

## Vendor Registration Form

**Important Instructions:**

- a. The applicant should fill up the form with details/data applicable and send Hard Copy of the registration form duly signed and stamped addressed to **The Head (Materials Management)** at the above address.
- b. Complete and definite answers must be given to all questions, otherwise the application may not be considered. If any matter is not applicable, please write “Not Applicable” against the same. If space is insufficient, separate annexure may be attached, which must also be signed by the same person/persons signing this application.
- c. This form is not transferable.
- d. (n)Code reserves the right to accept or reject the application without assigning any reason(s).
- e. Along with the application, the applicant to positively furnish details/documents as per the check list given on last page.

Sr. No.	Particulars	Details			
<b>1</b>	<b>Name of the Company</b>				
<b>2</b>	<b>Address for Communication</b>				
	Block No., Building Name				
	Street Name, Area				
	City				
	State				
	PIN				
	Landline Number (with STD Code)				
	Fax Number (with STD Code)				
	Mobile Number				
	Email ID				
	Website				
<b>3</b>	<b>Factory/Works Address/Project Office Address/Former Name/Names of Company (If different from 2)</b>				
<b>4</b>	<b>Contact Person Details (Minimum 3 Persons)</b>				
	<b>Name</b>	<b>Designation</b>	<b>Telephone</b>	<b>Mobile</b>	<b>Email</b>

1					
2					
3					
5	<p><b>To be registered as (Please tick the category applicable)</b></p> <p> <input type="checkbox"/> Goods Supplier                      <input type="checkbox"/> Service Provider                      <input type="checkbox"/> Both </p> <p><b>Note: Please fill up Annexure A for Goods Supplier and Annexure B for Service Provider as applicable</b></p>				
6	<p><b>Registration details of the Firm:</b> (Please enclose copy of registration certificate) (Whether registered under (a) The Indian Companies Act (b) The Indian Partnership Act 1932 (c) The Indian Factories Act 1948 or (d) Any other Act / If Not Who are the owners?). Note :</p> <p><b>a. In case of a Company,</b></p> <ol style="list-style-type: none"> <li>Complete list of Directors with all details,</li> <li>VAT Registration Certificate.</li> <li>CST Registration Certificate.</li> <li>Service Tax Registration Certificate.</li> <li>Excise Registration Certificate (If Manufacture Company).</li> <li>Certificate of Registration under Labour Laws Contract ACT. (If applicable).</li> </ol> <p><b>b. In case of Partnership,</b></p> <ol style="list-style-type: none"> <li>Names and addresses of all the partners with details of capital invested by each partner are to be given as attached sheet.</li> <li>Income tax clearance certificate of each individual partner in addition to the Income Tax clearance certificate in the name of the firm should be furnished with this application.</li> <li>Partnership Deed.</li> </ol>		<p><b>c. Is the Firm,</b></p> <ol style="list-style-type: none"> <li>Government / Public Sector Undertaking</li> <li>Proprietary Firm</li> <li>Partnership Firm (If yes, partnership deed need to be enclosed)</li> <li>Limited Company or Limited Corporation</li> <li>Member of a group of Companies (If yes, give name, address &amp; details of other companies)</li> <li>Subsidiary of large Corporation (If yes, submit the name and address of the parent organisation).</li> </ol>		
7	<b>Bank Details: (As per Annexure "C")</b>				
8	<b>Financial Details</b> (Please attached copy of Financial results / Balance Sheets of Last Three Years covering details of Total Turnover, Profit before tax, Net Profit after tax, capital employed, Reserves etc.)				
	<b>No.</b>	<b>Financial Year</b>	<b>Total Turnover (Rs. Lacs)</b>	<b>Net Profit (PAT) (Rs. Lacs)</b>	
	1				
	2				
	3				
9	<b>Nature of the Company: ( Please tick wherever applicable) (Documentary Proof need to be submitted)</b>				

