

INTEGRATED HEADQUARTERS OF MOD(NAVY)
DIRECTORATE OF ADMINISTRATION

APPLICATION FORM FOR VENDOR REGISTRATION

1. **NAME OF FIRM/VENDOR:** _____

2. **ADDRESS**

(a) **HEAD OFFICE** :

TELEPHONE _____

FAX _____

EMAIL _____

(b) **FACTORY** :
(if applicable)

TELEPHONE _____

FAX _____

EMAIL _____

(c) **LOCAL OFFICE** :
(if applicable)

TELEPHONE _____

FAX _____

EMAIL _____

(d) **e-PROCUREMENT DETAILS** :

3. **DATE OF INCORPORATION** _____

4. **CATEGORY OF BUSINESS / INDUSTRY**

(attach relevant document)

5. **NATURE OF COMPANY** _____

- (a) PROPRIETARY
- (b) PVT LTD
- (c) PSU
- (d) EX SERVICEMEN UNIT
- (e) PARTNERSHIP
- (f) OTHERS

Note :

- I. Give Name , residential address with telephone of proprietor for (a)
- II. Give Name, designation, residential address of Chief Executive or Managing Director for (b), (c)
- III. Give Name, address, Telephone no with partnership deed (if partnership firm) of partner in extra sheets

6. **NATURE OF BUSINESS** _____

- (a) Manufacturing
- (b) Trader
- (c) Sole selling or Authorised Agent
- (d) Dealer
- (e) Assembler
- (f) Processor
- (g) Repacker
- (h) Others

7. **DETAILS OF CURRENT PRODUCTS AND SERVICES**

(Attach details and literature)

8. **DETAILS OF TRANSACTIONS WITH GOVT/SEMI-GOVT/PSUs DURING THE LAST THREE YEARS.** (As per Annexure III)

9. **DETAILS OF REGISTRATION** (Attach proof of valid registration)

- (a) NSIC/ SSI
- (b) DGS&D
- (c) Other Defence Departments
- (d) Other Govt Departments
- (e) Membership of FICCI/ ASSOCHAM/CII/AIMO/ other Industrial associations

10. **HAVE YOU ALREADY APPLIED FOR REGISTRATION EARLIER**

11. **IF YES, GIVE THE FOLLOWING DETAILS**

- (a) Department registered with _____
- (b) Date of registration and validity _____

(c) Category of Services for which registered _____

12. **ITEMS FOR WHICH REGISTRATION APPLIED**

| SNo | Brief Description of Item | Model / Brand | Specifications, if any |
|-----|---------------------------|---------------|------------------------|
| | | | |

13. **IF THE PRODUCT REQUIRES AFTER SALES SERVICE, GIVE NAMES AND ADDRESSES OF FACILITIES WHERE THE SAME IS AVAILABLE (ATTACH DETAILS ON A SEPARATE SHEET)**

14. **HAVE YOU GOT ISO CERTIFICATION, IF YES GIVE DETAILS**
(attach copy of certification)

15. **NAME OF BANKERS AND A/C NO** _____
(AS PER Annexure II) _____

16. **ADDRESS OF THE BANKER** _____

17. **DOES YOUR PRODUCT UNDER VERIFICATION FALL UNDER**

- (a) Cost Audit (Report) Rules 1968 _____
- (b) Fire Safety or Explosive Regulations _____

18. **DETAILS OF MANPOWER EMPLOYED AS ON DATE ON FIRM'S PAYROLL**

- (a) Permanent _____
- (b) Temporary _____

19. **ATTACH COPIES OF DOCUMENTS FOR:**

- (a) Audited Balance Sheet and Profit & Loss A/c for the last 3 years and total accumulated losses, if any.
- (b) Annual Turnover of Sales for the last 3 years
- (c) Source of finance with borrowing limit (if other than SI 13)
- (d) Income Tax Clearance certificate for the last three years
- (e) Valid State, Central Sales Tax Registration Certificate.
- (f) Relevant information with complete details about sister concerns/ subsidiaries, if any

CERTIFIED THAT I/we have gone through the conditions of the registration given in Annexure I and I/we understand and confirm that I/we fully comply with the same.

I/we agree that it is incumbent on our part to comply with all existing the laws/acts/statutes as applicable in our line of business and other provisions like taxes/ registration/ licenses.

The abovementioned details provided by me/us are true and the onus for correctness lies on me/us. Any deliberate suppression of facts is liable to disqualification of my application.

(signature)

Place : _____

Date : _____

CONDITIONS OF REGISTRATION

1. The registration granted to the firms will be for conducting business with Directorate of Administration, IHQ of MOD(Navy) only and not any other department of the Indian Navy.
2. Registered firms are to abide with the Standard Conditions Of Contracts contained in the Defence procurement Manual 2009 & DFPDS-2016 and other govt. regulation as promulgated from time to time.
3. It is obligatory on the part of the registered firms to keep Directorate of Administration, IHQ of MOD(Navy) informed about the changes in their product specification or discontinuation of production/sales of any item for which they stand registered. This intimation is to be given within a period of **15 days from the date of such change / discontinuation**.
4. In the event of any change in the constitution of the firm, nature of business and location of the firm the registration with IHQ of MoD(Navy) shall lapse. The firm shall surrender the original registration certificate and apply for fresh registration in such cases.
5. Registered firms are to maintain absolute integrity, follow ethical business practices and comply with all processes of the registration.
6. Fresh application with prescribed fee shall be required to be made after expiry of previous registration or for seeking additional registration/ change of specification.
7. The **registration on the approved list does not guarantee award of any contract**. Registered firms are to always quote the Registration No. in all tenders.
8. In all correspondence with Directorate of Administration, IHQ of MOD(Navy), approved vendors are to quote their registration number.
9. The Directorate of Administration, IHQ-MOD(Navy) has the right to add/ delete any of the items and to amend any of the conditions included in the registration granted to firms with effect from any date specified in the communication notifying such change.

Annexure II

PROFORMA FOR BANKERS REPORT

(To be submitted on Bankers' letterhead)

The Principal Director of Administration
A-Block Hutments, Dalhousie Road
Integrated Headquarters of MOD(Navy)
New Delhi - 110 011

**Sub: Financial credibility report in respect of M/s _____ for the
purpose of registration with Directorate of Administration, IHQ of MOD(Navy)**

Sir,

This is to certify that M/s _____ are maintaining
Current/ Savings account No with this bank / branch for the last _____ years. The firm has
been provided with a credit limit of _____.

It is further certified that their account with this bank has been operated in a
satisfactory manner.

(_____)
Manager
Bank/ Branch with Seal

Annexure III

PERFORMANCE STATEMENT FOR THE LAST THREE YEARS

| Sl No | Purchaser with Address | PO & Date | Description of Stores | Value | Date of completion |
|-------|------------------------|-----------|-----------------------|-------|--------------------|
| | | | | | |

