

# Garden Reach Shipbuilders & Engineers Ltd. गार्डन रीच शिपबिल्डर्स एण्ड इंजीनियर्स लिमिटेड

(A Government of India undertaking, Under Ministry of Defence) 43/46, Garden Reach Road, Kolkata–700024

# APPLICATION FOR REGISTRATION OF VENDOR (THIS INFORMATION WILL BE TREATED AS CONFIDENTIAL)

### <u>PART – I: ADMINISTRATIVE INFORMATION</u>

1. Name of the firm/vendor:	
2. (a) Address of registered office (F	•
	PIN
Phone	e-mailID
Fax	STD code
Contact person details & Mob. No.	
(b) Communication address:	
	PIN
Phone	e-mail ID
Fax	STD Code
Contact person details & Mob. No	
(c) Address of factory / local branc	ch / stockiest (if any):
	PIN
Phone	e-mailID
Fax	STD Code
Contact person details & Mob. No	
3. Date of incorporation:	
4. Category of industry:	(Attach relevant registration documents)
a) Large scale	
b) Medium scale	
c) Small scale	



5.	Nature o	of company:				
	(a)	Proprietary				
	(b)	Private limited				
	(c)	P.S.U.				
	(d)	Public limited or ex-serviceman unit.				
	(e)	Partnership.				
NO	TE: (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)	Addresses, name, telephone no with partnership deeds (if partnership firm) of partners in				
		extra sheets as Annexure				
6.	Nature	of business: (Submit supporting documents).				
	(a)	Manufacturing				
	(b)	Agency (Trader / Dealer)				
	(c)	Service				
	Specify	items of Manufacture/Agency/Service for which registration sought:				
7.	Details	of current products and services				
	(Attach	details and literature):				
8.	Details	of registration with: (Attach relevant copies of registration letters)				
	(a) NSI	C/SSI.				
		ME Part – II / MSME Udyog Aadhar.				
	` '	ME Women Enterprise.				
		ME SC/ST.				
	(e) DGS					
		er Defence Dept.				
	<ul><li>(g) Other Govt. Dept.</li><li>(h) Membership of FICCI/ASSOCHAM/CCI / AIMO and/or</li></ul>					
		-				
	Othe	er Industrial Associations.				
9.	Have you	already applied for registration to any other shipyard?				
10.	If yes, a	lso give the following details:				
	(a) A	Authority to whom applied				
	(b) ]	Date				



- (c) Item applied for
- (d) Result of application with details viz registration no. if registered and reasons if not registered

11.	Have you go	ot ISO 9001/2000 c	ertificate: _					
12.		NV – Classified So	ciety Regis	tration Certificat	e ( if yes a	ttach valid	Regn. Certif	ricate)
13.	Total area of	f factory / busines	s premises	( with plant lay	out)			
Cove	red	Uncovered	Bono	led space availab	<u>ole</u>	No. of Ro	<u>ooms</u>	
14.	Is the above	e said Factory:						
	(a) Comp	any owned.						
	(b) Partne	ership.						
	(c) Rental	1.						
	(d) Leased	<b>1</b> .						
areas rente	e.g. product d/leased attac	oof of ownership a ion area, stores, h lease deed and ro the owner (name,	bond roon ecent rent r	ns, inspection a eceipt (within 3	area etc. I months) a	n case fa	ctory prem	ises are
15.	Capital out la	y	:					
16.	Name of banke	ers & A/C No:						
17. <i>A</i>	Address of the	Bankers:					<del>-</del> -	
PIN_		, Phone		, Email-ID		,	_	
STD	Code	, ]	Fax		_			
Conta	ct person & m	ob. No.						

- 18. Electric power sanctioned:
  - a) Installed
  - b) Standby (if any)





19.	Does your prod	duct under verification	on fall under	·· <u> </u>				
	(a) Cost audit. (Report) Rules 1968							
	(b) Fire safety or explosive regulations.							
	(Give details o	flicense/complian	ce)					
20.	Details of manpower employed on date on firm's pay roll:							
	(a) Permanent							
	Category	Post held	Number	Qualification	Total	Service		
	Technical	Prod. Manager						
		Q.C. Manager						
		Supervisor						
		Testing staff (QC)						
		Workers (skilled)						
		Workers (unskille	ed)					
	Admin	Purchase Manage	er					
		Accounts Officer						
		Office Superinde	nt					
		Clerical						
	(b) Temporary	,						
	Category	Post held	Number	Qualification	Total	Service		
	Technical	Prod. Manager						
		Q.C. Manager						
		Supervisor						
		Testing staff (QC)						
		Workers (skilled)						
		Workers (unskille	ed)					
	Admin	Purchase Manage	er					
		Accounts Officer						
		Office Superinde	nt					
		Clerical						
		Others						