	<p>1) Manufacturer <input type="checkbox"/></p> <p style="text-align: center;">If yes , then, Is it</p> <ul style="list-style-type: none"> <li>• Micro Enterprise</li> <li>• Medium Enterprise</li> <li>• Small Enterprise</li> </ul>	<p>Please submit product manufacturing details in which you dealt as per Annexure “A”. Also List of Authorised Dealers to be submitted.</p> <p><b>(Note: Investment in Plant &amp; Machinery: Micro Enterprise=up to Rs. 25 lacs, Small Enterprise=Rs. 25 lacs to Rs. 200 lacs, Medium Enterprise=Rs. 200 lacs to Rs. 1000 lacs. Other=Rs. 1000 lacs plus)</b></p>
	<p>2) Others</p> <ul style="list-style-type: none"> <li>• Authorised Dealer <input type="checkbox"/></li> <li>• Traders <input type="checkbox"/></li> <li>• System Integrator <input type="checkbox"/></li> <li>• Service provider <input type="checkbox"/></li> </ul>	<p>Please specify make and products in which you are Authorised Dealer as per Annexure “A”. Please specify trading products as per Annexure “A”. Please specify in which systems you are integrator as per Annexure “A” and Annexure “B”. Please specify Services as per Annexure “B”.</p>
10	<b>Registration as an Approved Vendor with Other Organizations :</b>	
	a. Are you on the list of approved suppliers / contractors of GIL, Government Undertakings or other authority? If so, give Registration Nos. & dates with full details.	
11	<b>Are you already doing business with GNFC and if so, since when? Also please furnish copies of GNFC’s Purchase Orders.</b>	
	Did you applied for registration in GNFC Earlier? If so, when and what results?	
12	<b>E-Tendering: Depending on Nature of items / Value of enquiry, (n)Code may opt for online e-Tendering. Do you have components required for e-Tendering like PC, Internet, Digital Signature certificate, Portal registration etc.? If Yes, please provide your DSC Customer ID No. and username for (n)Procure portal. If No, get yourself registered for the same.</b>	Yes/No
13	<b>Do you have a Quality Policy Manual? (If Yes, please attach copy)</b>	Yes/No
15	<b>Are you having any of the following Accreditation/Certification? : (If yes, please specify &amp; attach copy)</b>	
	(a) ISO 14001	Yes/No
	(b) OHSAS 18001	Yes/No
	(c) ISO 9001:2008	Yes/No
	(d) CMMI-Service Level 3 Certification.	Yes/No
	(e) Any Other Quality / Industry Standard Certifications	Yes/No
16	<b>Job Experience: (Please attach relevant supporting documents)</b>	
	<p>List of similar type of major orders executed which should include</p> <ol style="list-style-type: none"> <li>1. Years of Experience in Particular Field.</li> <li>2. Name of the Client</li> <li>3. Name of the Project / Job</li> <li>4. Order Value</li> <li>5. Order / Job Period:</li> </ol>	

<b>17</b>	<b>Technical and Administrative Staff Details Involved in Project. (Minimum 3 Persons). Also attach Organisational chart showing the structure of the organisation including names of Directors and position of the officers (TOP MANAGEMENT ONLY)</b>				
	<b>Name</b>	<b>Designation</b>	<b>Telephone</b>	<b>Mobile</b>	<b>Email</b>
<b>1</b>					
<b>2</b>					
<b>3</b>					
<b>18</b>	<b>Whether your Organisation has Bank's certificate of Solvency. (If yes, submit documentary proof.)</b>				
<b>19</b>	<b>Have you ever been denied tendering facilities by any Government undertaking / Department / Public Sector Undertaking? (Give Details)</b>				

**DECLARATION BY DIRECTOR / PARTNER / PROPRIETOR**

I/We hereby declare that information provided above is true to the best of my/our knowledge. I/We undertake to inform GNFC at the earliest, any change in details mentioned above.

Date:

Signature:

Seal / Stamp of the company

Name & Designation:

**Note:** If this application is from a proprietorship firm, it should be signed by the proprietor and if from a partnership firm, by all partners or one of them who holds the power of attorney duly authorizing him to sign for and bind the firm in all contractual obligations. If from a Limited Liability Company, the application should be signed by the managing Director or one of the other Directors, or a duly constituted attorney who has the necessary authority to do so. When this application is signed by a person who holds a power of attorney empowering him to do so much power of attorney in original together with a certified copy should be submitted along with the application.

**Check List: (Document Sr. no.5, 6, 7 & 8 are mandatory for processing the application)**

**Documents/Details Enclosed**

Sr. No.	Document	Yes	No	Not Applicable
1	Third Party Approval (TPA) Copy			
2	Purchase Orders Copies			
3	Customer List			
4	QAP Details			
5	Products Catalogue / Literature			
6	Financial Results of Last three Years			
7	Copy of letter of Bankers for Working Capital Limit			
8	Copy of latest Income Tax Return filled			
9	Inspection Facilities			
10	Details of Order back Log, If any			
11	Details of Sister Concerns / Subsidiaries			
12	Company Registration Certificates.			
13	Quality Policy / Manual			

