LIFE INSURANCE CORPORATION OF INDIA DIVISIONAL OFFICE-SATNA
Geharanala Nai Basti, Rewa Road, Near Degree College, Satna MP. 485001

भारतीय जीवन बीमा निगम
LIFE INSURANCE CORPORATION OF INDIA

Tel: 9425539866 **Email: os.satna@licindia.com**

NOTICE FOR EMPANELMENT OF VENDORS /SERVICE PROVIDERS 2025-2028

Applications are invited from reputable authorized dealers/vendors/service providers/ Manufacturers for empanelment for the following items.

Sl. No.	Nature of Services
1	Printing & Supply of forms/books/leaflets/visiting cards/Id cards/letter pads/PVC folders, etc.
2	Supply of Computer continuous blank stationery & Pre printed Computer continuous stationery
3	Printing & supply of Envelops & Dockets
4	Supply and servicing of IT consumables items like Cartridges/Toner /CD's etc.
5	Supply of Office/Table stationery including Pens, Photocopier paper etc.
6	Supply and servicing of Fire Extinguishers / Fire Alarm System
7	Supply of Security Services including Gunmen, Security Guard ,sweeper, casual temporary daily workers /watchmen, caretaker, gardener ,pump operator services related to fire hydrant system, And other services on minimum wages act on daily basis.
8	Supply & servicing of UPS,Battery & Stabilizers
9	Supply and Annual maintenance contract of AC/Water Cooler/Water purifier/ EPABX etc.
10	Supply and servicing of Office Furniture & fittings, office equipments Racks etc
11	Supply & Servicing of Miscellaneous works Including Photocopy Services / Electric Work / Civil work / Pest Control Services etc.
12	Supply and servicing of Note Counting Machine, Fake Note Detecting Machine
13	Supply and servicing of C.C.T.V. CAMERA
14	Tours & Travels Service { Air, Train & Bus ,Taxi Travel }
15	Courier services [FOR local vendor only]**

The interested firms are required to apply before 05.00 P.M. till 24/06/2025. Separate Application form {Annexure "A" for Other then Printers & Annexure "B" For Printers} for empanelment is to be submitted for each item which may be collected from our Office from Manager {OS} by paying Rs. 295/- (Rs.Two Hundred Ninety Five only - inclusive of GST) in Cash (MR should be deposited through our cash counter at Divisional Office, Satna 10:00 AM TO 4:00 PM)/DD/Banker's Cheque payable at LIC of India, Satna. Application forms, Terms and conditions can also be downloaded from our website www.licindia.in. Application will be accepted on the forms as prescribed by this office. The duly filled Application form should be submitted in a closed envelope super scribed as:- **"Application for Empanelment of Suppliers /Vendors/Item Sr.No……. (Name of item)" to**

The Chairman (Store Committee),
L.I.C. of India, Divisional Office-Satna
Gehra Nala, Nai Basti,
Rewa Road, Satna -485001.

The firms/suppliers who are already on our panel are required to apply for fresh empanelment, if interested. Firms/suppliers who have been black listed/removed by the LIC of India earlier should not apply. If they apply, their applications will not be considered.

No Brokers/Intermediaries shall be entertained. LIC of India reserves the right to accept or reject any or all offers in full/part without assigning any reason whatsoever. Any amendments regarding this empanelment will be available only on our above given website.

Filled in application should reach us by 05:00 PM on 24.6.2025

Date: 04.6.2025 **Sr. Divisional Manager**

ELIGIBILITY CRITERIA:-

1 The firm should have been established 3 years before.

2 The firms/suppliers who are already on our panel are required to apply for fresh empanelment, if interested.

3 Firms/suppliers who have been black listed / removed by the LIC earlier, should not apply. If they apply, their applications will not be considered.

4 Mere submission of Application for empanelment does not mean the right of empanelment. The Life Insurance Corporation of India reserves its right to reject, accept any or all applications or cancel the process of empanelment without assigning any reason thereof for which the Life Insurance Corporation of India shall neither be liable nor obliged to inform the applicant the grounds for any such action.

5 Applications incomplete in any respect will not be entertained and are liable to be rejected.

6 The LIC has right to change the terms and conditions at any point of time.

7 For any clarifications please email to : os.satna@licindia.com

8 If the firm is on the approved panel of any PSUs or Large Public Limited Companies or MNCs, recent copy of empanelment or work order should be enclosed.

