



WESTERN ZONAL OFFICE, MUMBAI.

## PRE - QUALIFICATION OF CONTRACTORS

Life Insurance Corporation of India intends to invite item rate tenders for the following works of Electrical nature for our Divisional Office, STC, Hostel, Officers Quarters, SDM bungalow & Guest House at VADODARA. The details of prequalification criteria are given below:

Sl.no	Work	Estimated Cost (Rs. In Lac)	Completion period in months	Min Bank Solvency (Rs.in Lac)	Avg. Annual Turnover over last 4 years (Rs.in Lac)	Min. Value of Single work completed in last 4 years.
1	Internal Electrical work like electrical wiring, cabling, distribution boards etc.	80.00	10	16.00 lac	40.00 lac	At least one work of Rs.40.00 lacs.
2	HT work like outdoor substation, panel boards etc.	60.00	04	12.00 lac	30.00 lac	At least one work of Rs.50.00 lacs or
3	Solar water Heating system	12.00	02	2.50 lac	6.00 lac	At least one work of Rs.6.00 lacs

In case of LIC working contractors, 25% of Qualifying criteria may be relaxed.

Interested contractors having experience in similar nature of works and fulfilling above criteria, may apply in prescribed form (given below) for enrolment, to be downloaded from our web site [www.licindia.in](http://www.licindia.in) and filled in form to be submitted to “**The Chief Engineer, Life Insurance Corporation of India, Western Zonal Office. Engineering Department, Yogakshema, west wing, Jeevan Bima Marg, Mumbai-400021.**” along with non-refundable amount of **Rs.1000/-**, towards *processing fee*, in the form of demand draft / pay order drawn in favour of **Life Insurance Corporation of India** payable at **Mumbai**. on or before **21-11-2011**.

The name of all of empanelled contractors shall be published in our web site within 90 days (approximately) from the date of this publication.

**Chief Engineer reserves the right to reject/issue of tender to any contractor at his sole discretion without assigning any reason whatsoever.**

31-10-2011

Chief Engineer

**We undertake consultancy of Engineering Jobs.**



**LIFE INSURANCE CORPORATION OF INDIA  
WESTERN ZONAL OFFICE, MUMBAI.**

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**SPECIAL INFORMATION**

**THE CONTRACTORS DESIROUS FOR SUBMITTING FILLED IN ENROLMENT FORM FOR NECESSARY EXAMINATION LEADING TO ENLISTMENT FOR THE VARIOUS WORKS AS GIVEN IN THE PRESS ADVERTISEMENT, THE FOLLOWING DOCUMENTS ARE INVARIABLY TO BE SUBMITTED APART FROM WHATEVER REQUIREMENTS AS MENTIONED IN THE ENROLMENT FORM DETAILS, FAILING WHICH APPLICATION SHALL BE LIABLE FOR REJECTION WITHOUT ANY REFERENCE TO THE APPLICANT.**

**1. SEPARATE APPLICATION MUST BE SUBMITTED FOR DIFFERENT ITEMS OF WORKS ALONG WITH NON REFUNDABLE AMOUNT OF RS.1000/- EACH TOWARDS PROCESSING FEE IN THE FORM OF DEMAND DRAFT / PAY ORDER DRAWN IN FAVOR OF LIC OF INDIA PAYABLE AT MUMBAI. THIS IS APPLICABLE WHEN AN APPLICANT SUBMITS APPLICATION FOR MORE THAN ONE ITEM OF WORKS.**

**2. BANK SOLVENCY CERTIFICATE SHOULD NOT BE MORE THAN 3 MONTHS OLD.**

**3. WORKS IN HAND ON THE DATE OF APPLICATION MUST BE NOTARIZED THROUGH FIRST CLASS MAGISTRATE.**

**4. WORK COMPLETION CERTIFICATE FOR QUALIFIED PROJECTS AS PER DETAILS MENTIONED IN PREQUALIFICATION OF CONTRACTORS MUST BE NOTARIZED WITH DETAILS OF ADDRESS AND CONTACT NUMBERS UNDER WHOSE AUTHORITY THE WORK HAS BEEN EXECUTED AND COMPLETION CERTIFICATE HAS BEEN ISSUED.**

**IT IS AGAIN REITERATED THAT IRRESPECTIVE OF ALL DETAILS THAT ARE REQUIRED WHILE FILLING THE ENROLMENT FORM, THE ABOVE DOCUMENTS ARE ABSOLUTELY NECESSARY FAILING WHICH THE APPLICATION SHALL BE LIABLE FOR REJECTION WITHOUT ANY REFERENCE AND FOR SUCH CASE, AND PROCESSING FEES SUBMITTED SHALL NOT BE REFUNDED.**

