

LIFE INSURANCE CORPORATION OF INDIA
MUMBAI DIVISIONAL OFFICE - I

NOTICE

APPLICATIONS FOR EMPANELMENT OF PRINTERS, MANUFACTURERS OF CONTINUOUS STATIONERY/ENVELOPES AND DEALERS OF STATIONERY & CARTRIDGES.

Applications are invited from Mumbai based printers, manufacturers and dealers for empanelment under above categories (including existing firms on our panel) on job work basis for Mumbai Divisional Office - I.

The printers, manufacturers and dealers desirous to be empanelled with us & fulfilling conditions given below may apply for getting empanelled on the panel of Mumbai Divisional Office - I for jobs undertaken at Mumbai Divisional Office - I.

The applications in questionnaire form along with the enclosures as per Annexure 'A' are to be sent at following address so as to reach us on or before **9th February, 2011.**

**Manager(OS),
Mumbai Divisional Office - I,
L I C Of India,
2nd floor, Yogakshema,
Jeevan Bima Marg,
MUMBAI – 400021.**

Tel: 022-66599060/61/62

The cover should be super scribed as “ Application for empanelment of printers/manufacture of continuous stationery/ envelopes manufacturer/ stationery/ cartridge dealer”.

Date: 21.01.2011

Sr. Divisional Manager
Mumbai Divisional Office - I

NOTE : 1) Printers, manufacturers and dealers who are on our existing panel should also apply for fresh empanelment.

2) Printers, manufacturers and dealers who have been blacklisted / removed earlier, should not apply. If applied, their applications will not be considered.

Conditions for empanelment :

- 1) The printer, manufacturer, dealer should be in profession 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 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 last 3 years).
- 3) The printer, manufacturer, dealer should be on the approved panel of at least 3 reputed Firms from Mumbai out of which at least one should be public Sector or Government undertaking.
- 4) The printer, envelopes manufacturer should have at least one 15” x 20” size single color offset machine & preferably one four Color offset machine, in-house screen printing & binding unit.
- 5) The printer, manufacturer, dealer should have at least 350 Sq. Feet area of operation for printing , binding etc. activities & sufficient storage space at one place only.
- 6) The printer, manufacturer, dealer should have registration with state & local authorities for undertaking the profession (Copies of registration & other documents are to be enclosed).



भारतीय आयुर्विमा महामंडळ
भारतीय जीवन बीमा निगम
LIFE INSURANCE CORPORATION OF INDIA

PART I : GENERAL INFORMATION

- 1) Name of the Vendor:
(In Block Letters) _____
- 2) Mention the category under which
applying for empanelment: _____
(Vendor applying for more than one category should fill up separate form for each type)
- 3) Date of Establishment /Incorporation : _____
- 4) Address and Telephone No. of _____
Printing press/Manufacturing Unit/shop: _____

- 5) Address of Office (If Separate) _____
and Telephone No.: _____

- 6) Status : Whether Sole Proprietor/Partnership/
Private Limited Company /Public Limited Company: _____
- 7) Names of the Proprietor/Partners /Directors : _____

- 8) Name of Representative (s) _____
indicating Designation who would be _____
calling on us and attending to our jobs _____
- 9) Name of Bankers with addresses _____
& telephone nos. _____

- 10) Whether registered under Shop & Establishment Act, 1948: **YES / NO**
(If yes, submit xerox copy of Certificate of Registration)
- 11) Whether registered under the Maharashtra
Value Added Tax Act, 2002 (VAT): **YES / NO**
(If yes, submit xerox copy of Certificate of Registration)

12) Are you going to charge VAT in your bills: **YES / NO**
If no, mention reason and submit relevant documents : _____

13) Whether Registered under the Central Sales Tax (Registration and Turnover) Rules, 1957: **YES / NO**
(If yes, submit xerox copy of Certificate of Registration)

14) Whether registered as Small Scale Industrial Unit: **YES / NO**
(If yes, submit xerox copy of Certificate of Registration)

15) Whether registered under Factories Act, 1948: **YES / NO**
if yes, state -
(a) Licence No. : _____

(b) Date of Last renewal of licence : _____
(Copy of the licence to be enclosed)

16) ESIS No., If any : _____

17) EPF Registration No. if any : _____

18) PAN No. : _____
(enclose Xerox copy)

19) 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)

20) How do you propose to compensate the loss to the Corporation arising out of theft, Fire or other wise in respect of paper Material supplied to you by us. _____

(enclose Xerox copy of fire insurance policy)

21) Are you agreeable to make deliveries to Corporation's offices within and out of Mumbai when so directed? _____

22) Are you agreeable to abide strictly by the Terms and Conditions of the Tenders and Contracts as and when laid down by the Corporation _____

23) Area occupied by the shop/press/office: _____

24) Total Numbers of Employees : Permanent _____ Temporary _____
Skilled _____ Unskilled _____

25) Number of shifts you work normally : _____

26) Timing of shifts : _____

27) Weekly Holidays : _____

28) Names of the offices of the 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 jobs done to be given)

29) Name, Addresses and Telephone Nos. of some of your most valued clients:

30) Approximate value of your output per year : _____

31) Are you authorized cartridge dealer: **YES/NO**

32) If yes, mention company name/brand: _____
(enclose Xerox copy of letter of authorization) _____

33) Do you carry stocks of papers and any other material : _____
If so, what stocks do you generally hold?

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

35) Mention any other specialities 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.

PART II : TECHNICAL INFORMATION

1) D.T.P. Facility - whether In-house: **YES / NO**
If no, please give detail how do you arrange for DTP : _____

2) Positives and Plate making facility – whether In-house: **YES / NO**
If no, please give detail how do you arrange the same: _____

3) Particulars of Machines:

a) Offset Machines:

Make	Size	Colour	Speed	Other Features if any

b) Collator machines

Make	Size	Colour	Speed	Other Features if any

c) Pack to pack machines:

Make	Size	Colour	Speed	Other Features if any

d) Cutting Machines/Slitter:

Make	Size of Blade	Hand/Power Driver

4) Do you have Punching machines: **YES / NO**

- 5) Do you have Perforating Machines **YES / NO**
- 6) Do you have In-house Screen Printing facility: **YES / NO**
- 7) Do you have In-house Binding facility: **YES / NO**
If yes, please give detail : _____

- 8) Have you got photo-typesetting machine: **YES / NO**
If yes, please furnish full details of type faces: _____

- 9) If any of the equipments mentioned above is under lease, loan or hire purchase agreement, details should be furnished.

- 10) 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, Mumbai Divisional Office - I, 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

Enclosures:(Give list below)

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