9 The firm Should have registration with state or local authorities for undertaking the profession. { Copy of registration, License etc. should be enclosed.}

SR.DIVISIONAL MANAGER

APPLICATION FORM FOR EMPANELMENT OF FIRM FOR 2025-2028
(FROM DATE OF EMPANELMENT TO FURTHER 3 YRS.)
OTHER THEN PRINTERS (Separate application is to be filled for each category)

"ANNEXURE-A"

S.NO.OF ITEM :
NAME OF ITEM:

S.no.	INFORMATION SOUGHT	INFORMATION PROVIDED
1	Name of The Firm {In Block Letter}	
2	Date of establishment /Incorporation. { The firm should have been established 03 year before }	
3	Correspondence address and Telephone No. [Details of email and website, if any].	
4	Address of Head Office (if Separate) and Telephone No.	
5	Name of Chief Executive with his Present addresses and Telephone Nos.	
6	Name of Representative(s)with Designation who would be calling on us and attending to our jobs.	
7	Name of bankers with addresses with whom you maintain the bank accounts.	
8	PAN No.	
9	GST NO.	
10	Whether holding certificate under shops & establishment act, If "YES" duly renewed copy should be enclosed.	
11	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)A.Y.(2022-23, 2023-24, 2024-25)	
12	Are you agreeable to abide strictly by the Terms and Conditions of the Tenders and Contracts.	
13	If your firm is empanelled with any of office of LIC of India or any other PSU (Central) Please give name, address & since when you are empanelled with them.	
14	Please furnish Particulars of MSMED/NSIC, if registered[Please enclose copy]	
15	TURN-OVER FOR FY.(2021-22, 2022-23, 2023-24)	
16	Whether registered with State / local authorities for running the business/service activities	

Terms & Conditions for Empanelment For Material suppliers & Service Providers 2025-2028:

1. **The applicant firm/supplier should be in the same activity for at least 3 years as described in application form. (Copy of proof must be enclosed).**
2. **If the firm is on the approved panel of any PSUs or Large Public Limited Companies or MNCs, recent copy of empanelment or work order should be enclosed.**
   { Not applicable, for Guest house maintenance, Carpenter, Photocopier, Electric Works & Tour Travels }
3. **The Firm/supplier should have registration with State & local authorities for running the business/service activities etc. (Copies of proof to be enclosed) { Not applicable for Guest house maintenance, Carpenter, Photocopier }**
4. **In terms of Provisions of Section 33 (3) of the Insurance Act, 1938, as amended by the Insurance Laws (Amendments) Ordinance, 2014, the Insurance Regulatory Authority of India (IRDAI) is authorised to verify all such books of account, register, other documents and the data base in the custody of the contractor in respect of services outsourced by the LIC of India. It shall be the duty of the contractor to provide such documents/ statements / information as may be required by the IRDAI within such time as may be specified by the IRDAI.**
5. **All certificates should be self attested**
6. **Annual Turnover should be up to Rs.2 lacs for small job,Rs.2 lacs to Rs.10 lacs for medium jobs and above Rs.25 lacs for big jobs in any of 3 financial year.(Attach Balance sheet/certificate for 3 years)**

DECLARATION:

1. **I/We request the Life Insurance Corporation of India, Satna Division, to Consider/ Inclusion of my/our name in the list of their approved firms/suppliers.**
2. **I/We have read the instructions and I/We understand that the information furnished now is found false at a later date, any contract made between ourselves and the LIC, on the basis of the information given by me/us can be treated as invalid at the sole discretion of the LIC and I/We will be solely responsible for the consequences.**
3. **I/We agree that the decision of the LIC in selection of Manufacturer/ printers/ vendors / contractor/ service providers will be final and binding on me/us.**
4. **All the information furnished by me hereunder is correct to the best of my/our knowledge and belief.**
5. **I/We agree that I/We have no objection if inspection of my/our premises/ workshop, shop etc., is done by the Officials of the LIC.**

Signature

Name & Designation

Seal of the firm/company

Place :

Date :

CHECK LIST OF ENCLOSERS FOR OTHER THEN PRINTERS –

{ Advised to tick YES / NO AS APPLICABLE }

S. N	ITEM	Proof Enclosed
1	MSME REGISTRATION CERTIFICATE VALID AS ON DATE { IF APPLICABLE }	YES / NO
2	PAN No. COPY	YES / NO
3	COPY OF I.T.R. OF LAST 03 YEAR	YES / NO
4	PROOF OF TURN OVER{ IF APPLICABLE }	YES / NO
5	GST REG. CERTIFICATE	
6	COPY OF CERTIFICATE UNDER SHOPS & ESTABLISHMENT ACT { IF APPLICABLE }	YES / NO
7	IS YOUR FIRM EMPANNELED WITH ANY OFFICE OF LIC OF INDIA OR ANY PSU { PLEASE ATTACH COPY OF PRROF }	YES / NO
8	CLIENT LIST { ENCLOSE WORK ORDER COPY } IF APPLICABLE	YES / NO
9	RESIDENCE PROOF & PHOTO IDENTITY PROOF { FOR Guest house maintenance, Carpenter, Photocopier, Electric Works }	YES / NO
10	COPY OF CERTIFICATE ISSUED BY RAILWAY/IRCTC/AIRLINES FOR TRAVEL AGENTS { For Air Travel Agencies I.A.T.A. Registration is required }	YES / NO
11	COPY OF REGISTRATION WITH STATE / LOCAL AUTHORITIES FOR RUNNING THE BUSINESS/SERVICE ACTIVITIES	YES / NO

