

Life Insurance Corporation of India.

Jorhat Divisional Office.

Rajabari, Jorhat-785014**Technical Bid**

Reference No.....

(Note: The reference number to be filled up by the tenderers for the particular Premises offered and shall be quoted in price Bid also for easy and correct identification.

| Sr | | | Detail | Remarks |
|----|----------------------------------|--|---|---------|
| 1 | 1 | | Name of the Lessor | |
| | 2 | a | Address of the Lessor | |
| | | b | Phone No. | |
| | | c | Fax No. | |
| | | d | E - Mail ID | |
| | | e | Permanent Account Number (PAN) | |
| | 3 | a | Name of the contact person duly authorized. | |
| | | b | Phone No. | |
| | 4 | a | Constitution of vendor/ firm (Proprietary/ Partnership/ Private/ Pvt.Ltd./ Public Ltd/ PSU etc) | |
| | | b | PAN numbers of the Directors/ Partners/ Firms. | |
| 2 | Details of the property : | | | |
| | 1 | Name of the Owner | | |
| | 2 | Address : | | |
| | 3 | Phone No. | | |
| | 4 | Name of the building | | |
| | 5 | Details of encumbrances, if any? | | |
| | 6 | Location and address of the property | | |
| | 7 | Usage of the property (as approved by the Competent Authority). | | |
| | 8 | a | Residential | |
| | | b | Commercial | |
| | | c | Residential cum Commercial | |

| | | | | |
|--|----|---|--|--|
| | | d | Shopping centre | |
| | 9 | Whether the proposal for Office premises in a multi - storied building. | | |
| | | a | Number of floor in the building. | |
| | | b | At which floor, the office premises are offered. | |
| | 10 | CTS No | | |
| | 11 | Survey No | | |
| | 12 | Ward NO | | |
| | 13 | Whether the plot is free hold or lease hold? | | |
| | | b | If lease hold, please mention the details of | |
| | | i | Name of the Title Holder/ Lessor | |
| | | ii | Tenure of the land | |
| | | iii | Residual lease period | |
| | | iv | Annual lease rents and amount. | |
| | | c | Whether the property is mortgaged? If yes mention the details. | |
| | | i | Name of the Organization where the property is mortgaged. | |
| | | ii | Address of the Organization with phone no. | |
| | | iii | Amount of loan availed. | |
| | | iv | Tenure of mortgage | |
| | | v | Residual mortgage period | |
| | | vi | EMI paid. | |
| | 14 | Character / Type of locality | | |
| | | a | Residential | |
| | | b | Commercial | |
| | | c | Commercial cum Residential | |
| | | d | Industrial | |
| | | e | Slum | |
| | 15 | Area of the plot | | |
| | 16 | Size of the plot | | |
| | | a | Frontage in meters | |

| | | | | |
|--|----|---|--|--|
| | | b | Depth in meters | |
| | 17 | Schedule of the plot i.e. boundaries of the plot on | | |
| | | a | North | |
| | | b | East | |
| | | c | South | |
| | | d | West | |
| | 18 | Whether the locality is free from Special hazards like fire / flood etc. | | |
| | 19 | Whether the locality has protection from adverse influence such as | | |
| | | a | Encroachment. | |
| | | b | Industrial nuisance, smoke, noise etc. | |
| | 20 | Please enclose copy of Property Card or Patta etc. | | |
| | 21 | Please also indicate distance from the nearest | | |
| | | i | Railway (local) station | |
| | | ii | Bus Stand | |
| | | iii | Bank (Nearest) | |
| | | iv | Airport | |
| | | v | Hospital/ Schools/ Colleges/ Universities. | |
| | 22 | Year of construction. Enclose a attested copy of NOC or Occupancy certificate issued by the Municipal Authority or any other Government Bodies. | | |
| | 23 | a | Incase of old constructions, NOC from the Society may be enclosed | |
| | | b | Mention year of completion (as given in Completion Occupancy Certificate issued by the Authority) . | |
| | | c | Indicate in whose name the conveyance deed is executed. | |
| | 24 | Date on which Office premises can be handed over to LIC after finalization of the deal. | | |
| | 25 | Built up area of the premises being offered now for office usages on lease basis. Please enclose copies of approved plans. | | |
| | 26 | What is the carpet area (for consideration purpose). | | |
| | 3 | Specifications | | |
| | 1 | Type of building (Residential/Semi commercial)? | | |
| | 2 | Type of structure (RCC / Steel framed/ load bearing). | | |

