

SAMPADA SAHAKARI BANK

Pre- Qualification Tender

Mandatory information required for Prequalification of the bidder
(To be furnished on the letterhead of the bidder)

Important:

1. Please type or handwrite in capital letters.
2. Attach copies of the supporting documents.
3. Please use addition sheets if required.

| | | |
|---|---|----------------|
| 1 | Name of the applicant / organization | |
| 2 | Address of the Registered Office | |
| | | |
| 3 | Address of office (With Phone Nos, | |
| 4 | Email ID & Contact No | |
| 5 | Year of establishment | |
| 6 | Type of the organization (Whether sole proprietorship, Partnership, Private Ltd. or Ltd. Co. etc.) (Enclose certified copies of documents as evidence) | |
| 7 | Name & qualification of the Proprietor / Partners / Directors of the Organization / Firm | a) b) c) |

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| 8 | Enclose certified copies of document as evidence | |
| 9 | <p>Details of registration – Whether Partnership firm, Company, etc. Name of Registering Authority, Date and Registration number. Enclose certified copies of document as evidence</p> | |
| 10 | <p>Whether registered with Government / Semi – Government / Municipal Authorities of any other Public Organization and if so, in which class and since when? (Enclose certified copies of document as evidence)</p> | |
| 11 | <p>a. No. of years of experience in the field and details of work in any other field. b. Whether ISO certified, furnish the details.</p> | |
| 12 | <p>Area of business activities other than construction, if any, and place of business.</p> | |
| 13 | <p>Registration of firm under Shop & Establishment Act 1948</p> | |
| 14 | <p>Address of office through which the proposed work of the Bank will be handled and the Name & Designation of officer-in-charge.</p> | |

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| 15 | Yearly turnover of the organization during last 3 years (year wise) (Profit earning should be visible in the balance sheet of the last 3 years attached) Average turnover in | |
| | 2020-2021 2021-2022 2022-2023 | |
| 16 | Enclose copy of latest income tax clearance certificate. | |
| 17 | PAN No. | |
| 18 | GST Registration No. | |
| 19 | Empanelment with other Companies | |
| 20 | Furnish the names of –3- responsible persons along with their designation, address, Tel.No. etc., for whose organization, you have completed the above mentioned jobs and who will be in a position to certify about the performance of your organization. | |
| 21 | Have you in past carried out any works for Sampada Sahakari Bank or its subsidiaries? If yes, give details. | |

NOTE: Attach extra sheets with Sr. No if the space found less
Filled Form have to be submitted within 10 days.

| Sr No | Name of work/ project with address. | Contract Amount (Rs.) | Stipulated time of completion (Years) | Actual time of completion (years) | Actual amount of the Project, if increased, |
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