SPORTS AUTHORITY OF INDIA

NORTHERN REGIONAL CENTRE,

BHALGARH,

SONEPAT

Application Form for Empanelment

of Contractors for works costing upto Rs. 5.00 Lakh

Name of the	Firm
Address	

Due date of Submission: 10.06.2024

Instructions to the Contractors

- The Sports Authority of India, Northern Regional Centre intends to prepare a panel
 of reputed contractors for undertaking maintenance and repair works at SAI NRC
 Sonepat. These works are estimated to cost upto Rs. 5.00 lakh.
- 2. Only contractors having minimum 3 years' experience in undertaking the works in the maintenance and repair works, and have executed two or more similar works individually costing not less than 05 lakhs during the last 3 years and have minimum yearly turnover of Rs. 10 lakhs during the last three years, and also have a full pledged service setup either at Sonepat or at nearby place.
- Intending applicants are required to furnish details about their organization, technical experience, competence and evidence of their financial standing as per the enclosed proforma.
- 4. While deciding upon the selection of contractors, emphasis will be given on the ability and competence to do good quality work in accordance with the specifications and within the time schedule.
- 5. The application form shall be signed by a person on behalf of the organization, who is duly authorized to do so.
- 6. If the space in the application form is insufficient for furnishing full details, such information may be supplemented on a separate sheet of paper duly signed.
- 7. Application along with a covering letter of any document shall be submitted in duplicate.
- 8. Application containing false or inadequate information is liable for rejection.
- 9. The SAI NRC reserves the right to reject any of all the applications without assigning any reason thereof



SPORTS AUTHORITY OF INDIA

NORTHERN REGIONAL CENTRE, BHALGARH, SONEPAT

Telephone: 01302981562 e-mail: rcsonepat-sai@nic.in, infrancesonepat@gmail.com

Vendor Registration Form (For Tenders up to Rs. 5.0 Lakh)

Organization Profile (A)

1.	Name of firm / Agency	У						
2.	Name of the Proprietor	/Partner						
3.	Educational Qualificat	ion of Propri	etor/Partner					
4.	Address of the firm				• • • • • • • • • • • • • • • • • • • •			
5.	Telephone, Fax No. &	Email ID						
6.	PAN Number (attach	self-attested	copy)			• • • • • • • • • • • • • • • • • • • •	•	
7.	GST No (attach self-at	tested copy)						
8.	8. Attach copies of ITR for the preceding 3 AY - (2021-22, 2022-23, 2023-24)							
9.	9. Valid Establishment/Registration Certificate (Attach self-attested copies)							
10	D. Legal Structure: Type	e of Business	entity (Chec	k One)				
	Corporation Part	tnership Sole	Proprieto	orship Joint Ve	nture			
	Franchise No	on-Profit						
11.	Type of Business// Con							
			Manufacturer		Wholesale	er		
	onstruction Contractor	Services	Consultant	:	Other			
D	Distribution / Dealer Service Provider Freight/Transportation							
12. Geographic Service Area: (Check One)								
Lo	ocal	National	International					
	Please specify							

13. Have You Previously Dor Regional Centre Sonepat.	e Business with The	Sports Authority of I	ndia, Northern
Yes, if yes, please specific No	y the No. of Year/Mor	nths	
14. Short Details on Service	es or Goods Your C	ompany Provides/Sup	oplies
15. Whether the company/lif yes, tattach details in separ Yes No 16. Whether the Company/F	ate Sheet.		
years. If yes, give the reason	s thereof		
Yes No			
	(B) FINANCIAL	SOUNDNESS	
Annual Turnover and be minimum to Rs. 10		18	age turnover should
Year	2020-2021	2021-2022	2022-2023
Annual Sales/business excluding other income (Rs. Lakhs)		2021 2022	2022 2020
Profit Before Tax (PBT) (Rs. Lakhs)			
 Bank Detail (for pa Account Number 	yment through RTC		
b. Name of Bank			
c. IFSC Number			
C. II SC IMMOOI			

(C) TECHNICAL COMPETENCY

1. Details of supplies// works of similar nature executed during last three years: Copy of work order(s)/ Service Contract(s) executed during last Three years to be submitted along with the performance certificate issued, if any (Attach separate sheet if required).

Sr.	Name	Client's	Value Of	Date Of	Actual date of	Date Of	Remarks
No.	Of The	Name	The Work/	Starting	completion of	Completion as	
	Work		Contract	_	Work/ Delivery	Per Contract	
					Date		
1.	-	-	-	-	-	-	-

1.	-	-	-	-	-	-	-		
	eadiness	for partici	pation in e-t	endering/gl	procurement:				
No									
	I. Pleas D fac	se enclose to cilities in a	separate sheet	on chart of y	our Quality Contro	ol/ Inspection Dep	t. and R &		
	DECLARATION								
I sh Son I, th corr I u	all abide bepat. e undersigect. nderstand	y the terms gned, certify	and condition that to the be misstatement	ns as per the	owledge and belief	onal Director, SAI f, the above informed herein may le	nation is		

(Seal of Firm)

1. 2.

3.

4.