| | | | | |
|---|--|---|---|-------------------------------------|
| | 3 | Type of wall (Brick/ Cement block). Mention thickness of external wall and internal partition wall. | | |
| | 4 | Details of Flooring (M.M.Tiles/ Ceramic/ Vitrified/ Marble) or any other. | | |
| | 5 | Details of Door frames (Sal wood/ Teak Wood/ Hard wood/ Aluminum) or any other. | | |
| | 6 | Details of Door shutters (Flush door/ Teak wood/ Aluminum / PVC) or any other. | | |
| | 7 | Details of Window frames (Sal wood/Teak Wood/ Hard wood/ Aluminum) or any other. | | |
| | 8 | Details of window shutters (Teak wood / Aluminum / steel) or any other with security grills or without security grills. | | |
| | 9 | i | No of toilets in each floor. | |
| | | ii | Details of Floors and Dado in Toilets. | |
| 4 | Whether Structural stability certificate enclosed (Certificate shall be from Licensed Structural Engineer of Municipal Corporation) | | | |
| 5 | Service | | | |
| | 1 | If Lift facility is available, please give details of Number of lifts, capacity, make and the year of installation. | | |
| | 2 | Please indicate source of water supply. | | |
| | 3 | Is bore well provided? If so what is the yield and depth of bore well. | | |
| | 4 | Capacity of the over head tank feeding to the office premises under consideration for leasing. | | |
| | 5 | Please give details of sewerage system and for storm water disposal. | | |
| | 6 | Please indicate whether the building is prone to flooding. | | |
| 6 | Electricity | | | |
| | 1 | i | What is the connected load to the building in KW / KVA? | |
| | | ii | Type of electric connection. | Commercial / Residential. |
| | 2 | Please indicate the type of wiring used , Aluminum or copper? | | |
| | 3 | | Whether ELCB is provided | Yes / No |
| 7 | Common services | | | |
| | 1 | Car parking | | Reservednos. Open.....nos. |
| | 2 | Two wheeler parking | | Reservednos. Open.....nos. |
| | 3 | Power / Electricity supply available. | | Yes / No |
| | 4 | 24 Hrs. water / Overhead tanks available. | | Yes / No |
| | 5 | Generator for emergency. If yes mention, capacity of the Generator. | | Yes / No |

| | | | |
|-----------|--|--|----------|
| | 6 | Anti lightening device arrangement. | Yes / No |
| | 7 | Security arrangements, please give details. | |
| 8 | Other Information | | |
| | 1 | Whether any ready built flats / Office premises have been constructed and sold by the builder to any government and semi government institutions/Financial institutions? If so please give name and addresses of such clients. | |
| 9 | Details of Plan / Blue Prints / Sanctioned Plan | | |
| | 1 | Whether the plan of the property is sanctioned by the Competent Authority. | |
| | 2 | If sanctioned, please enclose copy of approved Floor Plan/s, Sections, Elevations and Site Plan of the building. | |
| | 3 | Name/s and Address Phone No. of the Architect / Engineer. | |
| | 4 | Provision for proper arrangement of fire safety. | |
| 10 | 1 | Are the safety measures taken? | |
| | 2 | If yes , give details of arrangement. | |
| | 3 | Is No Objection certificate obtained / Secured from fire control authorities. | |
| | 4 | If yes, produce copies of proof / certificates. | |
| 11 | List of Enclosures | | |

Signature of vendor with seal and date.

Date:.....

Place:.....