

ANNEXURE- VIII
(See Rule 19)

APPLICATION FOR REVALIDATION OF CONTRACTOR,
DEPARTMENT OF POWER, VIDYUT BHAVAN ITANAGAR A. P.

Supporting Documents to be annexed with the application form. (Applications found deficient in any respect are liable to be rejected without further correspondence)

CLASS : CATEGORY :

1. Name of applicant (Individual / Firm / Company) :

2. Nationality :

3. Address :

(i) Registered office :
.....
.....

(ii) Head office :
.....
.....

(Attach separate paper for addresses of other offices)

4. Contact Details :

Phone	
Mobile	
Fax	
e-mail	

5. PAN Number (Individual / Firm / Company) :

6. Constitution Individual :

Sole Proprietorship Concern

Partnership Firm

Public Ltd. Company

Private Ltd. Company

Joint Venture Company

7. Name, scanned passport size photo and scanned signature of the Individual(s) / Partner(s) / Director(s) in the space provided below

(Size of photo should be 3.5 X 4.5 cm having white background and printed name at bottom)

1	2	3	4
Paste Photo	Paste Photo	Paste Photo	Paste Photo

8. Is the individual / sole proprietor / any partner / director of company :

- | | | |
|--|-----|----|
| (a) Dismissed Government Servant | Yes | No |
| (b) Removed from approved list of contractors | Yes | No |
| (c) Demoted to a lower class of contractors | Yes | No |
| (d) Having business banned / suspended by any government in the past | Yes | No |
| (e) Convicted by a court of law | Yes | No |
| (f) Retired Engineer / Official from Department of Power, Govt. of Arunachal Pradesh within last Two years | Yes | No |
| (g) Director or partner of any other Company / firm enlisted with Department of Power, Arunachal Pradesh or any other department | Yes | No |
| (h) Member of Parliament or any State Legislative Assembly. | Yes | No |

(If answer to any of the above is 'Yes', furnish details on a separate sheet)

9. (a) Name of person holding power of attorney :

(b) Nationality Indian Other

(c) Liabilities (if any)

10. Name of Bankers with full address :

.....

11. Place of business :

12. Full Time Technical Staff in the Applicant's employment (Refer Table 1 and fill up the columns below with respect to requisite trade and experience only) :

Qualification	Name	Experience (in Years)	Date of Appointment

13. Does the applicant have sufficient T&P, Machinery, Equipment and workshop as per requirements mentioned in the Enlistment Rules for the class & category applied for [**Attach details on separate sheet**]

Yes No

14. For Electrical

i) Does the applicant possess valid Electrical License Yes No

ii) Do the permanent electricians employed by contractor posses valid license Yes No

15. a) Whether already enlisted with DoP, A. P. or any other department

Yes No

b) If yes, give details :

(i) Name of Department :

(ii) Class & Category :

(iii) Enlistment authority & address :

(iv) Enlistment No. & Date :

(v) Date of Validity :

(vi) Tendering Limit :

16. Is any person working with the applicant is a near relative of the officer / official of Department of Power, Arunachal Pradesh.

(See **Rule 16** of the Enlistment Rules)

Yes No

If 'Yes', give details.

17. Enlistment Processing Fee Enclosed Details :

Draft Number :

Draft Date :

Amount :

Branch :

Branch Drawn Upon:

Whose Favour :

18. Details of works completed, in progress and secured during the last 5 years (to be filled in proforma as given in **Annexure–III**). This list should include all works whose gross amount of work done is more than the required magnitude for the class in which registration is applicable.
19. Certificates from clients in original or attested copy as per proforma given in **Annexure- IV** for eligible works.

Certificates :

- (i) I / We (including all partners) certify that I / We have read the Rules of Enlistment of Contractors in Department of Power, Arunachal Pradesh as amended upto date and shall abide by them.
- (ii) I / We certify that the information given above is true to the best of our knowledge. I / We also understand that if any of the information is found wrong, I am / we are liable to be debarred.
- (iii) I/We certify that I/We will not get myself/ourselves registered as contractor(s) in the Department under more than one name.
- (iv) (a) I certify that I did not retire as an Engineer of Gazetted rank or as any Gazetted Officer employed on Engineering or Administrative duties in any Engineering Department of the Government of India during the last one years. I also certify that I have neither such a person under my employment nor shall I employ any such person within two years of his retirement except with the prior permission of the Government. (For individuals seeking enlistment in their own name)
- (b) We certify that none of the partners / Directors retired as an Engineer of Gazetted rank or as any Gazetted Officer employed on Engineering or Administrative duties of the Government of Arunachal Pradesh in the last two years. We also certify that we have neither under our employment any such person nor shall we employ any person within one years of his retirement except with the prior permission of the Government. (For partnership firms and limited companies).

(Strike out whichever is not applicable)

Signature(s) of applicant(s) :

Sl. No.	Name	Signature	Address
1			
2			
3			

Dated :

Number of documents attached :