

पीएम श्री केंद्रीय विद्यालय जेतपुर

फर्म/आपूर्तिकर्ता पंजीकरण के लिए आवेदन पत्र (2025-26)

TO BE FILLED BY AUTHORIZED PERSON / OWNER OF ORGANIZATION

1	Registration/Establishment sought for	<input type="checkbox"/> As a supplier <input type="checkbox"/> As a contractor <input type="checkbox"/> As a service agency										
2	Name of supplier/Vendor/ Contractor (in block letters)											
3	Address for communication											
		City:	Dist.:	State:	PIN:							
4	Telephone numbers	Landline (O)										
		Mobile										
5	Banking details	Bank Name & Address										
		A/C No										
		IFSC Code										

6	Registration related information (Attach Documents)	Reg. Number										
		GST No.										
		PAN Number										
		EPF Reg.										

7	Are you agreeable to make deliveries to Kendriya Vidyalaya Jetpur	Yes/ No (Please Tick)
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8	List of items you can supply:	List of services you can provide:

DECLARATION

I / we declare that the information furnished above is true to the best of my/our knowledge.

I / we undertake to inform K.V. Jetpur at the earliest any change in the details mentioned above.

I / we hereby agree to abide by the conditions prescribed in the enclosed statement of K.V. Jetpur.

Thanking you,

Signature of authorized person with Date _____

SEAL of FIRM

Name & Designation _____

Note: 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.

Office Use only			
(i)	Copy of registration of firm / company / shop	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(ii)	Copy of License of service provider	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(iii)	Copy of GST number copy	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(iv)	PAN Number copy	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(v)	LIST OF ARTICLES that firms can supply to the vidyalaya	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(vi)	Proof of 3 years performance of the company/shop (preferable)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(vii)	Turnover for last three financial years (F.Y 2023-24, F.Y 2022-23 & F.Y 2021-22)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(viii)	Copies of last 3 years. IT Returns Balance Sheets & Revenue, A/c	<input type="checkbox"/> YES	<input type="checkbox"/> NO