Ahmedabad Divisional Office, O.S. Department,
7th Floor, Jeevan Prakash Building, Tilak Road, Ahmedabad – 380 001.

APPLICATION FORM – TECHNICAL BID

(1) Name of the Firm : _____

(2) Nature of Ownership : _____

(3) Name of the Proprietor/Partners/Directors: _____

(4) Name OF Representative who Would be calling on us and attending to our jobs: _____

(5) Correspondence Address of Firm/Company: _____
Located at Ahmedabad _____
_____

6) Office Tel. No. / Mobile No. /Fax No. : _____

e-Mail Address : _____

(7) Date Of Establishment Of Firm in Present Name (If Name changed Earlier Name and Address) : _____

(8) Nature Of Business : _____
(Copy Of Registration Certificate)

(9) Name Of The Banker with Address and Tel. No. : _____
_____
Account No. : _____
IFS Code : _____

(10) Latest Income Tax Assessed Year : _____
Amt. of Tax Assessed with Annual Turn Over :

(11) Last Tax Assessment / Balance Sheet, duly Certified by CA (Copies Of last 3 Years' IT returns, Balance Sheets, and Revenue Account to be enclosed) : _____

(12) GST No.: _____

(13) Income Tax PAN No. : _____

(14) Firm registration No : _____

(15) IATA Accreditation No.: _____

(16) Experience (Years).: ----------

(17) Details of empanelment with other institutions : _____
(Including LIC)
Turnover for the last 3 F.Y.
(Pl. enclose Photocopies)

(18) Name- Address Of your most Valued Clients : _____
(Minimum 2-Two)

(19) Have you ever been Blacklisted by LIC Of India : _____
Or PSU/BFSI Org./Govt./Semi Govt./Quasi Govt.
Deptt. In India as on or before Date of Submission
of Bid

(20) Mention any other specialties of your : _____
Establishment.

(22) Is the firm registered for micro & small enterprises
(MSE) with director of Industries/District industries center as
manufacturing /service enterprises or registered with
National Small Industries Corporation (NSIC) under
single point vendor registration scheme. If so, enclose copy.

(23) Is the firm owned by SC/ST entrepreneurs? If so, enclose copy.

Please type this form or fill it legibly in ink.
Use separate sheet if space provide is in sufficient.

I/WE…….. request The life Insurance Corporation of India ,Divi.office, Ahmedabad to consider of supplier & assured to render the services to the fullest satisfaction of the corporation.

This……Day of…….2025 at…….

SIGNATURE

WITH OFFICE SEAL