

18. MENTION ANY OTHER SPECIALITY OF YOUR ESTABLISHMENT RELEVANT HERE

DECLARATION:

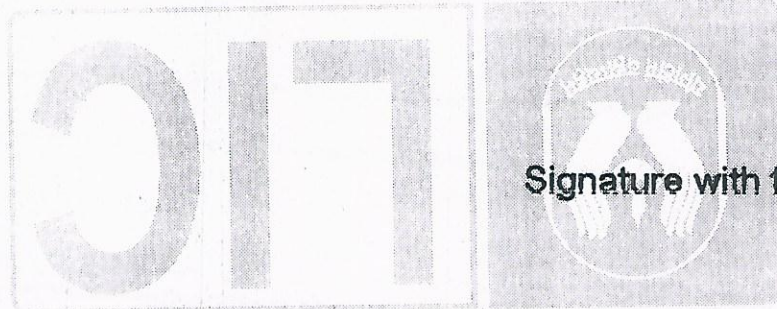
I/We _____ (name of the

firm/company) _____ carrying _____ on _____ (nature of work) , request

Life Insurance Corporation of India, Dharwad Division to consider for inclusion of My /our firm /Company 's name in the list of their approved panels .I /We agree to strictly abide by the Terms and conditions of the Tenders ,to be floated and also agree to extend out cooperation to give full satisfaction to the Corporation.

Date :

Place :



Signature with firm seal:

Note : Registration fee of Rs 250 /- (Rs Two Hundred Fifty only) by DD/Cash remitted to our Divisional Office Cash counter or DD payable at Dharwad drawn on LIC of India, Dharwad, should be enclosed with the application and should be submitted on or before ~~07.2019~~ (during office hours), from the date of advertisement.

07.05.2019