## Annexure A

### Detailed particulars for Goods Supplier

Sr. No.	Particulars	Details
1	<b>Category of the product(s) applied for (Select from the list at the end of this annexure)</b>	
2	<b>Brief description of the product(s) applied for</b>	<b>Please Submit Product Catalogue / Data Sheet for the products applied.</b>
3	<b>Govt. Registration details of the Applicant Firm</b>	
	a. PAN	
	b. VAT TIN	
	c. CST	
	d. Shop-keeper's License	
5	<p><b>Category of the Firm</b></p> <p> <input type="checkbox"/> Manufacturer           <input type="checkbox"/> Dealer / Distributor           <input type="checkbox"/> Stockiest / Retailer         </p> <p>Note :</p> <p>(a) If applicant firm is a manufacturer, details/documents to be furnished as attached sheet are : (i) Location of manufacturing works/Factory/Factories owned, (ii) Production capacity (Specifying each item separately), (iii) Details of arrangements for quality control of products such as laboratory tests, In-process Inspection etc., (iv) Details of Inspection facilities available in your premises for pre-shipment inspection, (v) Whether Products / Items are tested to any standard specifications, (if so copies of original test certificates should be submitted), (vi) Details of major equipments / machines available, (vii) technical collaboration(s), if any.</p> <p>(b) If applicant firm is a dealer / distributor, details/documents to be furnished as attached sheet are : (i) Name and address of manufactures(s)'s, Products/Items manufactured by each, (ii) Valid Dealership/Distributorship Certificate of Manufacturer(s), (iii) Whether you have facilities to offer "after sales services", (iv) Whether you are in a position to supply the equipment/spare parts for which your Principals desire registration and the extent of stocks maintained together with value thereof.</p> <p>(c) If applicant firm is a Stockist / retailer, details/documents to be furnished as attached sheet are: (i) Location of Godown(s), (ii) Detail of articles or class of articles normally stocked and the extent of such stocks, (iii) Approximate annual turnover and the facilities you have for replacement of stocks.</p>	
6	<b>Are you prepared to abide by the General Conditions of Purchase (GCP) and/or Mini-GCP of GNFC?</b> [For reference of GCP or Mini GCP , please visit our website/ <a href="http://www.gnfc.in/materialmanagement.html">www.gnfc.in/materialmanagement.html</a> ]	Yes/No

**List of Material Group - Goods**

No.	Material Group	Sub-group	Please tick the category applicable
<b>1</b>	<b>Air-conditioning Systems</b>		
	a.	Comfort AC System	
	b.	HVAC-VRV System	
	c.	Precision AC System	
	d.	Other Miscellaneous AC	
<b>2</b>	<b>Civil Supply</b>		
	a.	False Ceiling (Metal Gypsum, Clip-in)	
	b.	False Flooring	
	c.	Fabrication Material (Steel, Iron etc.)	
	d.	Interior and furnishing	
	e.	Metal Doors	
	f.	Partitions (Glass, Wooden)	
	g.	Vitrified Flooring	
	h.	Fire rated Cabinet	
	i.	Other Miscellaneous, Brick, Sand, Paint, etc.	
<b>3</b>	<b>Electrical Items</b>		
	a.	Batteries	
	b.	Cables and Conduits	
	c.	DG Set	
	d.	Light Fittings (CFL etc.)	
	e.	Lightning Protection	
	f.	Electrical Panels	
	g.	Switchgear	
	h.	UPS, Inverter	
	i.	Other Miscellaneous Electrical	
<b>4</b>	<b>IT Hardware</b>		
	a.	Communication Devices (EPABX, Telephones etc.)	
	b.	Data & Voice Networking (Patch panels, cords etc.)	
	c.	Internet Bandwidth	
	d.	Mobile Devices	
	e.	Network Devices (Switch, Router etc.)	
	f.	PC & Accessories (Desktops, Laptops etc.)	
	g.	Peripherals (Printer/Scanner/Copier)	
	h.	PKI (HSM, eTokens etc.)	
	i.	Racks (Server / Network), PDU, PMU	
	j.	Security Devices (NIPS, Firewall, UTM etc.)	
	k.	Server	
	l.	Special Technology Devices (HHTs, LiDar, PoS, etc.)	
	m.	Storage Devices (SAN, HDD etc.)	
	n.	Video Wall - Display (LCDs, LEDs, Projector etc.)	
	o.	Other Miscellaneous Hardware	
<b>5</b>	<b>IT Software</b>		
	a.	Analytics Software	