APPLICATION FORM FOR EMPANELMENT OF FIRM FOR 2025-2028 FOR PRINTER

(Separate application is to be filled for each category)

"ANNEXURE-B"

S.NO.OF ITEM :

NAME OF ITEM:

Terms &Conditions For Empanelment as a Printer 2025-2028:-

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 average Rs 2 lacs for small jobs, average Rs 2 to 10 lacs for medium jobs and average Rs 25 lacs and above 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 color and one 4- color offset machine, in-house stitching and binding unit and screen printing unit.

5) The printer should have at least 1000 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)

7)The Printer should keep sufficient stock in hand so as to comply with the urgent needs without delay.

QUESTIONNAIRE FOR PRINTING PRESS

PART I : GENERAL INFORMATION

Sl NO	Information sought	Information given
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 and mobile no who would be calling on us and attending to our jobs :	
9	Name of Bankers with addresses And telephone numbers	
10	TURN OVER FOR FY. 2021-22,2022-23,2023-24	
11	Whether registered as Small Scale Industrial Unit: YES / NO (If yes, submit Xerox copy of Certificate of Registration)	
12	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) ESIC No, if any (e) EPF Registration no, if any	
13	Whether holding certificate under Shop and Establishment Act, duly renewed(copy to be enclosed)	
14	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)	
15	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.	
16	Are you agreeable to make deliveries to Corporations office within and out of satna when so directed?	
17	Are you agreeable to abide strictly by the Terms and	

	Conditions of the Tenders and Contracts.	
18	**Area occupied by the press.**	
19	**Total no of employees:** **Permanent: ---------- Temporary: -------** **Skilled: ---------- Unskilled: ----------**	
20	**Number of shifts you work normally** **Timing of shifts**	
21	**Weekly Holidays**	
22	**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)**	
23	**Name, Address and Telephone No 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:**	

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

Make	Size	Color	Speed	Other features if any

b) Letter press Machines

Make	Size	Speed	Other features if any

c) Screen Printing Facility

d) Pre-printed continuous stationery machine

Make	Size	Color	Speed	Other feature if any

4) Particulars of Positives and Plate making facility

5) Binding and Finishing

a) Cutting Machines

Make	Size of Blade	Hand/Power Driver

b) Particulars of punching machines

c) Particulars of perforating Machine

d) Particulars of gilding department

6) Have you got photo-type setting 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.

Note:

1/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.

2/The Corporation reserve the right to cancel the name of Firm/Suppliers/Service provider from its approved lists at his absolute discretion without assigning any reason.

All the pages of application from and documents must be signed with seal.

DECLARATION

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

.2/ I/We have read the instructions and I/We understand that the information furnished now is found false at a later date, any contract made between ourselves and the LIC, on the basis of the information given by me/us can be treated as invalid at the sole discretion of the LIC and I/We will be solely responsible for the consequences.

3/ I/We agree that the decision of the LIC in selection of Printer will be final and binding on me/us.

4/ All the information furnished by me hereunder is correct to the best of my/our knowledge and belief.

5/ I/We agree that I/We have no objection if inspection of my/our premises/workshop/shop etc. is done by the Officials of the LIC.

Dated: …… **Signature with Seal**

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

CHECK LIST OF ENCLOUSERS FOR PRINTER – { Advised to tick YES / NO AS APPLICABLE }

S.N	ITEM	Proof Enclosed
1	MSME REGISTRATION CERTIFICATE VALID AS ON DATE { IF APPLICABLE }	YES / NO
2	PAN No. COPY	YES / NO
3	COPY OF I.T.R. / BALANCE SHEET OF LAST 03 YEAR	YES / NO
4	PROOF OF TURN OVER	YES / NO
5	GST CERTIFICATE NO.	YES / NO
6	COPY OF CERTIFICATE UNDER SHOPS & ESTABLISHMENT ACT { IF APPLICABLE }	YES / NO
7	IS YOUR FIRM EMPANNELED WITH ANY OFFICE OF LIC OF INDIA OR ANY PSU { PLEASE ATTACH COPY OF PROOF }	YES / NO
8	CLIENT LIST { ENCLOSE WORK ORDER COPY } IF APPLICABLE	YES / NO