

EMPANELMENT OF CIVIL / ELECTRICAL (INCLUDING DATA/LAN CABLING WORK) CONTRACTORS

Sl. No	Name	Constitution	Names of Directors / Promoters	Details of major works executed in the last 3 years	Details of empanelment with other organisations	Details of solvency	Annual average turnover	Details of confidential opinion obtained	ZO recommendations
		Year of establishment		Name of work					
				Status					

Electrical contractor- Should be in possession of valid “A” grade License issued by Govt. Electrical Inspectorate.

Date:

Signature(s) with stamp

STRUCTURE AND ORGANISATION

1. Name and address of the applicant
2. Telephone No./Fax No/E-Mail address.
3. Legal Status (attach copies of original document defining the legal status)
 - (a) An Individual
 - (b) A proprietary Concern
 - (c) A Firm in partnership
 - (d) A Limited Company or Corporation.
4. Particulars of registration with various Government bodies (Attach attested photo-copy)
 - a) Registration Number.
 - b) Organization / Place of registration
5. Names and Titles of Directors and officers with designation to be concerned with this work with Designation of individuals authorized to act for the organization.
6. Was the applicant ever required to suspend works for a period of more than six months continuously after commencement of works. If so, give the name of the project and give reasons thereof.
7. Has the applicant or any constituent partner in case of partnership firm/ Company, ever abandoned the awarded work before its completion? If so, give the name of the project and give reasons thereof.
8. Has the applicant or any constituent partner in case of partnership firm / Company, ever been debarred/black listed for tendering in any organization at any time? If so, give details:
9. Has the applicant or any constituent partner in case of partnership Firm or any Director in case of a Company or any criminal proceedings presently pending, ever been convicted by a court of law? If so, give details.
10. In which field of interior, Furniture and Furnishing works, you can claim specialization and interest
11. Any other information considered necessary but not included above.

SIGNATURE OF APPLICANT(S)

DETAILS OF KEY TECHNICAL AND ADMINISTRATIVE PERSONNEL EMPLOYED BY THE FIRM / COMPANY

Sl.No.	Designation	Total Number	Names	Qualification	Professional Experience	Length of of continuous Service with Employer
1.	2.	3.	4.	5.	6.	7.

Note : Additional information about Technical Personnel, if any, may be submitted on separate sheet.

Signature of Applicant (s)

FORM -F

DETAILS OF TOOLS PLANT AND EQUIPMENT LIKELY TO BE USED IN CARRYING OUT THE WORK

S. No.	Name of the Equipment/Instrument	Nos.	Capacity or Type	Age	Condition	Ownership status			Current location	Remarks
						Presently owned	To be purchased	Leased		

Signature of Applicant(s)

**PROFORMA ON ISO CERTIFICATION
(If available)**

- 1. Year of Certification**
- 2. Name & Address of Certifying Agency**
- 3. Name of Management Representative**
- 4. Validity of Certificate**

Note : Enclose attested copy of certificate

SIGNATURE OF APPLICANT(S)