



KVS- ZONAL INSTITUTE OF EDUCATION & TRAINING, BHUBANESWAR

FORM FOR EMPANELMENT OF FIRMS FOR THE SESSION 2014-15

SUBJECT: Empanelment for (Name of the item / category) _____

1. **Name & Address of the Firm (in Block letters)** _____

2. **Telephone Nos.** land Line: STD code _____ Ph. No. _____

Mobile Phone: _____

3. **Name of the Owner of the firm with address and contact No.(s)** _____

4. **PAN No. of the owner of the firm** _____

5. **Registration Certificates (attach photocopies)**

a) VAT No. _____

b) TIN No. _____

c) TAN No. _____

d) CST No. _____

(Please attach copies of return of last 2 years)

6. **Bank details**

a) **State if Account is in the name of the firm**

Tick Yes No

(Note: Payment is made through A/c payee cheques only)

b) **If 'NO' to 'a' name in favour of whom cheque shall be issued**

7. **Details of working experience (last 3 years only).**

Declaration

I Shri /Smt. _____ proprietor / Partner of M/s. _____ do hereby certify that the above particulars and documents furnished by me are correct. I also undertake that if any information / document found incorrect, my enlistment is liable to be cancelled.

Date:



Signature of the Proprietor/ Partner