

**F O R M - A**

**TENDERERS SHOULD FURNISH SPECIFIC ANSWERS TO ALL THE QUESTIONS GIVEN BELOW. TENDERERS MAY PLEASE NOTE THAT IF THE ANSWERS SO FURNISHED ARE NOT CLEAR AND/OR EVASIVE, THE TENDER WILL BE LIABLE TO BE IGNORED.**

- 1 Name of the Department \_\_\_\_\_ Date of Opening :  
26-05-2010
- 2 Offer is open for acceptance till  
01-05-2011 Yes/No
- 3 The stores offered should fully conform to the  
technical particulars and specification/  
drawing specified by the Purchaser in the  
Schedule to tender. If not mention here the  
details of deviation in remarks column  
Against each item. Yes/No
- 4 Brand of Stores offered.
- 5 Name and Address of Manufacturer
- 6 Station of Manufacturer
- 7 Please confirm that you have offered packing  
as per tender enquiry requirements. If not  
indicate deviations  
Under remarks column..
- 8 Gross weight of consignment. Net weight of  
each item
- 9 What is your permanent Income Tax Account  
No. (enclose photocopy)
- 10 Confirm whether you have attached your  
latest/current ITCC or Photocopy thereof and  
furnish the address of the I.T. Office.
- 11 STATUS
  - a. Indicate whether you are ISO or SSI
  - b. Are you registered with DGS&D for  
item quoted. If so, indicate whether there is  
any momentary limit on registration.
  - c. If you are a small scale unit registered  
with NSIC under single point registration  
scheme for the item quoted. Confirm whether  
you have attached a photocopy of the  
registration certificate indicating the items for  
which you are registered.

- 12 a) If you are not registered either with NSIC or with DGS&D, please state whether you are registered with Directorate of Industries of State Government concerned.
- b) If so, confirm whether you have attached a copy of the certificate issued by the Director of Industry.
- 13 Please indicate Name and Address of your Banker, Name of Account Holder, IFS Code and Accounts Number .
- 14 Please state whether you agree to submit advance sample wherever asked for or called upon to do so within the specified period of 21 days. Yes/No
- 15 Please indicate guaranteed date by which delivery can be completed 30 days from the date of order Yes/No
- 16 Business name and constitution of the firm. Is the firm registered under'
- i ) The Indian Companies Act 1996 ii ) The Indian Partnership Act 1932
- iii) Any Act, if not who are the owners (please give full name and address)
- 17 Whether the tendering firm(s) is/are
- i ) Manufacturer
- ii) Manufacturer's Authorised Agent
- iii) Holders in stock of the stores tendered for
- N.B.: If manufacturer's agent – please enclose letter copy of Manufacturers authorization.
- 18 Please state whether the transit insurance is acceptable to you
- 19 Please state whether the Inspection is acceptable to you
- 20 Here state specifically whether the price tendered by you is to the best of your knowledge and belief not more than the price usually charged by you for store of same nature/class of description to any private purchased either foreign or as well as Government purchase. If not state the reason thereof. If any, also indicate the margin of difference.

- 21 In respect of indigenous items for which there is a controlled price fixed by law, the price quoted shall not be higher than the controlled price and if the price quoted exceeds the controlled price,' the reasons thereof should be stated.**
- 22 Are you holding valid industrial licence (s) Registration Certificate under the Industrial Development and Regulation Act, 1981. If so, please give particulars of industrial income registration certificate.**
- ii) Exempted from the licencing provision of the Act, for the manufacture of item quoted against this Tender. If so, please quote relevant orders and explain your position.**
- iii) Whether you possess the requisite licence for manufacture of the stores and/or for the procurement of raw materials belonging to any controlled category required for the manufacturer of the stores. In the absence of any reply it would be assumed that no licences is required for the purpose of raw materials and/or that you possess the required Licence.**
- 22 State whether business dealing with you have been banned by Ministry/Department of supply.**
- 23 Please confirm that you have read all the instructions carefully and have complied with accordingly.**
- 24 Enclose VAT Registration Numer(enclose copy)**

NOTE:- No columns in the above proforma should be left blank. If any of the column is not applicable, it should be marked as NA. If rate for any of the item is not quoted it should be marked as NQ.

SIGNATURE OF WITNESS  
Full Name and Address of Witness  
(in Block Letters)

SIGNATURE OF TENDERER  
1. Full Name and address of the person signing (in Block Letters)  
2. Whether signing as Proprietor /Partner constitute attorney /duly authorized by the company