



LIFE INSURANCE CORPORATION OF INDIA
EAST CENTRAL ZONAL OFFICE
“JEEVAN DEEP” EXHIBITION ROAD, PATNA 800001
PHONE: 0612-2501118 / 6510206
E-mail: ecz_engg@licindia.com

PREQUALIFICATION TENDER NOTICE

LIC of India intends to invite tender for following works in the state of Bihar, Jharkahnd & Odissa .The prequalification criteria are as under:

| Sl. No | Description of work and Location | Estimated cost for each work (Rs. in lacs) (Approx) | Time of completion in days | Eligibility Criteria | | |
|--------|--|---|----------------------------|---|---|------------------------------------|
| | | | | Minimum value of single work completed in last 4 years. | Average Annual Turnover for last 4 years. (Rs. in Lacs) | Minimum Bank Solvency. Rs. in Lacs |
| 01 | Supply & installation of modular furniture with work stations for modernization of various offices within the state of Bihar , Jharkhand & Odisha. | | | | | |
| | a) For Divisional Offices | 40.00 | 60 | At least one work of Rs. 20.00 lacs | 120 | 08.00 |
| | b) For Branch & Satellite Offices | 15.00 | 45 | At least one work of Rs. 07.50 lacs | 60 | 03.00 |
| 03 | Supply of different types of steel framed cushioned chairs for modernization of various Divisional Offices within the state of Bihar , Jharkhand & Odisha. | | | | | |
| | a) For Divisional Offices | 17.00 | 45 | At least one work of Rs. 08.50 lacs | 68 | 03.40 |
| | b) For Branch & Satellite Offices | 06.00 | 45 | At least one work of Rs. 03.00 lacs | 24 | 01.20 |

NOTE: For working contractors of LIC of India, the above criteria may be relaxed by 25%.

Interested contractors experienced in similar nature of work and fulfilling the above criteria may apply by down loading '**enrolment form**'. The filled in prescribed enrolment form showing specific interest in particular work duly supported with relevant credentials should be submitted to "**The Chief Engineer, Life Insurance Corporation of India, Engineering Department, East Central Zonal Office, "Jeevandeep Bldg" 4th floor, Exhibition Road, Patna – 800001**", along with **Rs 500.00 (Non refundable)** in the form of **Demand Draft / pay Order** drawn in favour of **Life Insurance Corporation of India** payable at **Patna within 26.09.2011**. The applicant may submit one Enrollment Form for more than one job mentioning the name of works interested for. **The contractors have option to apply for the works in the all states or one or two states**. The empanelled contractors list will be published in our website.

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

04.09.2011

CHIEF ENGINEER



Life Insurance Corporation of India.

ENGINEERING DEPARTMENT, EAST CENTRAL ZONAL OFFICE

4th FLOOR, "JEEVAN DEEP", EXIBITION ROAD,
PATNA - 800 001.

Email: **ecz_engg@licindia.com**

ENROLMENT FORM

NOTE

The name of the eligible agencies will be displayed at LIC website after approval.



**LIFE INSURANCE CORPORATION OF INDIA
EAST CENTRAL ZONAL OFFICE.**

“JEEVAN DEEP” EXHIBITION ROAD, PATNA 800 001

INSTRUCTIONS FOR FILLING & SUBMISSION OF ENROLMENT FORM

The Enrolment Form alongwith the **Annexures A to H** shall be completely filled in all respects and to be submitted along with Enrolment fees of Rs. 500/- (non-refundable) by way of D.D. in favour of **Life Insurance Corporation of India** payable at Patna, to **“The Chief Engineer, Life Insurance Corporation of India, Engineering Department, East Central Zonal Office, “Jeevandeep Bldg” 4th floor, Exhibition Road, Patna – 800001** along with these instructions for filling & submission of Enrolment Form **on or before 26.09.2011!** 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 blanks 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 that 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 alongwith 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 turn over should be based on latest Income-tax Clearance Certificate, duly cleared by Income-tax Department.
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.

Signature of Agency

Encl: Enrolment Form with Annexures ‘A’ to ‘H’

Note: These instructions for filling & submission of Enrolment Form shall also be signed and submitted along with Enrolment Form alongwith annexure A to H.

