

दि न्यू इन्डिया एश्योरन्स कंपनी लिमिटेड

(भारत सरकार का उपक्रम)

The New India Assurance Company Limited (A Government of India Undertaking)

क्षेत्रीय कार्यालय, द्वितीय तल, एल आई सी इन्चेस्टमेंट बिल्डिंग, पंडरी, रायपुर (छ.ग) - 492004 Regional Office, 2nd Floor, LIC Investment Building, Pandri, Raipur, CG-492004

CIN No. L66000MH1919GOI000526 Tel.No.0771-2582390, 2583812

Website: www.newindia.co.ln



RPR RO/E&E/EMPANELMENT/ARCHITECT/2023-24

DATE: 01/11/2023

Tender Notice

Re: Empanelment of Architects for our Regional Office, Ralpur (460000) for civil and related works upto **₹15,00,000/-**

Applications are invited from reputed firms/vendors having their offices in C.G preferably in Raipur for empanelment by The New India Assurance Co. Ltd. (herein after referred to as "company") as Architects as per specimen Annexure I.

The interested firms are required to fill up separate forms for each category which may be downloaded from our website www.newindia.co.in or obtained from our office.

The application should be accompanied with a DD/Pay order in favour of "The New India Assurance Co. Ltd." payable at Raipur for Tender fee of Rs.590/- (500 + GST) which is non-refundable.

Existing vendors who are currently empaneled with New India Assurance Co. Ltd. are also required to apply for fresh empanelment.

The envelope should be super scribed as "Application for empanelment as Architect and the application should be submitted to:

Manager,

Estate and Establishment Department, The New India Assurance Co. Ltd., Regional Office, Raipur. 2nd Floor LIC Investment Building Phase- II, Pandri, Raipur - 492001.

- 1. The vendors will be shortlisted based on their suitability, expertise, experience etc. and valid documents submitted by them.
- 2. Incomplete tender or tenders submitted with qualifying conditions at variance with the Terms and conditions of tender are liable to be rejected summarily. The New India Assurance Co, Ltd. will have full liberty in regard to the formation of panels and its decision shall be final and incontestable.
- 3. The applicant should have an office located within C.G region preferably in Raipur Region. Preference shall be given to those who has worked for central/ state government, PSUs, PSBs, Public Sector Insurance Cos.
- 4. It will be binding on the vendor, once empaneled, to submit their bid, for every tender, floated by New India Assurance Co. Ltd, which lies within the type of work applied for by them. If the vendor fails to bid for tenders more than two times or doesn't accept the work allotted to him more than two times, he/she: shall be liable to be blacklisted.

Regd. & Head Office: New India Assurance Building, 87, महातमा गाँधी मार्ग, फोर्ट, मुंबई -400001 सि.आई.एन क्रमांक /CIN No. L66000MH1919GOI000526

फोन / Phone: 022-22874817, 22874822, फैक्स / Fax: 022-2282235



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- 5. Panel remains valid, for three years from the date of issue of empanelment letter, The Company reserves the right to terminate or extend the, period of the panel.
- 6. All applicants are required to fill the declaration as per specimen Annexure III.
- 7. Incomplete forms are liable for rejection. Non-submission of any of the required documents will lead to disqualification. The Company reserves the right to accept or reject any/all applications without assigning any reason thereof.
- 8. <u>PRE-QUALIFICATION CRITERIA</u>- The applicant must attach the following documents for the type of Work he/she is applying for:
 - (a.) Architect/consultant must have their local office in Chhattisgarh.
 - (b.) Minimum 5 (five) years experience as Registered Architect.
 - (c.) Registration number registered with Council of Architecture(COA).
 - (d.) Completion certificate of successful completion of similar works from the client shall be submitted. The works executed during last 5 years ending last day of month previous to the one in which applications are invited should be either of the following.
 - (i) One similar completed works costing not less than the amount equal to 70% of the category applying for.

(or)

(ii) Two similar completed works costing not less than the amount equal to 40% of the category applying for.

(or)

(iii) Three similar completed works costing not less than the amount equal to 30% of category applying for.

Those bidders who are meeting all above criteria should apply. Only those bidders who are meeting above criteria shall be considered for further evaluation.

Last Date of submission of application - on or before 20th November, 2023 by 03.00 PM (applications received after the deadline will not be accepted).

Regional Manager Ollu 201

Estate & Establishment

Raipur RO.

पंजीकृत एवं प्रधान कार्यालय : न्यू इंडिया एश्योरंस बिल्डिंग, 87, महात्मा गाँधी मार्ग, फोर्ट, मुंबई -400001 Regd. & Head Office: New India Assurance Building, 87, Mahatma Gandhi Rd., Fort, Mumbai-400001 सि.आई.एन क्रमांक /CIN No. L66000MH1919GOI000526

