

KRISHAK BHARATI CO-OPERATIVE LTD. - SURAT.
PRE-QUALIFICATIONS CRITERIA FOR SUPPLY OF VARIOUS ITEMS
REF. HP/6000/040/PQ/PROC./ 2021.

"VENDOR REGISTRATION FORM CUM CHECK LIST"

| | | | | |
|------|-----------------------------------------------------------------------------------|-----------------------------------------|------------------------|--------------------|
| | DEMAND DRAFT of Rs.590/- | | | |
| 1.0 | NAME OF COMPANY ADDRESS OF REGISTERED OFFICE | | | |
| 2.0 | PHONE NO. | | | |
| 2.1 | MOBILE NO. | | | |
| 2.2 | FAX NO. | | | |
| 2.3 | E-mail ID | | | |
| 3.0 | NAME OF CONTACT PERSON | | | |
| 4.0 | HISTORY OF FIRM | | | |
| 5.0 | ORGANISATION STRUCTURE | | | |
| 6.0 | NAME OF DIRECTORS/PARTNERS/PROP. | | | |
| 7.0 | TYPE OF REGISTRATION | | | |
| 7.1 | DOCUMENTS SUBMITTED/CERT. COPY | | | |
| 8.0 | INCOME TAX RETURNS | | | |
| 8.1 | ASSESSMENT YEAR 2018-19 | | | |
| 8.2 | ASSESSMENT YEAR 2019-20 | | | |
| 8.3 | ASSESSMENT YEAR 2020-21 | | | |
| 9.0 | BANK SOLVENCY CERTIFICATE OF Rs.10.0 LACS ISSUED ON OR AFTER DATE OF ADVT. | | | |
| 10.0 | AUDITED ANNUAL REPORTS | | | |
| 10.1 | FINANCIAL YEAR 2017-18 | | | |
| 10.2 | FINANCIAL YEAR 2018-19 | | | |
| 10.3 | FINANCIAL YEAR 2019-20 | | | |
| 11.0 | PERMANENT ACCOUNT NO. | | | |
| 12.0 | EFT DETAILS AS PER ATACHED FORMAT WITH A COPY OF CANCELLED CHEQUE | | | |
| 13.0 | GST REG NO | | | |
| 14.0 | DECLARATION-RELATIVES | | | |
| 15.0 | DECLARATION-BLACK LISTING | | | |
| 16.0 | DECLARATION- SISTER CONCERN | | | |
| 17.0 | COPIES OF COMPLETED P.O. FROM JAN-2016 TO DEC-2020 AS PER BELOW FORMAT: | | | |
| | Sr. No. | Purchase Order Number & Date | Name of Company | Value (Rs.) |
| 18.0 | PERFORMANCE CERTIFICATE FOR ABOVE W.O. | | | |
| 19.0 | REGISTRATION OF E-TENDER WITH AUTHORIZED AGENCY; if any. | | | |

FORMAT OF DECLARATIONS

(To be submitted on 'Firm's Letter Head')

To:

KRISHAK BHARATI COOPERATIVE LIMITED
P.O. - KRIBHCONAGAR
SURAT – 394 515

Date: _____

Sub: Declarations

Ref.: Vendor Registration for

Dear Sir,

1. We confirm that our firm has not been banned; black listed or put on holiday list by any Government Department / Central Government Unit / Public sector unit / Financial Institutions / Court.

(...In case your has been black-listed or put into holiday list by any Government Department /Central Government Unit / Public Sector Unit / Financial Institutions / Court, please furnish the details of the same....).

2. We hereby confirm that none of our close / distant relatives are working in KRIBHCO.

(...If your closed / distant relatives are working in KRIBHCO, you are required to indicate names, designation/ department of that relative working in KRIBHCO...).

3. We confirm & certify that none of our group / associate / sister concern / partnership firm as Defined below, is registered for the similar or same work for which we have submitted our application for registration to participate in future bidding process.

“Any sister / group / associate company, having any common partner / Director / Managing partner etc. or having any business / family relations or any other common criteria, which indicate about their link / relation etc. shall be considered as sister / group associate company”.

(...In case of concealment of above fact, if detected later on, that the bidder is have relation along with any group associate / sister / partnership concern / company participated in any tender, may be debarred for all future tenders in addition to other action like forfeiture of Earnest Money Deposit / Security Deposit / payment due, if any etc...)

Thanking you,

Yours faithfully

Authorized Signatory

(Name & Sign)

FORMAT OF BANK SOLVENCY

(To be submitted on Letter of Issuing Bank)

Date: _____

TO WHOM SO IT MAY CONCERN

This is to certify that to the best of our knowledge and information M/S _____,

_____ customer of our Bank is respectable and can be treated as

Good/ solvent up to a sum of Rupees _____ Lakhs _____) only.

It is clarified that this information is furnished without any risk and responsibility on our part in any respect whatsoever more particularly either as guarantor or otherwise.

This certificate is issued at the specific request of the customer.

Place: _____

(Signature of Authorized Officer)

Date: _____

To:

KRISHAK BHARATI COOPERATIVE LIMITED

PO: KRIBHCO NAGAR

S U R A T -394515(GUJARAT)

ATTN: PURCHASE DEPARTMENT

REF: VENDOR REGISTRATION

(EFT) Electronic Fund Transfer payments details to be submitted on the letter head of your company

To,

General Manager (Finance & Accounts)

Krishak Bharati Cooperative Limited.,

PO: KRIBHCO Nagar

S U R A T -394515

Sub: Our Bank Account details for effecting e-payment (EFT) Electronic Fund Transfer payments.

Sir,

I/we hereby agree to receive the payment from M/S Krishak Bharati Cooperative Limited- Surat against bills raised by us directly to our Bank Account as per details given below through Electronic Fund Transfer Mechanism (EFT). The required details are given below.

| SR No. | Particulars | Details. |
|---------------|------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| 1 | Name, Branch and Address of the Payee's Bank | |
| 2 | Title of the account | . |
| 3 | Nature of Account | Saving/ current/other*(-(*please specify) |
| 4 | Account No. | |
| 5 | Branch MICR code number (Please attach a leaf of cancelled cheque also) | (attaching a leaf of cancelled cheque of yr bank a/c. is compulsory) |
| 6 | R T G S (Real Time Gross Settlement) I F S C (Indian Financial System code) | |
| 7 | Permanent Account Number of the payee (PAN Number) | |
| 8 | E-mail address, if any. (For sending payment details) | |
| 9 | Mobile No. (For sending payment intimation through SMS) | |

Date:

Authorised Signature of vender

Place

Name

(Official-seal)

Designation