



O.S. Department, Amravati Divisional Office,  
“Jeevan Prakash Bldg., Shrikrishnapeth,  
Near Dafrin Hospital, Amravati- 444 601.  
Tel. No.: 0721-2660489  
E-mail : estate.amravati@licindia.com

Ref: Est/Amt DO/Tender-15/2024-2025

Date: 02.01.2025

To,

M/S \_\_\_\_\_

**ANNEXURE -A**

**Re: Tender for Servicing of Fire Extinguishers.**

We intend to call open tenders for Annual Maintenance Contract for servicing of Fire Extinguishers at our Divisional Office and at following Branches working under it as per details given below.

Name of LIC Unit	DCP	ABC			CO2			Halon
	5 Kg	1Kg g	2Kg	5 Kg	2 Kg	4.5 Kg	6.8 Kg	500 Grams
Amravati DO Office	2	2	4	37	1	4	2	
Amravati-I B.O. 979	1		1	4	1		1	1
Amravati-II B.O. 82C			1	7			1	
CAB,Amravati 9152	2			2				
P&GS,Amravati G 702				3			1	
Achalpur B.O.996				6			1	
Warud B.O.99L				5			1	
Dhamangaon B.O. 97H				5			1	
Akola-I B.O.977	1			7	1		1	
Akola-II B.O. 82A				6			1	
Akot B.O.99C				5			1	
Washim B.O.994				7			1	
Yavatmal-I B.O.991	1			8			1	
Yavatmal -II B.O.82E				6			1	
Wani B.O.99K				6			1	
Digras B.O.82D				5			1	
Pusad B.O.99A				8			1	
Buldhana B.O.97B	1			9			1	
Khamgaon B.O.978				9			1	2
Malkapur B.O.82B				6			1	
Mehkar B.O.9151				4			1	2
Daryapur S.O.				3				
Morshi S.O.				2				
Murtizapur S.O.				1		2		
Nandgaon kh. S.O.				2				

Pandharkawda S.O.				1		2		
Deulgaon Raja S.O.				2				
Karanja S.O.				1		2		
Darwha S.O.				1		1		
Pohra Godown				21				
	8	2	6	189	3	11	21	5

**Fire Extinguisher Maintenance will include:**

- Cleaning of exterior of Fire Extinguishers.
- Checking of Nozzle outlet and vent holes.
- Checking all mechanical parts thoroughly and making sure that the Fire Extinguisher is in working condition.
- After inspection of Fire Extinguisher, if any cylinder found to be in Red Zone, it should be brought to the notice of the Office Authority and to take corrective action immediately.
- Checking the seals whether intact or not.
- Refilling of fire extinguisher whenever required and to mention expiry date on the cylinder.

**Terms and conditions**

- ❖ Mode of servicing will be **Quarterly** at regular intervals.
- ❖ Rates quoted should be inclusive of all taxes and no extra on any account will be paid. GST will be paid as per Government norms.
- ❖ Income Tax will be deducted as per rules.
- ❖ Contract period will be of **two years** from the date of contract. The contract may be renewed for one more year after expiry of CAMC, if service found satisfactory and if the Competent Authority decides so, on the basis of same rates and terms and conditions in this tender.
- ❖ Fire fighting Demonstration to all offices shall be given **once during the financial year and necessary certificate should also be issued.**
- ❖ **Tender Fee: Rs.500/- + GST Rs.90/- (Rs.Five hundred ninety only)** by way of Cash or Demand Draft payable at Amravati favoring L.I.C. Of India.The tender fee is non-refundable.
- ❖ **Security Deposit:-** After scrutiny of the quotations, successful vendor will be informed regarding the allotment of the contract. It will be necessary to deposit of **Rs.5,000/-** in cash or DD by the successful vendor i.e. to whom the contract will be allotted. This amount will be refundable after completion of contract period without interest.
- ❖ **Payment:** Payment will be made on Quarterly basis on submission of bills and acknowledgements from the concern office.( Stamp of signing official is mandatory) Consolidated payment will be made at Divisional Office through NEFT /RTGS only.
- ❖ **Penalties:** If service of any quarter is not done, then penalty of  $\frac{1}{4}$  th of Quarterly service charges will be imposed for lack of service. It will be binding on the successful bidder.

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- ❖ Bidder will be **solely responsible for any injury/accident** caused to Workman/Technical Engineer. LIC of India will not be liable for any claim.
- ❖ If it is found that the services are not satisfactory, then the contract will be terminated without notice period.

**Following documents are required along with enclosed form and Quotation:-**

1. Documents of registration of Firm.
2. Pan card of Firm
3. GSTN, if any

You are requested to send Annexure A,B,C and D in a sealed envelope super scribed with “**Quotation for Comprehensive AMC of Fire Extinguishers**” and addressed to **The Manager (Estate)** as under so as to reach us by 3.00 PM on 14.01.2025 . Quotations received after due date and time will not be considered.

