

केन्द्रीय विद्यालय संगठन
शिक्षा एवं प्रशिक्षण का आंचलिक संस्थान, भुवनेश्वर
(मानव संसाधन विकास मंत्रालय के अधीन, भारत
सरकार)



केन्द्रीय विद्यालय क्रमांक 4 परिसर
निलाद्री विहार, पोस्ट- शैलेश्री विहार
भुवनेश्वर (ओडिशा) – 751021

KENDRIYA VIDYALAYA SANGATHAN
Zonal Institute of Education &
Training,
Bhubaneswar

(Under the Ministry of Human Resource Development,
Government of India)

Kendriya Vidyalaya No. – 4 Campus
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**APPLICATION FOR ENLISTMENT OF FIRMS/ SUPPLIERS / CONTRACTORS /
AGENCIES / SERVICE PROVIDERS ETC. FOR THE YEAR 2019-20**

NAME OF THE ITEM : OFFICE STATIONARY AND TRAINING COURSE ITEMS

1	Name of the applicant (Firm or Person as the case may be)	
2	Present Address (with Pin Code & Phone No.(Landline & Mobile)	
3	Permanent Address (with Pin Code & Phone No.(Landline & Mobile)	
4	Category in which enlistment is desired (Nature of work / service)	
5	Area of operation	
6	If the contractor is a firm, state whether it is a proprietary or a partnership firm.	
(a)	If it is a Proprietary firm, state the name and address of the proprietor.	
(b)	If it is a partnership firm, state the name and address of each partner along with their share in the firm.	
(c)	Name & address of the holder of Power of Attorney, if so.	
7.	The name of work and value of work executed in any Govt. Deptt. / PSU in Single agreement during preceding 3 years including work order No., work order issuing authority, the dates of commencement and completion of work be furnished. (Enclose documentary evidence)	
8	Whether the Contractor / firm / agency was banned / blacklisted by KVS or any Govt. Deptt. / PSU. (If so, brief description with reasons for such disqualification may be furnished).	
9	In case, the applicant is a registered Co-operative Society, State the Registration No. and address of Office in which Registered. (Necessary papers in support thereof should be furnished).	

10	In case, the applicant is applying for re-enlistment, state the category and area of operation.	
11	An affidavit by the Notary in proof of the firm being proprietorship firm OR Deed of partnership executed under Court of Law in Proof of the firm being Partnership Firm having its validity at the time of executing work for which Certificate of Experience has been submitted (to be enclosed)	
12	All the copies of the documents attached as enclosures should be authenticated by the Contractor as well as having current attestation by the eligible official.	
13	Documents to be submitted :	
(i)	Service Tax Registration Certificate.	
(ii)	STRC / VAT / GST Registration Certificate.	
(iii)	Partnership Deed / Affidavit of Proprietorship duly attested by Notary Public.	
(iv)	Credential Certificate from the concerned organization.	
(v)	Copies of the job order executed during the last three years.	

LIST OF DOCUMENTS SUBMITTED :

Sl. No.	Particulars	Sl. No.	Particulars
1		6	
2		7	
3		8	
4		9	
5		10	

* It is found that the space allotted against different items in the application form are not sufficient, the applicant may enclose separate sheet of paper for each such item.

I, on behalf of the applicant certify that all the information furnished against the above items are true to the best of my knowledge and belief. I also certify that I have gone through the rules for the enlistment of Contractors in KVS ZIET BHUBANESWAR and have understood all the Terms and Conditions under the rules and agree that the same shall be binding upon the applicant. I further certify that the applicant shall fulfill all obligations under the laws 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 provisions (including payment of taxes) of the Govt. as may be applicable from time to time for works entrusted to him / her shall be fulfilled by the applicant.

Signature of the Applicant :

Name :

Address :

Date :

KENDRIYA VIDYALAYA SANGATHAN, ZIET, BHUBANESWAR
ACKNOWLEDGEMENT

Received an application for enlistment of Contractors / Firms/ Service Providers (Fresh enlistment / Re-enlistment) for works related to _____ from : Name

_____ Address : _____
_____ on _____ at _____ a.m. / p.m.

DIRECTOR
KVS ZIET BHUBANESWAR