



LIFE INSURANCE CORPORATION OF INDIA
DIVISIONAL OFFICE, Dr. Shiv Dulare Mishra Parisar, Vyapar Vihar, Bilaspur
Ph No.0755-261181/ 261641,FAX-261648

NOTICE FOR EMPANELMENT

Applications are invited from reputed firms for empanelment at **Life Insurance Corporation of India, Divisional Office, Dr. Shiv Dulare Mishra Parisar, Vyapar Vihar, Bilaspur** for the following works.

Printing & Order Supply

- 1.Printing of forms/books/leaflets /Printing of envelopes / dockets / Printing of Computer/Blank Continuous Stationeries
- 2.Supply of IT consumables items like Cartridges/CDs etc.
- 3.Supply of Office/Table stationeries
- 4.Supply of Fire Extinguishers
- 5.Supply of AC/Water Cooler/Water Purifier
- 6.EPBX/Telephone/Network & Telephone Cabling
- 7.Note Counting Machine, Fake Note Detecting Machine
- 8.Office Furnitures
- 9.Supply of Glow sign Boards, Flex Banners.

Services & Maintenance

1. Courier Services
2. Security Services
3. Repair & Maintenance of Fire Extinguishers/AC/Water Cooler/Water Purifier/EPBX/Telephone/Note Counting Machine, Fake Note Detecting Machine
- 4.Water treatment & Water Tank cleaning
- 5.Transport Services
- 6.Carpenter/Repairing of Furnitures
- 7.Contractors for maintenance of civil/electrical works
- 8.Tours & Travels
- 9.Photocopy/Hiring of photocopiers
- 10.Pest Control Services

The interested firms are required to **apply by 17.00 hours on 26.12.2011**. Separate forms (Annexure-A or A1) are required to be filled up for each category which may be downloaded from our website www.licindia.com (Link-Tenders). The envelope should be superscribed as “ **Application for Empanelment for Printers/Suppliers / Service Providers -----**” as appropriate and to be submitte in a sealed envelope to The Manager (OS),Divisional Office, Dr. Shiv Dulare Mishra Parisar, Vyapar Vihar, Bilaspur - 495001. The selection shall be at the sole discretion of the Competent Authority of LIC of India, Divisional Office, Bilaspur. Existing suppliers and service providers are also required to apply for fresh empanelment. Firms blacklisted by any office of the Corporation need not apply. Application forms for empanelment can also be obtained from this office between 3.00 pm and 5.00 pm till 26/12/2011. The Corporation reserves the right to accept or reject any /all applications without assigning any reason thereof.

Last Date of submission of application is at 17.00 Hours on 26/12/2011

Bilaspur :28/11/2011 **Sr Divisional Manager.**

Annexure A

Conditions for empanelment as a Printer:

- 1) The printer should be in profession of printing for at least 3 years.
(Copy of registration certificate must be enclosed)
- 2) Annual Turnover should be up to Rs 2 lacs for small jobs, Rs 2 to 10 lacs for medium jobs and above Rs 25 lacs for big jobs in the last three financial years. (Attach balance sheet for 3 years)
- 3) The printer should be on the approved panel of at least 3 reputed firms out of which at least one should be Public Sector or Government undertaking.
- 4) The printer should have at least one single colour and one 4- colour offset machine, in-house stitching and binding unit and screen printing unit.
- 5) The printer should have at least **500** sq feet area of operation for printing, binding etc. activities and sufficient storage space at one place only.
- 6) The printer should have registration with state and local authorities for undertaking the profession. (copies of state registration & Local authority license to be enclosed)