LIFE INSURANCE CORPORATION OF INDIA
EAST CENTRAL ZONAL OFFICE.
 "JEEVAN DEEP" EXHIBITION ROAD, PATNA 800 001

FORM FOR ENROLMENT OF AGENCIES.

I/We.....am/are
 desirous of being enrolled on the list of agencies for proposed construction of(Name of
 work) and hereby apply for the enlistment. I/We give the following details for your consideration:

| Sl. No. | Query | : | Answer |
|---------|---|---|--------|
| 1. | Name of the firm | : | |
| 2. | Address | : | |
| 3. | Telephone Number Office | : | |
| | Residence | : | |
| | Fax No., if any | : | |
| | E-Mail, if any | : | |
| 4. | Month and year in which the firm was established in present name | : | |
| 5. | 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) | : | |
| 6. | Particulars of sister construction firms if any | : | |
| 7. 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 Annexure A-1 | : | |
| | | | |

| Sl. No. | Query | | Answer | |
|---------|---|---|---|-------------|
| iii) | Fill-in enclosed Annexure A-2 | : | | |
| 8. | Fill and enclose Annexure-B giving details of enrolment with LIC of India in the past and with other Organizations | : | | |
| 9. | Has the applicant or his partners or Directors been black listed in the past by any Central or State Government Dept./ Organization | : | | |
| 10. i) | Annual Turn Over for last four years (enclose documentary evidence or proof to support figures) | : | Year | Rs. in Lac. |
| | | | i) 2007-2008 | |
| | | | ii) 2008-2009 | |
| | | | iii) 2009-2010 | |
| | | | iv) 2010-2011 | |
| ii) | What evidence of proof is enclosed to support the amounts of yearly turnover | : | | |
| iii) | Enclose for the last three years income tax clearance certificate | : | Certificate enclosed for Assessment years | |
| 11. 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..... | |
| | | | Total Rs. | |
| 12. i) | Enclose list of immovable properties with complete postal addresses, full description & reasonable market value of property duly supported by certificate of DM/Collector/First Class Magistrate/Approved valuer/ Revenue authorities | : | | |
| ii) | Whose supporting certificate is enclosed | : | Rs..... of..... Date..... | |

Contd....

| Sl. No. | Query | | Answer |
|---------|--|---|--------|
| 13. i) | Particulars of movable properties along with Banker's reference | : | |
| ii) | Value of tools & plants | : | Rs. |
| | Other Assets | : | Rs. |
| | Total | : | Rs. |
| iii) | Whose reference is enclosed | : | |
| 14. | Fill in and enclose list of tools & plants as per Annexure-C enclosed | : | |
| 15. | <p>Fill in enclosed Annexure D giving full particulars about major works completed during the past three years</p> <p>Note : List of only those works which were similar in nature and carried out by the firm requesting for enrolment is to be given</p> | : | |
| 16. | Work in progress | : | |
| i) | Whether full details of major work on hand given in Annexure-E | : | |
| ii) | Are copies of work orders for such large works enclosed | : | |
| 17. | Whether full information regarding permanent technical staff employed given in Annexure-F | : | |
| 18. | Whether check list submitted as per Annexure-H | : | |
| 19. | Any other information the applicant might like to give | : | |
| 20 | Service Tax Registration No | : | |

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 WITH SEAL

: FOR OFFICE USE ONLY:

ENROLMENT FORM NO.....SUBMITTED

BY..... FOR (NAME OF WORK): -----

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

26.09.2011

**SIGNATURE OF RECEIVING OFFICER
LIC OF INDIA, ECZO, PATNA.**

LIFE INSURANCE CORPORATION OF INDIA

A F F I D A V I T

(On Non Judicial Stamp Paper of appropriate value 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 lastyears.

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 notarised .

LIFE INSURANCE CORPORATION OF INDIA

CONSTITUTION OF FIRM - SOLE PROPRIETORSHIP/PARTNERSHIP/LTD.CO./OTHER DETAILS OF CONSTITUENTS

| Sl.No. | Name of sole partner or Director/ other High Officials | Age | Share | Technical Experience | | | Whether power of attorney Holder |
|--------|--|-----|-------|----------------------|-------------|---------------|----------------------------------|
| | | | | Year to year | As Employee | As Contractor | |
| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) |
| | | | | | | | |

SIGNATURE OF CONTRACTOR
SEAL & DATE

LIFE INSURANCE CORPORATION OF INDIA

ANNEXURE-B

PARTICULARS OF ENROLMENT WITH GOVT. AND OTHER REPUTED ORGANISATIONS

ENROLMENT WITH LIC:

- Name of works for 1)
- Which enrolled by 2)
- L.I.C. in the past 3)
- 4).

