# केंद्रीय विद्यालय, आई.आई.पी, देहरादून

# KENDRIYA VIDYALAYA IIP DEHRADUN

**FOR REGISTRATION/ENLISTMENT OF FIRM/COMPANY/CONTRACTORS/SUPPLIERS/ SERVICE PROVIDER AGENCY FOR SESSION 2024-2025**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | Name of the Firms/Company/Contractors/Suppliers/ Service Providing agency | |  | |
| 2 | Address of Firms/Company/Contractors/Suppliers/ Service Providing agency & contact telephone number with PIN code | |  | |
| 3 | Name & Address of the proprietor/Partner/ Contractors/ Suppliers of the firms/ Company/ Contractors/Suppliers/ Service Providing agency with communication details like Phone/Fax No/Mobil No/e-mail address | | Mobil No.  Phone No.  E-mail ID | |
| **4** | Registration/Enlistment sought for :- as a supplier/contractor/service providing agency (Strike out with is not applicable) | | Supplier/  Contractor/  Service Providing Agency | |
| **5** | Registration/Enlistment particulars.  i) Trade License No./Contractors licence no  ii) PAN No  iii) GST Registration No  iv) Service Tax Registration No.  v) Other details (if any) | |  | |
| **6** | Bank’s Details | | a) Account No  b) IFSC Code  c) Name & Address  of the bank | |
| 7 | **PRODUCT/ITEMS/SERVICES/CATEGORY FOR WHICH REGISTRATON IS APPLIED FOR** | | | |
| S. N. | Name of Product/Items/Services/ Category | Whether Original Manufacturer/ Authorized agent or Distributor/ DGS&D Registered Firm/Dealer | | Remarks |
| 1 |  |  | |  |
| 2 |  |  | |  |
| 3 |  |  | |  |
| 4 |  |  | |  |
| (In case of supplier please enclose authorization of your manufacturer Authorized dealer/supplier/ contractor Certificate) | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 8 | **Details of experience & place of work during the last 03 years** | | | | |
| S N | Institute where rendered service/ supplied articles | Period | | Name of supplies/ services | Remarks if any |
| **1** |  |  | |  |  |
| 2 |  |  | |  |  |
| 3 |  |  | |  |  |
| 4 |  |  | |  |  |
| 9 | Whether Firms/Contractors/Supplier/Service Providing agency filed IT returns of the Previous year | | Yes/ No  (if yes, enclose copy) | | |
| **10** | Whether registered on GeM | | Yes / No / NA | | |
| **11** | List of enclosures (All the copies of the documents attached as enclosures should be authenticated by the Firms/Contractors/Supplier/Service Providing agency) | | a) b)  c) d)  e) f)  g) h) | | |

**Note:- Without PAN, TIN/GST number and complete address with PIN code, no firm will be registered. The Vidyalaya reserves the right to cancel the name of the supplier/firm/ service provider from its approved lists at its absolute discretion without assigning any reason.**

**UNDERTAKING**

I, Mr/Ms…………………………………………………………………………………………………………………………Proprietor of M/s………………………………………………………………………………………………………………………..do hereby undertake that the above furnished information is correct to the best of my knowledge and belief. In case of any information/supporting document furnished by me found to be incorrect/false, the offer of my contract will be cancelled automatically and action may be taken as per KVS rule. I assure you to provide the best service to the vidyalaya. I further certify that the applicant shall fulfill all obligations under the law in force from time to time in respect of engagement of labours for any work entrusted to him her. I, on behalf of the applicant, certify that all statutory provision (including payment of dues) of the Govt. as may be applicable from time to time for works entrusted to him/her shall be fulfill by the applicant.

Signature of the Proprietor/Partner/Authorized

M/s ………………………………………………………………..

Dated. …………………………………………………………….

Seal of the Firm