**QUESTIONNAIRE FOR PRINTING PRESS
PART I : GENERAL INFORMATION**

- 1) Name of the press
(In block letters):
- 2) Date of Establishment / Incorporation :
- 3) Address and Telephone No :
- 4) Address of Office (If Separate)
And Telephone No
- 5) Status: Whether Partnership/ Private Limited Company /
Public Limited Company :
- 6) Names of the Partners / Directors :
- 7) Name of chief Executive with
his present address and Telephone No :
- 8) Name of Representative (s)
indicating Designation who would be
calling on us and attending to our jobs :
- 9) Name of Bankers with addresses
And telephone numbers
- 10) Whether registered under the State
Value Added Tax Act, 2002 (VAT): **YES / NO**
(If yes, submit Xerox copy of Certificate of Registration)
- 11) Are you going to charge VAT in your bills: **YES / NO**
If no, mention reason and submit relevant documents:
- 12) Whether Registered under the Central Sales
Tax (Registration and Turnover) Rules, 1957: **YES / NO**
(If yes, submit xerox copy of Certificate of Registration)
- 13) Whether registered as Small Scale Industrial Unit: **YES / NO**
(If yes, submit xerox copy of Certificate of Registration)
- 14) Is the press registered under the
Factories Act? If so, state –
 - (a) License No
 - (b) Date of last renewal of license
(copy to be enclosed)
 - (c) PAN No
 - (d) ESIS No, if any
 - (e) EPF Registration no, if any
- 15) Whether holding certificate under
Shop and Establishment Act, duly renewed

(copy to be enclosed)

16) State the latest Income Tax assessed year and the amount of tax assessed (copies of last 3 years IT Returns, balance sheet & Revenue A/c to be enclosed)

17) How do you propose to compensate the loss to the Corporation arising out of theft, fire or otherwise in respect of paper material supplied to you by us.

18) Are you agreeable to make deliveries to Divisional office when so directed?

19) Are you agreeable to abide strictly by the Terms and Conditions of the Tenders and Contracts

20) Area occupied by the press

21) Total no of employees:

Permanent: ----- Temporary: -----

Skilled: ----- Unskilled: -----

22) Number of shifts you work normally

23) Timing of shifts

24) Weekly Holidays

25) Names of the offices of LIC whose printing work you may have done during the last 3 years. Mention only those offices for whom you have done sizable jobs or have done constant work (Details of job done to be given)

26) Name, Address and Telephone No of some of your most valued clients:

27) Approximate value of your output per year

28) Do you carry stocks of papers and any other material? If so what stocks do you generally hold?

29) State the nature of printing jobs undertaken by you (Full details to be given):

30) Do you undertake manufacture of

- a) Envelopes
- b) Office Files
- c) Stickers

31) Mention any other specialties of your Establishment:

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 on to the form.

PART II: TECHNICAL INFORMATION

1) Particulars of composing facilities

a) D.T.P. Systems

Make	Packages	Languages	Other Features if any

b) Other composing facilities such as hand composing

2) Particulars of scanning machines being used.

3) Printing Machines

a) Offset Machine

b) Letter press Machines

Make	Size	Speed	Other Features if any

c) Screen Printing Facility

d) Pre-printed continuous stationery machine

Make	Size	Colour	Speed	Other Features if any

4) Particulars of Positives and Plate making facility

5) Binding and Finishing

a) Cutting Machines

Make	Size of Blade	Hand/Power Drive

b) Particulars of punching machines

c) Particulars of perforating Machine

d) Particulars of gilding department

- 6) Have you got photo-typesetting machine if so; please furnish full details of type faces
- 7) If any of the equipments mentioned above is under lease, loan or hire purchase agreement should be furnished.
- 8) Please furnish details particulars of any other agreements you may have entered into which are subsisting and are likely have a bearing on the jobs, which may be entrusted to you.

I/WE _____ request Life Insurance Corporation of India, Divisional Office Bilaspur, to consider inclusion of my/our name in the list of their approved printers and agree to give full satisfaction to the Corporation in the event of their doing so.

Dated:

Signature:

Note: The Corporation reserves the right to cancel the name of the Printer from its approved lists at this absolute discretion without assigning any reason.

