

2. Turnover of the Company/firm

(Please attach copy of audited balance sheet and profit and loss account for three years).

Sl. No.	Year	Turnover
1	2017-18	
2	2016-17	
3	2015-16	

3. Registration with Government / Public Sector / Banks

NAME OF THE ORGANISATION	NATURE OF WORKS	VALUE OF WORKS	DATE OF REGISTRATION

8. What are your fields of Core Competence? Mention the fields on preference Basis

1)

2)

3)

9. **Details of the works executed during the last 5 years**

(please mention only such works which qualifies for eligibility criteria)

Note: Copies of satisfactory completion certificate obtained from the client

Sl. No.	Name of Work	Work (name of the organization with address, concerned office & telephone no.	Nature of work (in brief)	Location of the work	Actual Value of the works	Stipulated time for completion	Actual time for completion	If work left incomplete or terminated (furnish reasons)
1.								
2.								
3.								
4.								
5.								

10. Key personnel permanently employed in your organization :

Sl No.	Name	Qualifications	Experience	Particulars of work done	Employed in your firm since	Mobile No / Contact No.
1						
2						
3						
4						
5						

11. Furnish the names of three responsible clients/ persons to whom the major works carried out by the applicant with address and telephone number who will be in a position to certify about the quality as well as past performance of your organization.

NAME OF THE OFFICIAL	ORGANISATION & ADDRESS	CONTACT NUMBERS

CHECKLIST (To be filled by Applicants)

1. Have you mentioned the category for which you have applied in the application form? Yes No
2. Have you signed in all the sheets? Yes / No
3. Whether copy of PAN/VAT/GST Registration copy is enclosed? Yes / No
4. Whether requisite application fee by cash/DD is paid? Yes / No
5. Whether enclosed Audited Balance Sheet? Yes No
6. Whether enclosed proof for year of establishment? Yes / No
7. Whether proof for average annual financial turnover enclosed? Yes / No
8. Whether documentary proof for having undertaken the works is enclosed? Yes / No
9. Whether proof of OEM/Dealership Certificate submitted? Yes No
10. Whether solvency certificate from nationalized / scheduled Bank submitted? Yes No

If yes, No. of certificates enclosed

FOR OFFICE USE ONLY

1. NAME OF THE AGENCY :

2. CATEGORY & CLASS OF WORK FOR WHICH EMPANELEMENT IS SOUGHT

3. VIEWS OF
EMPANELEMENT
COMMITTEE

4. REASONS FOR REJECTION
IF ANY

5. RECOMMENDED STATUS Recommended for Empanelment
 Not Recommended for Empanelment

SIGNATURE OF COMMITTEE MEMBERS_____
Member 1_____
Member 2_____
Member 3_____
Member 4_____
Member 5