#### 21. Attach copies of documents for:

- (A) GST Registration No of different states (if registered at more than one state) or same state (if multiple registration no obtained in same state). Enclose a copy of the above Registration Certificate. Also fill-up attached format of "Additional Information for Registration of vendors under GST".
- (B) PAN no
- (C) Date of incorporation document of the firm.
- (D) Valid Trade License.
- (E) Valid factory license.
- (F) Valid labour license.
- (G) Valid Dealership / Authorized Dealership Certificate.
- (H) Pollution control board certificate
- (I) PF and ESI registration certificate and copy of latest challan
- (J) Details of orders received in last 3 years for items under consideration
- (K) Performance report for executed order, for which registration sought
- (L) Income tax returns for the last three assessment years
- (M) Audited balance sheets and profit & loss A/C for last three financial years and total accumulated losses if any
- (N) Solvency certificate from your bank
- (O) Service tax registration certificate and copy of latest challan (For the items not under purview of GST rule)
- (P) Valid state, central sales tax registration certificate and copy of latest challans (For the items not under purview of GST rule)
- (Q) Relevant information with complete details about sister concerns / subsidiaries, if any
- (R) Have you faced blacklisting/tender holidays by any PSU in last 5 years? If yes, please give details
- (S) Details in facilities for water, fire fighting, security & medical at your office/factory premises



### PART -II: TECHNICAL INFORMATION

1. Detai	ils of current products:			
Sl no. T	Гуре description Lice	nced/installed A	nnual prod	uction capacity for preceding 3 yrs
2. D	Details of foreign collabo	oration:		
Sl No.	Product nar	ne & address		Year of collaboration (Current or not)
3.	Details of stores / equ	ipment for which	registration	is sought
Sl. No.	Nomenclature of Stor	res/Eqpt.	Org. No.	Related specifications
	Details of bought out it etors : (attach copies of			ly/assembly/processes ) from sub-
Sl No.	Main Eqpt. D	etails of test	Name	& address of sub-contractor
(b) applica		ity control done by	sub-contra	ctors (attach copies of agreements where
Sl No.	Main Test Equipment	Detail of agree	ment Name	e & address of sub-contractor/Lab



5. Source of raw material:

Sl	Imported/ b	rief description	Estimate	d %FE content
No.	Indigenous		CIF value	e. in final product
			0	6.11 6 6
6.	•	•		re as per following format for:
		city, installed capaci		fixtures etc. and also details on
	neeneed capac	it, instance capaci	i, a neence ne	, and date )
	(b) Unconventiona	al, special M/c, CAD	/CAM, ROBO	etc.
S1.	Description of	Make and	Date of	Approximate percentage of
No	Machine & Model	quantity	purchase	cost depreciation per year
	(c) Tool room, me	eteorology & test equ	ipment & facili	ties:
S1.	Types of Inst.,	Make, Model, Qty.	Date of purc	chase Frequency of calibration
No.	Gauges, test eqpt (*)		_	

- (\*) attach relevant calibration certificate.
- 7. Is the firm willing to supply spares for 7 years from date of last supply:
- 8. Furnish the following details with relevant certificates and documents:
  - (a) R & D facilities available.
  - (b) Inspection & quality control of raw material, components and finished products.
  - (c) Assistance from central agency for testing/calibration etc.
  - (d) Laboratory and drawing office facility.
  - (e) Flow process chart of item for which registration sought.
  - (f) Basis of estimated production of products for which registration is sought.



Sl. No.	Name &	PO No. &	Date of	Products	Value (Rs)
	Address	date	Last supply	supplied	

10. Future plan if any in respect of expansion programme: (attach extra sheets) Installation of additional machines/test facilities etc.

**Note**: Kindly put number or codify the extra sheets & Annexure attached according to serial number and link it properly.

### 11. <u>Declaration</u>

Place:

I/we hereby declare that all information/data furnished in the application form and attached annexures and other documental proofs as required for my/our enlistment with GRSE Ltd. are true and correct. If any information is found to be incorrect/false at any stage, I/we shall be liable for any action as deemed fit by GRSE Ltd. including removal/banning of my/our firm.

WITNESS WITH ADDRESS	SIGNATURE(S) WITH SEAL OF
	COMPETENT AUTHORITY OF VENDOR
Dota	

0.1.0



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# ADDITIONAL INFORMATION FOR REGISTRATION OF VENDORS UNDER GST (THIS INFORMATION WILL BE TREATED AS CONFIDENTIAL)

1.	Na	ame of the concerned Tax Officer :	
2.	Co	oncerned Tax Officer Designation :	
	a)	Mob. No.:	<u> </u>
	b)	Phone :	<u> </u>
	c)	E-mail ID :	
	d)	Fax :	<u> </u>
3.	G:	ST Registration No (State Wise if register	red in more than one state)
En	ıclosu	ure: Copy of the Provisional Registration	Certificate under the GST must be attached
De	eclar	ration :	
Lto	ache d. are	ed annexures and other documental proo e true and correct. If any information is fo	on/data furnished in the application form and fs as required for my/our enlistment with GRSE bund to be incorrect/false at any stage, I/we shall td. including removal/banning of my/our firm.
W	ITNE	ESS WITH ADDRESS	SIGNATURE(S) WITH SEAL OF COMPETENT AUTHORITY OF VENDOR
Da	ate	:	
Pla	ace :		