फोन / Phone: 022-22874817, 22874822, फैक्स / Fax: 022-22822355

ANNEXURE I

Application form for empariement for.	Application form for empanelment for :	
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	Common Details for all the Vendors (Please	se fill in block letters)
S. NO.	Common Details for all the vendors (Fleat	Se III III blook letters,
1.	Name of the Firm	
2.	Type of firm (Sole Proprietor / Partnership / Pvt. Ltd. / Public Ltd. and its registration number if any) (Enclose copy of Partnership Deed/Articles of Association / Memorandum of Association)	
3.	Name of all the Owners/Partners/Proprietor	
4.	Address of Registered Office	
5.	Address of Operating/Local Office	
6.	Telephone Numbers (Registered Office Landline) (Local Operating Office Landline)	
7.	Name & Mobile Number of person who would be in touch with us and attending to our job	
8.	Fax No. (Registered Office Landline) (Local Operating Office Landline, if any)	
9.	Email Address (Of Firm)	
10.	Web Address of Firm, if any	
11.	Date of Establishment/incorporation	
12.	Month and Year of Commencement of Business	
13.	Turnover for the last 3 years (Please attach copies of last 3 years' Certified IT Returns, Balance Sheet and Revenue A/C certified by a registered CA)	AS per Annexure IV Attached
14.	List of Jobs Executed by you in the category applied for during last 5 years (Please attach work completion certificates)	AS per Annexure V attached
15.	Details of Jobs at Hand (please attach work orders)	AS per Annexure VI attached
16.	whether your firm was blacklisted by any institution in the past3 years (give details with contact numbers of the firm)	

Seal / Office	ial	Stamp	of	the	Firm
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17.	Submission of copies of certificates in respect of your field of operation issued by the appropriate authority/organization. (Such as Electrical Contractors - valid BEST License copy Architects- Registration with Council of Architecture etc.)	
18.	PAN Number (Please enclose copy of PAN Card)	
19.	GST Registration No. (please enclosed copy of relevant document).	
20.	Name, address and telephone number of your principal banker (please enclose relevant document)	
21.	Details of registration with any other Government Authority (s), if any (attach relevant documents)	
22.	Attach Company Profile	
23.	Details of workforce	Category (You can choose
24.	Type of Work and Category Opted for (choose from Annexure II) (ONLY ONE TYPE in one form) Type of Work	more than 1 category of 1 Type of Work) (Separate form to be filled for each category)
	the three bound to bloom in incuffic	siont, you may attach senarate

Note: In case the space provided in the above table is insufficient, you may attach separate sheets mentioning the serial number of the particular item.
I/We_request The New India Assurance Co. Ltd. to consider inclusion of my/our name in the list of their empanelled vendors and agree to work to the best of their satisfaction in the event of their including my/our name in the panel.

Seal / Official Stamp of the Firm

ANNEXURE II

TYPE OF WORK AND CATEGORIES

S.NO.	Type of Work	Category (Contract Value)
1.	Architectural Work / Interior Designers	Upto Rs.5,00,000/- More than Rs.5,00,000/- up to Rs.15,00,000/-

ANNEXURE III (to be filled by all applicants)

DECLARATION

I/we agree to notify the officer accepting this application and registering my/our names on list of contractors of The New India Assurance Co. Ltd., of any changes in the foregoing particulars as and when they occur and to verity and confirm these annually on 1st January.

I/we understand and agree that the appropriate authority at The New India Assurance Co. Ltd. has the right as he may decide, not to issue tender form in any particular case and also to suspend, remove or blacklist my/our name from The New India Assurance Co. Ltd. list or vendors in the event of my/our furnishing false particulars in the enrolment form or Submitting non-bona fide tenders or for technical or other delinquency in regard to which the decision of appropriate New India Assurance Co. Ltd. shall be final and conclusive.

I/We certify that the particulars furnished in the enrolment forms are correct and that should it be found that I/We have given a false certificate or that if /We fail to notify the fact of my/our subsequent amalgamation with another contractor or firm, The New India Assurance Co. Ltd. may remove my/our name from the list of vendors and any contract that I/We may be holding at the time may be rescinded.

PLACE:

DATE:

AUTHORISED SIGNATORY (WITH STAMP)

ANNEXURE IV (for Serial number 13)

S.No.	Financial Year	Total Turnover (Rs.)	Copy of I.T Return enclosed Yes/No	Remarks
1.	2020-21			
2.	2021-22			
3.	2022-23			

I hereby declare that I have read and understood all the terms and conditions and I accept the same as well.

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ANNEXURE V (for Serial number 14)

A) Government Organisations

S.No.	Name of the Organisation and Contact Person	Landline and Mobile Number	Brief Description of Job Executed	Value of Contract (Rs.)	Year of Job Execution

B) Private Organisations

S.No.	Name of the Organisation and Contact Person	Landline and Mobile Number	Brief Description of Job Executed	Value of Contract (Rs.)	Year of Job Execution

I hereby declare that I have read and understood all the terms and conditions and I acc	ept
the same as well.	

Seal/Official Stamp of the Firm

ANNEXURE VI (for Serial number 15)

A) Government Organisations

S.No.	Name of the Organisation and Contact Person	Landline and Mobile Number	Brief Description of Job Executed	Value of Contract (Rs.)	Year of Job Execution

A) Private Organisations

S.No.	Name of the Organisation and Contact Person	Landline and Mobile Number	Brief Description of Job Executed	Value of Contract (Rs.)	Year of Job Execution

I hereby declare that I have read and understood all the terms and conditions and I accept the same as well.

Seal / Official Stamp of the Firm