No.	Material Group	Sub-group	Please tick the category applicable
	b.	Application Software	
	c.	Business Intelligence Software	
	d.	Database Software	
	e.	Development Software	
	f.	ERP Software	
	g.	Operating System	
	h.	PKI Software (Entrust)	
	i.	Security Software (Antivirus)	
	j.	Other Miscellaneous Software	
<b>6</b>	<b>Security &amp; Surveillance System</b>		
	a.	Access Control System	
	b.	Building Management System	
	c.	CCTV Surveillance System	
	d.	Fire Alarm & Detection System (VESDA etc.)	
	e.	Fire Suppression System (FM-200, Novec etc.)	
	f.	Public Address System	
	g.	Rodent Repellent System	
	h.	Water Leak Detection System	
	i.	Aspiration System.	
	j.	Other Miscellaneous Items	
<b>7</b>	<b>General Items</b>		
	a.	Admin Office Automation (Stationery, etc.)	
	b.	Maintenance / Utilities Spares, Consumables	
	c.	Other Miscellaneous Items	
<b>8</b>	<b>Any Other Category</b>		
	a.		
	b.		
	c.		



## Annexure B

### Detailed particulars for Service Provider / Contractor

Sr. No.	Particulars	Details
1	<b>Category of the service applied for (Select from the list of services you offer given at the end of this annexure)</b>	
2	<b>Brief description of the services applied for</b>	
3	Govt. Registration details of the Applicant Firm	
	a. PAN	
	b. Service Tax Registration	
	c. Labour Commissioner Registration	
	d. PF Commissioner Registration	
	e. ESIC Registration	
4	<b>Employee Strength</b>	
	a. No. of Employees on Permanent roll	
	b. Degree / Diploma	
	c. Skilled Manpower	
	d. Semiskilled Manpower	
	e. Unskilled Manpower	
5	Do you agree to abide by the General Conditions of Contract (GCC) of GNFC? [For reference of GCP or Mini GCP , please visit our <a href="http://www.gnfc.in/tenders.html">website/ www.gnfc.in/tenders.html</a> ]	Yes/No

**List of Major Services**

No.	Type of Service	Please tick the category applicable
1	Audit & Compliance Services	
2	Carpentry Services	
3	Civil Architecting and Interior Designing Services	
4	Civil Construction Work	
5	Cloud Application Services	
6	Consulting / Advisory Services	
7	Design & Engineering	
8	Equipment Operations Services	
9	Equipment Repair & Maintenance Services	
10	Fabrication Services	
11	Facility Management Services	
12	Design , Installation, Testing and Commissioning	
13	IT Software Support Services	
14	IT Support Services	
15	Managed IT Services	
16	Manpower Services (Labour, Semi-skilled or Skilled)	
17	Other Miscellaneous Services	
18	Plumbing Services	
19	Training Services	
20	Any other Service	

## Annexure C

### Bank Details required for E Payment on Vendor letter Head.

To,

Gujarat Narmada Valley Fert. & Chem. Co. Ltd.,

P.O. Narmadanagar,

Dist. Bharuch-392015.

Dear Sir,

#### Sub: E-Payments

I/we herewith request and authorize you to consider E-Payment to my / our Bank account as per the details given below for all the vendors:

Bank Account Name : \_\_\_\_\_

Bank Account Number : \_\_\_\_\_

Branch Name & Address of Bank: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email Id : **(two email address necessary for RTGS message )**

Permanent A/c Number (PAN) : \_\_\_\_\_

Name of the Auth signatory : \_\_\_\_\_

Contact Person : \_\_\_\_\_

Contact Phone Number : **(two mobile numbers necessary for RTGS SMS)**

IFSC code (in figures) : \_\_\_\_\_

IFSC code (in words) : \_\_\_\_\_

MICR Code : \_\_\_\_\_

Type of Account : Savings / Current / Cash Credit / Other  
\_\_\_\_\_

I, hereby declare that the particulars given above are correct. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I would not hold the user institution (GNFC Ltd.) responsible. I hereby authorize

Bank (as mentioned above) to credit my above mentioned account with the amount of proceeds due to me/installment and I agree to discharge the responsibility expected of me as a participant under the scheme.

Date: \_\_\_\_\_

Signature of Account Holder/ (s)

- All fields are Mandatory and cannot be left blank.
  - Kindly attach a blank cancelled cheque with this mandate form.
- 

**Bankers Attestation -**

**CERTIFIED THAT THE PARTICULARS FURNISHED ABOVE ARE CORRECT AS PER OUR RECORDS.**

BANK STAMP

DATE: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF BANK OFFICIAL