



Life insurance Corporation of India, Central Zonal Office, "Jeevan Shikha" 60-B, Hoshangabad Road, Bhopal- 462011
Telephone: 0755-2676215 Email – cz_marketing@licindia.com

APPLICATION FORM FOR EMPANELMENT

ANNEXURE- A

Work (s) for which applied for Empanelment	
--	--

- If applied for "Others", please specify.

S.No.	Information sought	Information Provided
01	Name of the Firm (In Block Letters)	
02	Date of establishment/ incorporation of the firm and Registration No. (Enclose Copy)	
03	Status of firm: (Proprietary/ Partnership/ Pvt Ltd, Public Ltd, etc)	
04	Name of the proprietor/partners/directors/CEO	
05	If firm is in partnership, Name of the partners (Please enclose attested copy of Partnership deed)	
06	Local address (at Bhopal), Telephone No, Mobile No. & Email-ID	
07	Name of the Contact Person at Bhopal and his contact number (Telephone Number, Mobile Number)	
08	Address of the head office If the head office is other than in 6 above. Name of the contact person at head office and his contact number (Telephone number/ Mobile number)	
09	Is the Firm registered under Factory/Company Act ? If so State: a) License Number b) Date of last renewal (Enclose copy of License) c) ESIS No if any d) EPF registration No if any	



Life insurance Corporation of India, Central Zonal Office, "Jeevan Shikha" 60-B, Hoshangabad Road, Bhopal- 462011
Telephone: 0755-2676215 Email – cz_marketing@licindia.com

10	Whether holding certificate under Shops and Establishment Act, duly renewed (Copy should be enclosed)	
11	No. of Employees	a) Permanent b) Temporary
12	PAN No. (Enclose photo copy)	
13	TAN, if Any (Enclose photo copy)	
14	GST No. (Enclose photo copy of certificate)	
15	Turnover of the firm (Last three years) : 2021-22- 2020-21- 2019- 20- (Enclose the balance sheets and P& L Statements)	
16	State the latest income tax assessed year and amount of tax assessed. (Enclose copies of last 3 years ITR, Balance sheet and P&L Account)	
17	Is your firm is empanelled with any office of LIC of India? If yes please give full details and enclose the copy of empanelment letter.	
18	Name, address and contact No. of some of your most valued clients.	
19	Is your firm is ever Blacklisted by any Govt. Deptt./ PSUs or any office of LIC of India ?	
20	Details of previous work experience.	



Life insurance Corporation of India, Central Zonal Office, "Jeevan Shikha" 60-B, Hoshangabad Road, Bhopal- 462011
Telephone: 0755-2676215 Email – cz_marketing@licindia.com

21	Details of Application fees (Rs. 118/-)	
22	Bank Account details : (Please enclose a cancelled cheque and copy of Bank Statement)	Name of Bank : Address of Bank Branch: IFSC Code : A/C No. : Type of A/C :

General Conditions:

1. The Firm/Supplier/Service Provider should be in profession for at least 3 years (copy of registration certificate must be enclosed).
2. Duly completed application should be submitted in sealed envelope super scribed as **"Application for empanelment for supply of Gift Items/ Mementoes, etc"** along with receipt or DD of non refundable application fee of Rs. 118/-.
3. The Firm/Supplier/Service Provider should have registration with state and local authorities for undertaking the profession (Copies of registration with State and Local authority to be enclosed).
4. The firm/supplier should keep sufficient stock in hand so as to comply with urgent need without delay.
5. The Firm must agree to get valid registration under any new Tax regime in future.
6. The Firms will be empanelled only after positive recommendation of committee duly constituted to visit and inspect the premises / workshop etc. of the applicants.
7. All pages of application form and other documents submitted must be signed by the authorized official of the Company/Firm in acceptance of terms and conditions therein.
8. If the Firm does not participate in any five tenders, the firm may be removed from the panel.

Note: Please type this form or fill it up legibly. If space provided is insufficient, please type or write replies on separate sheet giving appropriate question number, duly authenticating the same with seal and signature and attach it to the form. All required document shall be self attested with seal and signature. All original certificates/documents should be submitted for verification if required by LIC of India.



Life insurance Corporation of India, Central Zonal Office, "Jeevan Shikha" 60-B, Hoshangabad Road, Bhopal- 462011
Telephone: 0755-2676215 Email – cz_marketing@licindia.com

I/We ----- request the **"LIC of India, Central Zonal Office, "Jeevan Shikha" 60-B, Hoshangabad Road, Bhopal"** to consider my/ our application. I/We agree to abide by all the eligibility criteria & other terms and conditions and scope of service prescribed and promise to render the services to the best satisfaction of the **"LIC of India, Central Zonal Office, "Jeevan Shikha" 60-B, Hoshangabad Road, Bhopal"**.

Signature:

Name:

Designation:

Seal of the firm:

Date



Life insurance Corporation of India, Central Zonal Office, "Jeevan Shikha" 60-B, Hoshangabad Road, Bhopal- 462011
Telephone: 0755-2676215 Email – cz_marketing@licindia.com

DECLARATION

1. I/We have carefully read/ studied the eligibility conditions and other terms and conditions and satisfied myself / ourselves that all the eligibility conditions are being met by me / us.
2. The information furnished is true to the best of my/our knowledge and if any information is found untrue or false, I/we may be debarred from the empanelment process or if empanelled then I/we may be removed from the approved list of firms/ suppliers.
3. I/We understand that "**LIC of India, Central Zonal Office, "Jeevan Shikha" 60-B, Hoshangabad Road, Bhopal**" reserves the right to accept or reject any/all applications or cancel the process of empanelment at any stage without assigning any reason thereof for which LIC of India will not be liable in any way whatsoever.
4. I/We agree that the decision of LIC of India, Central Zone , Bhopal, in selection of firms will be final and binding on me/us.
5. I/We agree that I/We have no objection if enquiries are made about the work performance with my/our clients.
6. I/We understand that if empanelled then I/We may be removed from the approved list of suppliers if my / our performance is not found to be satisfactory.
7. I/we have not been debarred / Black listed by any Govt. / Semi Govt. / PSU Organizations/ Regulatory Bodies/ any office of LIC of India.

Signature:

Name:

Designation:

Seal of the firm:

Date