separate sheet giving appropriate quest number and attach it to the form.
6. Approved firms/approved vendors/dealers who are on our existing panel should also apply for fresh empanelment.
7. Firms/Approved vendors/dealers have been blacklisted/removed earlier, should not reply.
8. The cover should be super scribed as “Application for Empanelment for supply of ---------
9. The Corporation reserves the right to include/exclude/cancel the name of the firm from its approved lists at their absolute discretion with assigning any reason at any time.
10. Any dispute relating to the enquiry shall be subject to jurisdiction of the Court of Jabalpur.

**Dated ------------ this -------- day of -------------- 2024 Signature with Seal**