**CHIEF ENGINEER**



**LIFE INSURANCE CORPORATION OF INDIA**

**ENGINEERING DEPARTMENT  
WESTERN ZONAL OFFICE**

**YOGAKSHEMA  
WEST WING  
JEEVAN BIMA MARG  
MUMBAI-400021.**

**ENROLMENT FORM**



**LIFE INSURANCE CORPORATION OF INDIA.  
WESTERN ZONAL OFFICE  
ENGINEERING DEPARTMENT  
YOGAKSHEMA, WEST WING,  
JEEVAN BIMA MARG, MUMBAI-40021..**

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**INSTRUCTIONS FOR FILLING AND SUBMISSION OF ENROLMENT FORM**

The Enrolment Form along with the Annexure A1, A2 and B to G shall be completely filled in all respect along with cost of Enrolment Form of **Rs 1000/-** ( non-refundable) by way of demand draft /pay order in favour of Life Insurance Corporation of India payable at Mumbai, addressed to the Chief Engineer, Life Insurance Corporation of India, Western Zonal Office. Engineering Department, Yogakshema, west wing, Jeevan Bima Marg, Mumbai-400021 along with these instructions for filling and submission of Enrolment Form on or before **30.11.2011**. Please note that no consideration will be given for postal delays.

1. Contractors to note that all particulars required as per the form and Annexures shall be filled in completely in relevant strictly as per the format.
2. The forms not submitted strictly as per the above instructions within stipulated period are liable to be rejected,
3. The eligible agencies, which will be selected for issue of tenders after scrutiny of enrolment forms, shall be informed by a letter. Please note that no enquiries or correspondence regarding the selection for issue of tenders shall be entertained.
4. Latest Solvency Certificate from any Nationalised / Scheduled Bank as per advertisement should be submitted along with Enrolment Form.
5. The Contractors are advised to follow the instructions given below :
  - (a) Enrolment Form shall be filled-up in clean handwriting in capital letters or typed.
  - (b) Full address of the site of work, owner or authority under whom the works have been carried out should be given (Please refer Annexure D & E).
  - (c) The agencies should ensure to submit the satisfactory Completion Certificate giving the value of work, year of completion and it should also tally with the value of final bill in Annexure D.
  - (d) The annual turnover should be based on latest Income Tax Clearance Certificate duly cleared by Income Tax Department or audited balance sheet, copy of which should be enclosed.
6. Please note that the submission of this enrolment form does not confer any right on you to claim issue of tenders and the Chief Engineer reserves the right not to issue tender to any / all applicants without assigning any reason whatsoever.

Enclo. : Enrolment Form with  
Annexure A1, A2 and B to G

Signature of Contractor

**Note : These instructions for filling and submission of Enrolment Form shall also be signed and submitted along with Enrolment Form with Annexure A1, A2 and B to G.**

**LIFE INSURANCE CORPORATION OF INDIA  
ENGINEERING DEPARTMENT  
WESTERN ZONE  
FORM FOR ENROLMENT OF CONTRACTORS**

I / We \_\_\_\_\_ am / are desirous of being enrolled on list of contractors for \_\_\_\_\_ **proposed development of LIC plot at Sector IV, Vastrapur, Ahmedabad** and hereby apply for the same.

I / We give the following details for your consideration.

Sl.no	QUERY	ANSWER
1	Name of the firm :	
2	Address	
3	PAN No	
	TIN No.	
	VAT Registration No.	
4	Telephone Number	
	Office	
	Residence	
	Fax No.	
	Email	
5	Telegraphic Address, if any	
6	Month and year in which the firm was established in present name	
7	Particulars of old firm (if present firm is new)if main partners of the present firm were working as construction contractors, in some other name in the past (The partnership deed of old firm be enclosed).	
8	Particulars of sister construction firms, if any :	
9	i) What is the constitution of firm viz. Sole Proprietor, Partnership, Pvt. Ltd., Public Ltd., etc.	
	ii) Enclose copy of partnership deed, Articles of Association or Affidavit in case of sole proprietorship as per <b>Annexure A-1</b> .	
	iii) Fill-in enclosed <b>Annexure A-2</b> .	
10	Fill and enclose <b>Annexure B</b> giving details of enrolment with LIC of India in the past and with other organisations	