**Address for receiving the Tender;**

**Manager (Estate)**  
L.I.C. Of India,  
Amravati Divisional Office, IInd Floor,  
Jeevan Prakash Building, Shrikrushnapeth,  
Near Dafrin Hospital, Amravati-444603.  
Ph.No; 0721-2660489.  
Mobile No. – 8329797668, 8975843589

Thanking you

**Sr.Divisional Manager**

**Tender Schedule**

<b>Date of issue of Tender</b>	<b>02.01.2025</b>
<b>Last date of submission of Tender</b>	<b>14.01.2025 (upto 3.00 PM)</b>
<b>Date of opening Tender</b>	<b>15.01.2025 (at 11.30 AM)</b>

**PROFORMA FOR RATES QUOTATION**

**ANNEXURE-B**

<b>Sr. No</b>	<b>Particulars of Item</b>	<b>Quarterly Rate for CAMC (Rs.)</b> (Inclusive of transportation & other charges but excluding GST)
<b>1</b>	Checking/Servicing of all types of Fire Extinguishers	
<b>2</b>	Training charges per Office	
<b>3</b>	Refilling charges of ABC type Fire Extinguishers : a) Capacity : 1 Kg b) Capacity : 2 Kg c) Capacity : 5 Kg	_____ _____ _____
<b>4</b>	Refilling of DCP Type Fire Extinguishers Capacity 5Kg	
<b>5</b>	Refilling of CO2 Type Fire Extinguisher : a) Capacity : 2 Kg b) Capacity : 4.5 Kg c) Capacity : 6.8 Kg	_____ _____ _____
<b>6</b>	Rates of Spare Parts : a) ABC Stored Pressure Fire Extinguisher : 1) Safety Pin 2) Discharge Nozzle 3) Discharge Hose 4) Pressure Gauge 5) Discharge Valve  b) CO2 Fire Extinguisher : 1) Safety Pin 2) Washer 3) Discharge Hose and Horn 4) Discharge Complete Valve 5) Trolley Wheel 6) Halon	_____ _____ _____ _____ _____  _____ _____ _____ _____ _____
<b>7</b>	Hydraulic Pressure Testing ( to be done once in 3 years) 1 Water CO2 (4.5 Ltrs) 2 DCP 5 Kg 3 CO2 Gas (Only of 10% Weight Loss) is found to exist 4 Refilling of Water CO2	_____ _____ _____ _____

**L- 1 will be decided on the basis of Quarterly Rate of all above items.**

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

**Tenderer's sign/Name & seal**

**LIFE INSURANCE CORPORATION OF INDIA**  
**JEEVAN PRAKASH BUILDING, SRIKRISHAN PETH, NEAR DUFFERING**  
**HOSPITAL, AMRAVATI. 444603.**

**Ph.Nos. 0721-2660489. Email id: estate.amravati @licindia.com**

**ANNEXURE-C**

**APPLICATION FORM FOR TENDER ( Technical Bid)**

**Profile of the Tenderer**

Name of the Agency/Firm/Vendor ( In Block Letters)	
Status of the Agency (Whether Sole Proprietorship/Firm/Pvt. Co.)	
Date of Incorporation/Establishment	
Correspondence Address, Contact No. & Email Id	
Address of Head Office, ( If Separate) and Contact No.	
Names of the Partners/Directors /Owner	
Name of Executive with his present addresses and Contact Nos.	
Name of Contact person with Designation who would be calling on us and attending to our jobs & contact phone No.	
PAN (Individual Card in case of Proprietorship OR Firm's PAN card in other cases.	
TAN No.	
GSTN No.	
Whether holding certificate under Shops & Establishment Act, duly renewed	
Regn No...& Date	
Licence No. under Contract Labour ( Regulation & Abolition ) Act, 1970 & Contract Labour ( Regulation & Abolition ) Central Rules, 1971.	
ESI Registration No.	
PF Registration No.	

Registration under MSME/NSIC or the District level authority, if any	
Name of offices where you have carried out work during past 3 years	
Name of at least Two of your most valued clients at the present time	
Average Turnover of the Agency for the last three years, Submit copies of I.T. returns, Balance Sheets & P/L accounts for last three years.	<u><b>F.Y 2021-22 :</b></u> <u><b>F.Y. 2022-23:</b></u> <u><b>F.Y.2023-24:</b></u>
Do you agree to abide strictly by the Terms and Conditions of the Tender Contracts.	

**Attested copies of all the above documents must be attached along with Application Form**

(Signature of the vender with seal)

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. All the pages application form and documents submitted must be signed with seal.

**DECLARATION**

**ANNEXURE-D**

I/We \_\_\_\_\_ request Life Insurance

Corporation of India, Amravati Divisional Office, to consider my/our application and tender for the above mentioned CAMC category. I/we agree with all terms and conditions and to give full satisfactory services to the LIC of India in the event of contract awarded to me/us.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 2025

Signature with Seal:-

Name & Designation :-

**Note: The Corporation reserves the right to cancel the tender of the firm/Agency/Service /provider at its absolute discretion without assigning any reason.**