

# **ARMY INSTITUTE OF NURSING, GUWAHATI**

## **REGISTRATION OF VENDOR**

**INSTRUCTIONS TO VENDORS:-** AIN, GUWAHATI is proposed to register vendors for supply/manufacture of goods and services. The vendors who supply/ manufacture/ provide services related to Stationery items, Computer with all accessories, books, lab equipments, furniture, software, IT items, hardware, electrical, printing, advertisement agency, who are desirous for Registration with AIN, GUWAHATI may apply for registration of vendors by furnishing the following documents in triplicate (in three separate folders) for our consideration. Applicant vendors must ensure that all documents submitted are numbered in chronological order with proper separator sheets. All documents submitted should be in A4 size.

1. **Qualification Criteria:** Vendors must submit all necessary information / documents in support of their qualification for registration as per the specified Registration of Vendor as per chapter 6 of GFR 2005 Performa as under:

- (a) Company details. Details at Appx A including details manufacturing facilities.
- (b) Location and Address of the company and photograph of office/showroom etc from outside and inside.
- (c) Income tax assessment for last two financial years.
- (d) Registration with any govt organization.
- (e) Good and Services Tax Identification Number (GSTIN) and Tax clearance certificate.
- (f) The Vendor must have experience of supplying goods/providing services in relevant /similar lines for at least three years. Proof of supply of items to govt Dept/ private organizations.

- (g) Bank details as per Appx B.
- (h) The vendor must be financially sound. Net worth should be positive.
- (j) After sales service facility.

### **GENERAL INSTRUCTIONS TO VENDORS**

2. Request for registration shall be entertained only from direct suppliers/ manufacturers. Requests from Agents/representatives shall be summarily rejected and plea for refund of fee, etc. shall not be entertained.
3. Vendors are required to complete all parts of the proformae and provide complete information requested therein in one go to the satisfaction of AIN, GUWAHATI. Wherever the answer is a statement of fact, it must be accurate and supported by documentary evidence as required. Wherever it is a statement of opinion, it must be both true and reasonable. It is Vendor's responsibility to answer the questions with such clarity that will ensure AIN, GUWAHATI does not misinterpret any of the responses.
4. Any supplementary sheets or enclosed information must have the name of the vendor clearly marked on it
5. The registration process will be done through a Board of Officers. The board have the right to examine the supplier/ manufacturer credentials, manufacturing capacity, quality control systems, past performance, after sales service, financial background at any stages.
6. If the Vendor is unsuccessful and not registered, the vendor will be notified of the decision and informed of the reasons for non-acceptance.
7. Should a vendor fail to qualify, then AIN, GUWAHATI reserves the right to refuse a reapplication for registration within 6 months of the date of notification of failure.
8. **SUCCESSFUL REGISTRATION BY AIN, GUWAHATI IS NO GUARANTEE OF ANY FUTURE AWARD OR WORK OR INCLUSION ON A PARTICULAR TENDER LIST.**

9. Any inaccuracy in any response given in the questionnaire, or failure to substantiate any response as required by AIN, GUWAHATI may result in failure to qualify for inclusion in the Vendor Registration list. The vendor may be removed from the Registration of Vendor List.
10. Any vendor providing false information or grossly inaccurate or forged documents will stand automatically disqualified for consideration of registration for this or any other future notifications for a minimum period of three years. Again, if such information comes to light after successful qualification and registration, AIN, GUWAHATI reserves the right to remove the vendor from the Registration of Vendor List for that category / item.
11. It will be the responsibility of the vendor to submit / update AIN, GUWAHATI with latest audited Balance Sheet and also to keep AIN, GUWAHATI informed of any such matter that may affect the vendor's continued qualification and attributes. If the vendor's future circumstances change so that they no longer meet the registration qualification criteria for that particular category / item, then the vendor should promptly inform AIN, GUWAHATI and AIN, GUWAHATI reserves the right to remove the vendor from the Registration of Vendor List. AIN, GUWAHATI shall not bear any responsibility or risk whatsoever for any suspension / cancellation or other termination of the vendor's qualification to be registered.
12. Rules and criteria for qualification for registration may be changed or added to, as necessary for the qualification assessment for a particular purchase / works / project group. Vendor's who have previously been qualified and whose names are retained on qualified Registration of Vendor List will be invited to demonstrate that they can comply with the changed or additional criteria. Failure to comply with the changed or additional criteria will result in removal/suspension from the qualified Registration of Vendor List.
13. Throughout the period of Vendor's registration validity, the vendor shall voluntarily update with any time-sensitive data supplied at the time of original application for registration without any obligation on part of AIN, GUWAHATI to seek such information for continuance of the registration.

14. AIN, GUWAHATI keeps the right to undertake further pre-tender qualification to identify suitable tenderers for a particular tender list.
15. Once the initial qualification process has been completed and the successful vendors are registered, the database is subjected to annual review. Any allowable re-application will be considered in the next annual review and successful vendors will be registered and the database updated.
16. AIN, GUWAHATI reserves the right to modify any specific tender documents as per requirements.
17. Suppliers who have incurred loss in the latest financial year as per the audited Balance Sheet shall not be considered for registration.
18. Registration is subject to payment of “Registration Fee” as detailed **at Appx C.** Registration fee once paid shall not be refunded in case of non acceptance of application for any reason, at any stage of processing.
19. Retention of suppliers in Registration of Vendor List shall be subject to satisfactory performance on execution of work/supply orders and evaluation of performance as per AIN, GUWAHATI’s approved procedure for performance evaluation of vendors.
20. In case of non compliance of Terms and Conditions of the registration to supply goods and services on time **or** poor performance of vendors after evaluation, unsatisfactory after sales service, AIN, GUWAHATI reserves the right to cancel the vendor from Registration list.
21. In case of receipt of incomplete documentation, supplier may be given opportunity to complete balance data at AIN, GUWAHATI’s discretion. However, in case supplier is not able to furnish complete data within a period of two months from the date of application, such cases shall be closed.
22. Registration shall be accorded for a period of one to three years. Thereafter registration shall have to be regularly “Revalidated” before the expiry of validity period.