Sl. No. of which tenders were submitted:

Sl. No. of which work – order was received:

ENROLMENT WITH ORGANISATIONS:

| Sl. No. | Name and 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 lacs) | Is copy of letter enclosed |
| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) |
| | | | | | | | |

**SIGNATURE OF CONTRACTOR
SEAL & DATE :**

LIFE INSURANCE CORPORATION OF INDIA

PARTICULARS OF TOOLS AND PLANT

| SI.No. | Item | Specification | Quantity | Estimated Value | Remarks |
|--------|------|---------------|----------|-----------------|---------|
| (1) | (2) | (3) | (4) | (5) | (6) |
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SIGNATURE OF CONTRACTOR
SEAL & DATE

LIFE INSURANCE CORPORATION OF INDIA

LIST OF MAJOR SIMILAR NATURE WORKS COMPLETED DURING LAST FOUR YEARS

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

NOTE: To enable us to process your application quickly, please ensure that complete Postal Address including Pin Code and Telephone Numbers / Fax Numbers / E-mail Address etc. are furnished under Column No.s.2, 3 & 4 above

**SIGNATURE OF CONTRACTOR
SEAL & DATE**

LIFE INSURANCE CORPORATION OF INDIA

LIST OF WORKS IN HAND

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

NOTE: To enable us to process your application quickly, please ensure that complete Postal Address including Pin Code and Telephone Numbers / Fax Numbers / E-mail Address etc. are furnished under Column No.s.2, 3 & 4 above

**SIGNATURE OF CONTRACTOR
SEAL & DATE**

ANNEXURE-F

LIFE INSURANCE CORPORATION OF INDIA

PARTICULARS OF PERMANENT TECHNICAL STAFF

| Sl. 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 CONTRACTOR
SEAL & DATE**

ANNEXURE-G

LIFE INSURANCE CORPORATION OF INDIA

ANNUAL TURNOVER FOR THE LAST FOUR YEARS

| Sl. No. | Financial Year | Total contract amount received | IT Certificate enclosed Yes/No | Audited Balance sheet copy enclosed Yes/No | Remarks |
|---------|----------------|--------------------------------|--------------------------------|--|---------|
| (1) | (2) | (3) | (4) | (5) | (6) |
| 1. | 2010-2011 | | | | |
| 2. | 2009-2010 | | | | |
| 3. | 2008-2009 | | | | |
| 4. | 2007-2008 | | | | |
| | | | | | |

**SIGNATURE OF CONTRACTOR
SEAL & DATE**

LIFE INSURANCE CORPORATION OF INDIA

ENROLMENT CHECKLIST**CHECKLIST FOR ENROLMENT:**

| Sl.No. | Description of Enclosure | Refer item of form | Enclosed/Not Enclosed |
|--------|--|--|-----------------------|
| 1. | Partnership deed / Articles of Association / Affidavit (Annexure A-1) | 7 (ii) | |
| 2. | Annexure(A-2) as enclosed | 7(iii) (particulars of partners) | |
| 3. | Annexure B (as enclosed) | 9 (particulars of enrolment in LIC and other Organization) | |
| 4. | Proof of turnover | 10(ii) | |
| 5. | Latest I.T.C.C. | 10(iii) | |
| 6. | Solvency Certificate | 11(ii) | |
| 7. | Certificate of Bank Guarantee | 11(iii) | |
| 8. | Immovable properties certificate | 12(ii) | |
| 9. | Movable properties reference | 13(ii) | |
| 10. | Annexure C (as enclosed) | 14 (particulars of tools and plant) | |
| 11. | Annexure D (as enclosed) | 15 (List of major works completed during last 3 years) | |
| 12. | Annexure E (as enclosed) | 16 i(List of work in hand) | |
| 13. | Copies of work order | 16(ii) | |
| 14. | Annexure F (as enclosed) | 17 (particulars of permanent technical staff) | |

SIGNATURE OF CONTRACTOR