Check List of documents to be submitted –

- 1) Copy of PAN NO/CST NO/VAT NO /Service Tax Reg. no /TAN No
- 2) Last three years audited balance sheet and P&L Account
- 3) Copy of Registration certificate under shop & establishment act
- 4) Client List (Enclose work order of leading companies)
- 5) Partnership deed or Articles of Association and Memorandum of Association in case of company

Annexure-A 1



भारतीय जीवन बीमा निगम
LIFE INSURANCE CORPORATION OF INDIA

Divisional Office, Bilaspur

Application for empanelment of other Firms/Supplier/Service Provider (Other than Printers)

Sl No. of Category	Name of the Category

(Separate Application is to be filled-up for each category)

CONDITIONS FOR EMPANELMENT

- 1) The firm/supplier/Service Provider should be in profession for at least 3 years. (Copy of registration certificate must be enclosed)
- 2) Annual Turnover of the firm/supplier/Service Provider should be not less than Rs. 2 lacs for small jobs, Rs. 2 lacs to Rs. 10 lacs for medium jobs and above Rs.25 lacs for big jobs in any of 3 financial years. (Attach Balance Sheet for three years).
- 3) The firm/supplier/ Service Provider should be on the approved panel of at least 3 reputed firms from out of which at least one should be Public Sector or Government undertaking.
- 4) The firms/supplier/Service Provider should have registration in compliance of law of land (Copies of proof to be enclosed).
- 5) The above conditions are not compulsory for Item Nos 14.16.17 & 19.

APPLICATION FOR Firm/Supplier/Service Provider

PART I: GENERAL INFORMATION

S.No	Information Sought	Information Provided
1.	Name of the Firm: (In Block Letters)	
2.	Date of Establishment / Incorporation	
3.	Correspondence address and Telephone No.	
4.	Address of Head Office (If Separate) and Telephone No.	
5.	Status: Proprietary/ Partnership/Private Limited Company / Public Limited Company	
6.	Names of the Partners /Directors	
7.	Name of Chief Executive with his present addresses and Telephone Nos.	
8.	Name of Representative (s) with Designation who would be calling on us and attending to our jobs	
9.	Name of Bankers with addresses & telephone nos.	

10	Is the Firm is registered under the Factory Act? If so, state a) Licence Number: b) Date of last renewal of licence(Copy of licence to be enclosed) c) PAN d) ESIS No. if any e) EPF Registration No. if any	
11.	Whether holding certificate under Shops & Establishment Act, duly Renewed (Copy should be enclosed)	
12.	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)	
13.	Turn over for last three F Years F Y 2009-2010 F Y 2008-2009 F Y 2007-2008	
14.	Are you agreeable to make deliveries to Corporation's Offices within and out of Bilaspur when so directed?	
15.	Are you agreeable to abide strictly by the Terms and Conditions of the Tenders and Contracts. (copies annexed)	
16.	If your firm is empanelled with any office of L I C Of India or any other PSU (Central) , please give name and address	
17.	Name, Addresses and Telephone Nos. of some of your most valued clients (Separate List may be attached)	
18.	Approximate value of your output per year	
19.	Mention any other specialties of your Establishment	

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.

We _____
Request Life Insurance Corporation of India, Central Zonal Office, Divisional Office, Bilaspur to consider inclusion of my/our name in the list of their approved firms/suppliers/Service Providers. We agree to give full satisfaction to the Corporation in the event of their doing so.

Dated at.....this.....day of.....,2011

Signature with Seal

Name:

Designation:

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.

Check List of documents to be submitted –

- 1) Copy of PAN NO/CST NO/VAT NO /Service Tax Reg. no /TAN No**
- 2) Last three years audited balance sheet and P&L Account**
- 3) Copy of Registration certificate under shop & establishment act**
- 4) Client List (Enclose work order of leading companies)**
- 5) Partnership deed or Articles of Association and Memorandum of Association in case of company**
- 6) Copy of certificate issued by Railway/IRCTC/Airlines for Travel Agents)**
- 7) Copy of election card/telephone bill/electricity bill (for Carpenters/Book binders)**
- 8) Residence proof, Photo identity (for Carpenters/Book binders)**