

**LIFE INSURANCE CORPORATION OF INDIA**  
**EASTERN ZONAL OFFICE**  
**EMPANELMENT OF PRINTER**

**NOTICE**

Applications are invited from the printers having their Printing Press at Kolkata for the empanelment of printers for various primes, medium, and small printing jobs of Eastern Zonal office. The printers desirous to be empanelled with us for printing of various jobs & fulfilling conditions as per Annexure 'A' may apply for getting empanelled on the panel of Eastern Zonal office for jobs undertaken at Zonal office. 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, **Date\_\_15.01.2010 time\_3.00 PM.**

**REGIONAL MANAGER (OS)**  
**L I C OF INDIA**  
**EASTERN ZONAL OFFICE**  
**HINDUSTHAN BUILDING (4TH FLOOR)**  
**4, C.R. AVENUE, KOLKATA – 700 072**

**Enclo : PART - I & PART - II**

The cover should be super scribed as **“Application for Empanelment of Printer”**

**Zonal Manager**

**NOTE** : 1) Firms/suppliers who are on our Divisional Office existing panel should also apply for fresh empanelment.

2) Firms/suppliers who have been blacklisted/ removed earlier, should not apply. If applied, their applications will not be considered.

3) All applications received in closed cover will be opened on 16.01.2010 at 2.30 pm.

**ANNEXURE 'A'**

**Conditions for empanelment :**

- 1) The Printer 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/CA certificate for 3 years ).
- 3) The Printer should be on the approved panel of at least 3 reputed Firms from Kolkata out of which at least one should be public Sector or Government undertaking.
- 4) The Printer should have registration with state & local authorities for undertaking the profession ( Copies of state registration & B.M.C. license to be enclosed )
- 5) The Printer should have at least 2000 sq. Feet area of operation for printing, binding etc. activities & sufficient storage space at one place only.
- 6) The printer should have registration with state & local authorities for undertaking the profession (Copies of state registration & B.M.C. lincense to be enclosed)

**PART - I**

**QUESTIONNAIRE FOR PRINTING PRESS**

**PART I : GENERAL INFORMATION**

- 1) Name of the Firm (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 addresses and Telephone Nos. ....
- 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) Is the firm registered Under the Factories Act ? If so, state : .....
- (a) Licence No. : .....
- (b) Date of Last renewal of licence (Copy of the licence to be enclosed) : .....
- (c) PAN No. : .....
- (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 : .....

- 13) VAT Clearance Certificate. Assessed year and the amount of Tax assessed Copies of last 3 years, IT Returns, Balance Sheets & Revenue A/c to be enclosed :
- 14) 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 :-----  
-----
- 15) Are you agreeable to make deliveries to Corporation's offices within and out of Kolkata when so directed ?  
-----  
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- 16) Are you agreeable to abide strictly by the Terms and Conditions of the Tenders and Contracts. (copies annexed) -----
- 17) Area occupied by the press : -----
- 18) Total Numbers Employees : Permanent \_\_\_\_\_ Temporary \_\_\_\_\_ Skilled \_\_\_\_\_ Unskilled \_\_\_\_\_
- 19) Number shifts you work normally : -----
- 20) Timing of shifts : -----
- 21) Weekly Holidays : -----
- 22) 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)  
.....  
.....
- 23) Name, Addresses and Telephone Nos. of some of your most valued clients :  
.....  
.....
- 24) Approximate value of your output per year : -----
- 25) Do you carry stocks of papers and any other material ? If so, what stocks do you generally hold?  
.....
- 26) State the nature of printing jobs undertaken : by you. (Full details to be given)  
.....
- 27) Do you undertake manufacture of : a) Envelopes : ----- b) Office Files : ----- c) Stickers : -----
- 28) Mention any other specialties of your Establishment :-----  
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**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

- 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 Machine : -----
- 4) Particulars of Positive and Plate making facility :-----
- 5) Binding and Finishing : a) Cutting Machine -----
- 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, Eastern Zonal Office, Kolkata 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 : 1. Selected Vendors will only be informed of the decision of empanelment. No. communication will be made with the form whose application is rejected.**
- 2. The Corporation reserves the right to cancel the name of the Printer from its approved lists at its absolute discretion without assigning any reason.**

**LIFE INSURANCE CORPORATION OF INDIA**  
**EASTERN ZONAL OFFICE**  
**EMPANELMENT OF SUPPLIER**  
**NOTICE**

Applications are invited from the firms/suppliers having their establishments at Kolkata for the empanelment for various jobs of Eastern Zonal office, Kolkata as under Supply of -

1. Table and office stationery such as pens, files etc.
2. IT consumables such as cartridges, floppies, CDs etc.
3. Crockery items.
4. Calculators.
5. Telecommunication equipment such as Epabx, Fax, Telephone Instruments, Mobiles etc.
6. Note counting machines, fake currency detectors.
7. Furniture and Fittings.
8. Water purifiers.
9. Refrigerators.
10. Courier Services.
11. Transportation services.
12. Office upkeep services
13. Car rental services.
14. Security Service.

The firms/suppliers desirous to be empanelled with us for various jobs & fulfilling conditions as per Annexure 'A' may apply for getting empanelled on the panel of Eastern Zonal office, Kolkata for jobs undertaken at Zonal office. 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, **Date\_15.01.2010 time\_3.00 pm.**

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**L I C OF INDIA**  
**EASTERN ZONAL OFFICE**  
**HINDUSTHAN BUILDING (4TH FLOOR)**  
**4, C.R. AVENUE, KOLKATA - 700072**

The cover should be super scribed as "**Application for Empanelment of firms/suppliers**".

**Zonal Manager**

**NOTE : 1) Firms/suppliers who are on our Divisional Office existing panel should also apply for fresh empanelment.**

**2) Firms/suppliers who have been blacklisted/ removed earlier, should not apply. If applied, their applications will not be considered.**

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**ANNEXURE ' A '**

**Conditions for empanelment :**

- 1) The firm/supplier 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/CA certificate for 3 years ).
- 3) The firm should be on the approved panel of at least 3 reputed Firms from Kolkata out of which at least one should be public Sector or Government undertaking.
- 4) The firm/supplier should have registration with state & local authorities for undertaking the profession ( Copies of state registration & B.M.C. license to be enclosed )

**QUESTIONNAIRE FOR FIRM/SUPPLIER**  
**PART I : GENERAL INFORMATION**

**Please specify the name of item/items as mentioned under 1 to 14 above for which empanelment is disired.**

- 1) Name of the Firm : -----  
(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 addresses and Telephone Nos. :-----  
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- 8) Name of Representative (s) indicating Designation who would be calling on us and attending to our jobs :-----  
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- 9) Name of Bankers with addresses & telephone nos. :-----  
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- 10) Is the firm registered Under the Factories Act. If so, give details – -----  
-----
- (a) Licence No. :-----
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- 15) Are you agreeable to abide : strictly by the Terms and Conditions of the Tenders and Contracts. (copies annexed).  
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- 17) Name, Addresses and Telephone Nos. of some of your most valued clients:  
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-----
- 18) Approximate value of your output per year :-----
- 19) Mention any other specialties of your Establishment:-----

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I/WE \_\_\_\_\_  
request Life Insurance Corporation of India, Eastern Zonal Office, Kolkata to consider inclusion of my/our name in the list of their approved firms/suppliers and agree to give full satisfaction to the Corporation in the event of their doing so.

Dated :-----

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Signature

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