**EMPANELMENT FORM FOR ORGANISATION**

1. **About the Organisation**

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| --- | --- | --- |
| 1 | Name of Organisation:  |  |
| 2 | Mailing address of Organisation:  |  |
| 3 | Contact details of Organisation: |  |
| 4 | Email Address of Organisation: |  |
| 5 | Location of offices in India/ Abroad |  |
| 6 | Constitution of Organisation:**(Attach Certificate of Incorporation MOA)** |  |
| 7 | Year of Registration:  |  |
| 8 | Year of Completion of Business: (Since when) (If any break in operations in past period, please specify) |  |
| 9 | PAN No of Organisation: |  |
| 10 | GST No of Organisation: |  |
| 11 | Whether organisation is blacklisted by any state / centre / PSU / PSE / Any Government / Private Organisation: If yes, please provide details |  |

1. **About Authorised Signatory** (Authorised Signatory shall have authority of sign this application)

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| --- | --- | --- |
| 1 | Name Authorised Signatory: |  |
| 2 | Designation of authorised signatory |  |
| 3 | Contact Details of Authorised Signatory:  |  |
| 4 | Email of Authorised Signatory: |  |

1. **Financial Details of Organisation**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **#** | **Details (In Lakh)** | **2016-17** | **2017-18** | **2018-19** | **2020-19** | **2020-21** |
| 1 | Paid-up Capital  |  |  |  |  |  |
| 2 | Net-Worth  |  |  |  |  |  |
| 3 | Income / Revenue  |  |  |  |  |  |
| 4 | PAT |  |  |  |  |  |
| 5 | Borrowing |  |  |  |  |  |
| 6 | Debt |  |  |  |  |  |
| 7 | Debt Equity ratio  |  |  |  |  |  |

*(Note: - Copies of Balance Sheet, ITR to be attached)*

1. **About Activities of Organisation**

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| --- | --- |
| # | Details |
| 1 | Present activity of organisation (In brief): **(Company profile to be attached)** |
|  |  |
| 2 | Name of key personnel who are engaged of execute the present business activities in organisation: **(Bio data to be attached)** |
|  |  |

1. **About the business assignments executed in past three years:**

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| --- | --- | --- | --- | --- | --- |
| # | Assignment Name with location | Approx. Value of Contract & Duration  | Name of Client  | Start Date / Completion Date | Description of Organisation  |
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*Copies of orders/ completion certificates for the details given above shall be attached.*

1. **Proposed for Empanelment** (Specify areas for which empanelment sought)

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| --- | --- | --- | --- |
| # | Area(s) | Indicate the strength of your organisation for working together with NITCON Ltd to serve society/ clients/ offices: | Preferred locations for working together, if any, specify  |
| 1 | Consultancy / Advisory Services |  |  |
| 2 | Energy Auditing & Management |  |  |
| 3 | Skill/Entrepreneurship Development |  | *Share the list of centres as per format attached* |
| 4 | IT solutions |  |  |
| 5 | Health Services |  |  |
| 6 | Project Monitoring Services |  |  |
| 7 | Financial Services |  |  |
| 8 | Valuation Services |  |  |
| 9 | Technical services |  |  |
| 10 | Public Financial Management |  |  |
| 11 | Water Audit & Management  |  |  |
| 12 | Social Audit services |  |  |
| 13 | Vocational training in schools |  |  |
| 14 | Digitisation of records |  |  |
| 15 | Infrastructure development |  |  |
| 16 | Other areas |  |  |

We agree that

1. the above details are true & correct and any incorrect information found may lead of cancelation of our application of empanelment. Also [NITCON Limited](https://www.google.com/search?q=NITCON+Limited.&spell=1&sa=X&ved=2ahUKEwjn-JWehLfxAhWWYysKHfKIBfYQkeECKAB6BAgBEDI) have right to ask for more details, if required, at any time.
2. empanelment shall be it the discretion of NITCON Limited & has a right to reject / put on hold, our application without assigning any reason and does not guarantee award of assignment by NITCON Ltd.
3. understood that NITCON Limited receive full right to cancel the empanelment at any time, with the issue of termination letter of empanelment.
4. we shall abide by all the terms & conditions related to empanelment and shall maintain secrecy of the documents exchanged between our organisation while working together.
5. Agree to pay Rs. 10000 (Ten thousand) plus GST @18% after the receipt of confirmation of in principle acceptance of our empanelment.

 Signature

 Name

 Date

Enclosure: Self attested documents as requested above

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| **For Skill development only** |
| Name of centre | Complete address of centre | State in which centre placed | Type of centre (Self owned/ franchise) | If franchise, confirm the formal agreement signed with franchise by Business Associate (Yes/ No) | Is the centre had installed CCTV cameras to remote assess through mobile/ laptop | Is infrastructure as per common norms (Yes/ No) | Is the centre accredited with SSC/MSDE (Yes/ No) | Is the trainers in the centre to execute training as per NSQF (Yes/ No) | Details of agencies for which the training imparted in past by the centre | Job roles those can be taken up in centres | Batch size of each job role (based on infrastructure available) (In Nos.) |
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| c. |   |
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