23. Applicants must ascertain specifications of the products / categories / items matching with the requirement of AIN, GUWAHATI.

24. Last date for received of application with connected documents is **25 June 2018 (1500 hrs)**. Any applications received thereafter shall not be entertained.

25. All applications in duplicate with various enclosures complete in all respect with the requisite Registration Fee may be submitted **directly or by post** to :-

**The Principal**

**Army Institute of Nursing, Guwahati**

**C/O 151 Base Hospital**

**Basistha, Guwahati**

**PIN-78109, Assam**

**Tel-0361-2307101, 94015-49593**

**DECLARATION**

(This declaration should be completed by the Proprietor, Partner, Director and/or Authorized Signatory, who has the authority to do so)

I/We ..... declare and confirm that the information furnished and attachments submitted with the application are true and correct.

I/we are aware that any false information provided herein will result in the rejection of my/our application for registration.

I/we shall be bound the acts of the duly authorized signatory who has signed this application and of any other person, who in future, may be appointed by us in his place whether or not an intimation of such changes has been given.

I/we undertake to communicate promptly to AIN, Guwahati any changes in the conditions or working of the firm.

I/we have read and understood the General instruction to Vendors and agree to abide by the same in all respects.

NAME:

POSITION:

DATE:

PLACE:

OFFICE SEAL

SIGNATURE

**COMPANY DETAILS****1. Type of Organization**

(A)	Corporation	_____
(B)	Limited Liability Co.	_____
(C)	Partnership	_____
(D)	Sole Proprietorship	_____
(E)	Manufacturer	_____
(F)	Other ( Specify )	_____

**2. Certificates Validity.**

Ser	Certificate	Certificate No	Expiry Date
1	Incorporation Certificate		
2	Firm of Registration Certificate		
3	GST Certificate		
4	State ST Regn. No		
5	TIN No.		
6	Excise Reg. No.		
7	Establishment / Factory License No.		
8	Service Tax Reg. No.		
9	PAN		
10	Registration Certificate with GeM /NCCF		
11	Registration certificate with PWD, CPWD, CSEB or equivalent for civil and electrical Contractors		
12	ISO Certification/ Quality Assurance / Quality Policy		
13	Others		

**3. Company Address.**

NAME OF FIRM \_\_\_\_\_  
 (LEGAL NAME AS PER CERTIFICATE)

MAJOR ITEM OF SUPPLY \_\_\_\_\_  
 (STATE ONLY TWO)

Contact Person Name	
Designation	
Office Address	
Po Box	
Postal Code	
City / Town	
Country	
Telephone No.	
Mobile No.	
Fax No.	
E-Mail Address	



4. Ownership

PLEASE SPECIFY OWNER/PARTNERS/SHAREHOLDERS NAME/NAMES WITH SHARE PERCENTAGE.

NAME	SHARE %
_____	_____
Mr. _____	_____
Mr. _____	_____
Mr. _____	_____
Mr. _____	_____
Mr. _____	_____

5. Staff Strength:

(a) Total Number of Employees: \_\_\_\_\_

(b) Technical Support Staff: (Insert more rows as desired please)

Ser	DESIGNATION / POSITION	NO. OF STAFF
1		
2		
3		
4		
5		

6. Authorized Signatories (Key Personnel) authorized to signs Bids/Offers & Contracts.

Ser	Name	Position	Contact Numbers	Specimen Signatures
1				1. 2.
2				1. 2.
3				1. 2.
4				1. 2.

Note: Specimen Signatures are mandatory

7. Give the floor area of your factory and Offices. If you own more than one factory, please give separate details for each unit:-

Factory <u>or</u> Office	Location	Area in Square Meters

8. Give a list of your major products / services, you intend to offer as a supplier/ manufacturer:-

Ser	Major Products / Services	Are you Original Equipment Manufacturer for listed product
		Yes / No
		Yes / No
		Yes / No
		Yes / No
		Yes / No
		Yes / No
		Yes / No
#Please enclose your Company / Product Catalogues		

#Please attach Proof of Purchase Order in the form copies/Invoice etc

**BANK DETAILS**

1. Account Name \_\_\_\_\_

2. Account Holder's Name \_\_\_\_\_

3. Accounts Number in which \_\_\_\_\_  
Number the cheque to be credited

4. Name of Bank \_\_\_\_\_

5. Branch Name & Code \_\_\_\_\_

6. Bank IFSC Code \_\_\_\_\_

7. Bank MICR Code \_\_\_\_\_

8. Bank Address (Full) \_\_\_\_\_

Signature of Accounts Holder \_\_\_\_\_

**Registration Fee** - Rs 2,000.00 (Rupees two thousand only) in the shape of Demand Draft (DD) in favour of Army Institute of Nursing, Guwahati payable at Guwahati.