



केन्द्रीय विद्यालय अजनी(प्रथम पाली) नागपुर

(शिक्षा मंत्रालय, भारत सरकार के अधीन एव स्वायत्त निकाय)

एस. ई. सी. रेल्वे कॉलोनी के पास, मेडिकल कॉलेज रोड, अजनी नागपुर-440003

KENDRIYA VIDYALAYA AJNI (Shift-I) NAGPUR

(AN AUTONOMOUS BODY UNDER MINISTRY OF EDU, GOVT OF INDIA)

NEAR S.E.C. RLY COLONY, MEDICAL COLLEGE ROAD, AJNI NAGPUR

440003 ईमेल/E-mail : ajninagpurkv@gmail.com

वेबसाइट/Website : ajni.kvs.ac.in

टेलीफ़ोन/Telephone : 0712-2749124 , 0712- 2971636, 0712-2971637



Work Category :	Name of the Category :- (As per gomasta)
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(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) The Firm / Supplier should have registration with State & Local Authorities for undertaking the profession (Copies of proof to be enclosed)
- 3) Incomplete forms without required enclosures will be rejected.
- 4) KV Ajni reserve the right to reject any application.
- 5) Preference will be given to those who are on the approved list of cost deposit or ISO certificate holders or dealers authorized by manufacturers.
- 6) If KV Ajni Nagpur registered any firm as approved supplier, the firm has to supply the materials at KV Ajni Nagpur. Payment Shall be made through RTGS/NEFT within 20 days from the date of receipt of materials in good condition.

APPLICATION FOR REGISTRATION OF FIRMS AS SUPPLIER/ SERVICE PROVIDER

PART – 1 GENERAL INFORMATION

S.No.	Information sought	Information to be Provided
1	Name of the Firm (in Block Letters)	
2	Date of Establishment/Incorporation	
3	Correspondence address with Telephone No.	
4	Address of Head Office with 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) Shop Act No.(Gomasta)	
	(b) Labour License No.	
	(c) Date of Last renewal of License (Copy of the license to be enclosed)	
	(d) PAN No.	
	(e) ESI No.	
	(f) EPF Registration No.	
	(g) GST No.	
	(h) Professional Tax No.	
	(i) License from Police Commissioner for security services	

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 Returns Balance Sheets & Revenue, A/c to be enclosed).	
13	Turnover for last three financial years	F.Y 2019-20 FY 2020-21 FY 2021-22
14	Are you agreeable to make deliveries to Kendriya Vidyalaya within and out of KV Ajni, Nagpur when so directed?	
15	Are you agreeable to abide strictly by the Terms and Conditions of the Tenders and contracts?	
16	If your firm has provided services to any KV/KVS, RO/ KVS, HQ or 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 insufficient please type or write the replies on a separate sheet giving appropriate question number and attach it to the form.

I / We _____ request Kendriya Vidyalaya, Ajni Nagpur (MS) to consider inclusion of my/our name in the list of their approved Firms / Suppliers / Service provider.

I / We agree to give full satisfaction to the Vidyalaya in the event of their doing so.

Dated at _____ of this _____ day of _____ 2023.

Signature with Seal

Name:- _____, Designation _____, Mob No. _____

Email Address:

(Affixed Rubber stamp)

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