

# PM SHRI KENDRIYA VIDYALAYA ALWAR,

शिक्षा मंत्रालय, भारत सरकार (MINISTRY OF EDUCATION, GOVT. OF INDIA)

मोती डूँगरी, अलवर राजस्थान / Moti Dungri, Alwar (Raj) 301001

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## **APPLICATION FORM FOR REGISTRATION OF FIRM 2025-26**

Name of the Category (which Item firm want registration) :-

(Please ref. Firm Reg.

**Detailed Advertisement** 

(Separate Application is to be filled-up for each category)

#### **CONDITIONS FOR REGISTRATION:**

- 1. The Firm/Supplier should be in profession for at least one year (copy of proof must be enclosed).
- 2. Annual Turnover of the firm should not be less than the turnover mentioned against the different categories in any of the three financial years (Attach proof).
- 3. The firm should be on the approved panel of at least 3 reputed Firms.
- 4. The Firm/Supplier should have registration with state & Local Authorities for undertaking the profession ( Copies of proof to be enclosed)

#### **APPLICATION FOR FIRM/SUPPLIER/ SERVICE PROVIDER**

#### PART – 1 GENERAL INFORMATION

| S.No. | Information sought                                    | Information to be Provided |
|-------|---|----------------------------|
| 1     | Name of the Firms ( in Block Letters)                 |                            |
|       |   |                            |
| 2     | Date of Establishment/Incorporation                   |                            |
|       |   |                            |
| 3     | Correspondence address and Telephone No.              |                            |
|       |   |                            |
| 4     | Address of Head Office (if Separate and Telephone No. |                            |
|       |   |                            |
| 5     | Status Proprietary/Partnership/Private Limited        |                            |
|       | Company/ Public Limited Company                       |                            |
| 6     | Names of the Partners/Directors                       |                            |
|       |   |                            |
| 7     | Name of Chief Executive with his present address      |                            |
|       | and Telephone Nos.                                    |                            |
| 8     | Name of Representative(s) with Designation who would  |                            |
|       | be calling on us and attending to our jobs.           |                            |
| 9     | Name of Bankers with address & telephone nos.         |                            |
| 10    | Is the Firm registered Under the Factories Act "? If  |                            |
|       | so, state   |                            |
|       | (a) GST No.   |                            |
|       | (b) Licence No.                                       |                            |
|       | (c) Date of Last renewal of Licence (Copy of the      |                            |
|       | licence to be enclosed)                               |                            |
|       | (d) PAN No.   |                            |
|       | (e) ESI Reg No. if any                                |                            |
|       | (f) EPF Registration No. if any.                      |                            |



| 11 | Whether holding certificate under shops  |  |
|----|--|--|
|    | & establishment act duly renewed copy should be  |  |
|    | enclosed.  |  |
| 12 | State the latest Income Tax Assessed year and the  |  |
|    | amount of Tax assessed (Copies of last 3 years. IT   |  |
|    | Ruterns Balance Sheets & Revenue, A/c to be enclosed).   |  |
| 13 | Turnover for last three financial years  | F.Y 2023-24                                |
|    |  | F.Y 2022-23                                |
|    |  | F.Y 2021-22                                |
| 14 | Are you agreeable to make deliveries to Kendriya   |  |
|    | Vidyalaya within and out of SARNI  |  |
|    | When so directed?  |  |
| 15 | Are you agreeable to abide strictly by the   |  |
|    | Terms and Conditions of the Tenders and contracts?   |  |
| 16 | If your firm is registered with any KV/KVS, RO/ KVS, HQ or   |  |
| 10 | any other State/ Central Govt. offices. Please give name and   |  |
|    | address.   |  |
|    |  |  |
| 17 | Name, Addresses and Telephone Nos. of  |  |
|    | Some of your most valued clients (Separate List may be   |  |
|    | attached).   |  |
| 18 | Mention any other specialties of your  |  |
|    | Establishment.   |  |
|    | Note: please fill this form legibly in ink. If space provided is insufficie  |  |
|    | sheet giving appropriate question number and attach it to the for  | rm.  |
|    | UNDERTAKING   I/WE Proprietor of M   | 1/s do                                     |
|    | -  |  |
|    | Hereby undertake that the above furnished information is correct to the  |  |
|    | of any information supporting document furnished by me found to he in<br>be cancelled automatically and action may be taken as KVS rule. I ass |  |
|    | Vidyalaya.   | ure you to provide the best service to the |
|    | v layalaya.  |  |
|    | Signature with Seal of firm Date   | Place                                      |
|    | Dale   | ······1 lace ·····                         |

Date .....Place.....

Name:-\_\_\_\_

Designation:

The Vidyalaya reserves the right to cancel the name of the supplier/firm/service Note: provider from its approved lists at his absolute discretion without assigning any reason.

### आवश्यक दिशानिर्देश

- 1. फर्म पंजीकरण सामान व सेवाओं हेतु अलग-अलग आवेदन पत्र में भरकर जमा करायें।
- 2. आवेदन पत्र व लिफाफे पर सामान व सेवाओं का नाम जिसके लिए पंजीकृत किया जा रहा है उस का नाम स्पष्ट रूप से लिखा होना आवश्यक है ।
- 3. आवेदन पत्र पर फर्म की सील व हस्ताक्षर नहीं होने पर आवेदन निरस्त कर दिया जाएगा।