11	Has the applicant or his partners or Directors been black listed in the past by any Central or State Govt.Deptt./Organisation		
12	i) Annual Turn Over for last four years (enclose documentary evidence or proof to support figures)		Rs. in Lakh
			YEAR
		i	2007-08
		ii	2008-09
	iii	2009-10	
iv	2010-11		
ii)	What evidence of proof is enclosed to support the amounts of yearly turnover		
iii)	Enclose latest income tax clearance Certificate		Certificate enclosed for Assessment year _____
13	i) Name and complete postal address of bankers		
	ii) Enclose solvency certificate indicating amount.		
	iii) Bank Guarantee limit with Various banks		i) Rs. _____ Lac with _____ ii) Rs. _____ Lac with _____ iii) Rs. _____ Lac with _____ TOTAL
14	i) Enclose list of immovable properties with complete postal addresses, full description & reasonable market value of property duly supported by certificate of D.M./Collector/First Class Magistrate/ approved valuer.		
	ii) Whose supporting certificate is enclosed		Rs. _____ of _____ Date _____
15	i) Particulars of movable properties along with Banker's reference		
	Value of tools & plants		Rs.
	Other Assets		Rs.
	Total		Rs.
ii)	Whose reference is enclosed?		
16	Fill in and enclose list of tools & plants as per <b>Annexure-C</b> enclosed.		
17	Fill in & enclose <b>Annexure-D</b> giving full particulars about major works completed during past <b>Four</b> years <b>NOTE: List of only those works which are carried out by firm requesting for enrolment is to be</b>		

	<b>given.</b>		
18	Work in Progress:		
	i) Whether full details of major work on hand given in <b>Annexure 'E'</b>		
	ii) Are copies of work orders for such large works enclosed.		
19	Whether full information regarding permanent technical staff employed given in <b>Annexure 'F'</b>		
20	i) How do you normally carry out works of <b>water supply, sanitary and plumbing</b> installations		
	ii) Who is the license holder and what is his experience of this work.		
21	i) How do you normally get work of <b>electrical installations</b> carried out		
	ii) Who is the license holder & what is his experience		
22	Any <b>other information</b> the applicant might like to give		

**DECLARATION**

I/We agree to notify the officer accepting this application and registering my/our names on list of contractors of Life Insurance Corporation of India, of any changes in the foregoing particulars as and when they occur and to verify and confirm these annually on 1st January.

I/We understand and agree that the appropriate Life Insurance Corporation of India Authority has the right as he may decide, not to issue tender form in any particular case and also to suspend, remove or blacklist my/our name from Life Insurance Corporation of India list of contractors in the event of my/our submitting non-bonafide tenders or for technical or other delinquency in regard to which the decision of appropriate Life Insurance Corporation of India Authority shall be final and conclusive.

I/We certify that the particulars furnished in the enrolment forms are correct and that should it be found that I/We have given a false certificate or that if I/We fail to notify the fact of my/our subsequent amalgamation with another contractor or firm, the Life Insurance Corporation of India may remove my/our name from the list of contractors and any contract that I/We may be holding at the time may be rescinded.

PLACE :

DATE :

SIGNATURE OF CONTRACTOR

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: FOR OFFICE USE ONLY :

ENROLMENT FORM NO. \_\_\_\_\_ ISSUED TO \_\_\_\_\_

NOTE: **THE FILLED IN ENROLMENT FORM SHOULD REACH IN THE OFFICE ON OR BEFORE 21.11.2011.**

SIGNATURE OF ISSUING OFFICER

**A F F I D A V I T**

(On Non Judicial Stamp paper of Rs.\* \_\_\_\_\_/- in case the individual who is the sole proprietor of the firm)

I .....  
s/o ..... age ..... years, occupation business r/o  
..... do hereby state on oath as under:

That I am residing in ..... locality of District  
..... since last ..... years.

That I am the sole proprietor of a proprietary concern name and style as  
“.....” having it’s office at .....  
District ..... dealing in business of Government, civil contracts and ancillary  
works attached therefore.

Hence this affidavit.

