



भारतीय जीवन बीमा निगम
LIFE INSURANCE CORPORATION OF INDIA

Divisional Office ,Kottayam, Kerala 686001

ANNEXURE 'A'

**APPLICATION FORM FOR EMPANELMENT OF VENDORS/SUPPLIERS/DISTRIBUTORS/FIRMS
FOR PUBLICITY ITEMS AND OTHER SERVICES**

SL. NO	INFORMATION SOUGHT	INFORMATION PROVIDED
1	Name of the Firm (in BLOCK letters)	
2	Date of Establishment/ Incorporation of the Firm	
3	a) Correspondence Address	
	b) Telephone Nos.	
	c) Mobile No.	
	d) E-mail address	
4	Address of Head Office (if separate) and telephone No., Mobile No. & Email address	
5	Nature/Type of Products Manufactured/sold/dealt with/supplied/distributed/arranged (Full details of all activities & services)	
6	Nature of ownership: Whether Proprietary/ Partnership/ Private Limited Company/ Public Limited Company)	
7	Names of the Proprietors/ Partners/ Directors	
8	Name of Representative (s) with designation who would be calling on us and attending to our office and his/their Mobile Nos.	



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SL. NO	INFORMATION SOUGHT	INFORMATION PROVIDED
9	Details of Bank Account of Firm	
	a) Bank Name	
	b) Bank Branch & Address	
	c) Bank A/c No.	
	d) Type of Account (SB/ Current/ CC etc)	
	e) IFSC Code	
10	PAN (copy to be enclosed)	
11	Whether the firm/business unit is registered under Factory Act/ Shops & Establishment Act/Relevant Statutory Act or Rules (provide details and submit attested copy of statutory certificate and relevant licence/s in force)	
12	GST Number / Statutory Regn. No. (Attach Regn. Certificate)	
13	Turn over for last 3 years – Submit copy of IT Returns/Balance Sheet/Revenue A/c for last or previous FY	
	FY 2023-2024	Rs.
	FY 2022-2023	Rs.
	FY 2021-2022	Rs.
14	Whether Income Tax Assessee	
15	Are you agreeable to abide strictly by the Terms and conditions of the Tender for empanelment (Annexure B) and contract/s if awarded from time to time as per LIC rules prevailing. (Submit Annexure 'B' duly signed and sealed along with Application form and other documents and DD)	
16	Are you agreeable to make deliveries to LIC offices/locations designated by LIC, as and when directed by LIC	
17	Whether your firm is already empanelled with any office of LIC of India or any other PSU (Central). (Please enclose list with names, address and Tel./ Mobile Nos. of the persons to be contacted for confirmation).	
18	Has your firm been blacklisted/ removed earlier by LIC or any of the PSUs/ BFSI/ Govt/ Semi Govt. Quasi Govt. departments in India (Yes/ No). If yes, then give details.	



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SL. NO	INFORMATION SOUGHT	INFORMATION PROVIDED
19	Name, addresses and telephone Nos. of three of your most valued clients.	
20	Mention any other specialties of your Establishment/firm	
	Documents to be submitted with Application form 1. PAN 2. GST/Other Statutory Registration/ License 3. IT Returns/Balance Sheet/Revenue A/cfor last/previous Financial Years 4. Annexure B duly signed and sealed	

Please type the form or fill it legibly in ink. Use separate sheet/annexure if space provided is insufficient.

All the pages of the application form and all documents must be signed and seal affixed

Refer Annexure 'B' for Terms and Conditions. Submit Annexure 'B' duly signed and sealed along with Application form and other documents and DD.

I/We _____

request Life Insurance Corporation of India, Divisional Office, Kottayam to consider inclusion of my/our firm/company in the list of their approved Firms/Vendors/Suppliers/Dealers/Service Providers. I/We hereby assure to extend full cooperation to the satisfaction of LIC of India upon being considered /selected for empanelment.

I/We agree to abide by the rules and instructions of LIC of India given from time to time and render our services to the full satisfaction of the Corporation if considered/selected for empanelment. I/We agree to the Terms and Conditions for empanelment listed by LIC of India in 'Annexure B' and any revisions thereof.

I/We understand and agree that mere submission of Application form for empanelment does not confer the right of Empanelment and agree that LIC of India reserves the right to decide / modify / change / alter the empanelment criteria/process and/or accept or reject any application for empanelment or cancel the process of empanelment without assigning any reason thereof for which LIC of India will not be liable in any way whatsoever.

I/We understand that the application for empanelment or selection in empanelled list does not confer on me/us/our firm any right whatsoever in any aspect pertaining to the process of empanelment or initiation of purchase/purchase/calling for purchase/selection for purchase or any other decision as may be taken by LIC of India or its Officials.

I/We understand that my/our application and declarations and documents submitted will form the basis of any decision of LIC of India regarding empanelment/selection for purchase/purchase etc and in case of any doubt/clarification/dispute etc, the decision of LIC of India or its Officials will be binding on me/us/our firm.

Dated at _____ this _____ day of _____ 2024

Signature with Seal :

Name :

Designation :