Deponent \_\_\_\_\_

Note: **This Affidavit should be notarized.**

## LIFE INSURANCE CORPORATION OF INDIA

## CONSTITUTION OF FIRM – SOLE PROPRIETORSHIP/PARTNERSHIP/LTD.CO./OTHER

## DETAILS OF CONSTITUTENTS

Sr. No.	Name of sole partner or Director / other High Officials	Age	Share	Technical Experience			Whether power of attorney Holder
				Year to Year to	As Employee	As contractor	
1	2	3	4	5	6	7	8

SIGNATURE OF CONTRACTOR

## LIFE INSURANCE CORPORATION OF INDIA

## PARTICULARS OF ENROLMENT WITH LIC AND OTHER ORGANIZATION

- I. ENROLMENT WITH LIC :
- Name of works for 1)
- Which enrolled by 2)
- L.I.C. in the past 3)
- 4)
- Sr. Nos. for which tenders were submitted :
- Sr. Nos. for which work-order was received:

## II. ENROLMENT WITH OTHER ORGANISATIONS:

Sr. No.	Name & Address of Authority with whom you are enrolled	FIRST TIME ENROLMENT		LAST RENEWAL OR ENROLMENT			
		Year to year	Is copy of letter enclosed	Year to year	Class or Category	Limit (Rs. in Lac)	Is copy of letter enclosed
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)

SIGNATURE OF CONTRACTOR

## LIFE INSURANCE CORPORATION OF INDIA

## PARTICULARS OF SHUTTERING TOOLS AND PLANT

<b>Sr. No.</b>	<b>Item</b>	<b>Specification</b>	<b>Quantity</b>	<b>Estimated Value</b>	<b>Remarks</b>
(1)	(2)	(3)	(4)	(5)	(6)
1.	a) Shuttering plates b) Shuttering Wooden Planks c) Wooden props d) Steel props				
2.	Concrete Mixers				
3.	Concrete Vibrators i) Petrol Driven ii) Electric Driven				
4.	Tower Hoist				
5.	Trucks				
6.	Welding Equipments				
7.	Pump-Sets				
8.	Floor-Polishing Machine				
9.	Cranes				
10.	Others				

SIGNATURE OF CONTRACTOR

## LIFE INSURANCE CORPORATION OF INDIA

LIST OF MAJOR SIMILAR NATURE OF WORKS COMPLETED DURING LAST **FOUR** YEARS

Sr. No.	Name and Complete Postal Address of			Order			Value of work as per final bill (Rs. in Lac)	Commencement of work month Year	Completion of work month Year	Penalty levied for delay of completion, if any
	Site of Work & Nature of Work	Owner	Authority under whom work was carried	Ref. No. & Date	Contract Amount (Rs. in Lac)	Is copy enclosed				
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)

SIGNATURE OF CONTRACTOR

## LIFE INSURANCE CORPORATION OF INDIA

## LIST OF SIMILAR NATURE OF WORKS IN HAND

Sr. No.	Name and Complete Postal Address of			Order			Date of commencement of work	Scheduled date of completion of work	Progress made and expected date of completion and reasons for delay, if any
	Site of Work & Nature of Work	Owner	Authority under whom work was carried out	Ref. No. & Date	Amount (Rs. in Lac)	Is copy enclosed			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)

SIGNATURE OF CONTRACTOR

LIFE INSURANCE CORPORATION OF INDIA

PARTICULARS OF PERMANENT TECHNICAL STAFF

Sr. No.	Name	Designation	Age	Academic Qualification	Service with the Firm	Details of Experience Year to Year
(1)	(2)	(3)	(4)	(5)	(6)	(7)

SIGNATURE OF THE CONTRACTOR

**ANNEXURE – G****ENROLMENT CHECKLIST**

## CHECKLIST FOR ENROLMENT:

<b>Sr. No.</b>	<b>Description of Enclosure</b>	<b>Refer Item of form</b>
1.	Partnership deed / Articles of Association / Affidavit (★) (★) Annexure A-1 (Appendix VII – B)	8 (ii)
2.	Annexure (A-2) as supplied	8 (ii) (Particulars of Partners)
3.	Annexure – E (as supplied)	9 (Particulars of enrolment in LIC and other Organization)
4.	Proof of Turnover	11 (ii)
5.	Latest I.T.C.C.	11 (iii)
6.	Solvency Certificate	12 (ii)
7.	Certificate of Bank Guarantee	12 (iii)
8.	Immovable Property Certificate	13 (ii)
9.	Movable Property reference	14 (i)
10.	(★) Annexure ‘C’ (as supplied)	15 (Particulars of shuttering tools/ plant)
11.	(★) Annexure ‘D’ (as supplied)	16 (List of major works completed during last 4 years)
12.	(★) Annexure ‘E’ (as supplied)	17 (List of work in hand)
13.	(★) Copies of work order	17 (ii)
14.	(★) Annexure ‘F’ (as supplied)	18 (Particulars of permanent technical staff)

NOTE: Suitable modification to the above shall be made for different kind of Works.