



राष्ट्रीय डिज़ाइन संस्थान  
NATIONAL INSTITUTE OF DESIGN

A Statutory Institute under DPIIT, Ministry of Commerce & Industry, Government of India  
Paldi, Ahmedabad 380007. Tel: +91-79-26629500, +91-79-26629600  
www.nid.edu

---

NIT No. NID/07/ 2022-23

Dated 03.08.2022

## Tender Document

**Tender for “Providing & Installation of proposed sound room at 1st Floor at NID Ahmedabad”**

### **Part-1: Technical Bid**

(To be submitted separately)

Tender Submitted By:

---

---

---

---

## **INDEX (Technical Bid)**

---

1	Form-1: General Information	Page 3
2	Form-2: GST Registration Detail	Page 4
3	Form-3: Authorized Company Registration	Page 5
4	Form-4A: Manpower Details	Page 6
5	Form-4B: Workshop & Equipment Details	Page 7
6	Form-5: List of similar works completed	Page 8-10
7	Form-6: List of similar works under progress	Page 11-13
8	Form-7A: Financial Turnover details	Page 14

---

---

---

---

---

---

---

---

---

---

---

# Form-1

## General Information

---

1	Name of Tenderer	
---	------------------	--

---

2	Detailed Address for Correspondence	_____
		_____
		_____
		_____

---

3	Email ID for Correspondence	
---	-----------------------------	--

---

4	Telephone Number	
---	------------------	--

---

5	Authorized Contact Person	_____
	Designation	_____
	Mobile Number	_____

---

6	Company Organization (tick one) (Submit certified copy of partnership deed, Articles of Association, Detailed list of partners, directors, etc. as applicable)	<ul style="list-style-type: none"><li>• Individual</li><li>• Proprietorship Firm</li><li>• Partnership Firm</li><li>• Private Limited Company</li><li>• Public Limited Company</li></ul>
---	---	--

---

7	Bank Information	
	<ul style="list-style-type: none"><li>• Name of Bank</li><li>• Name of Branch</li><li>• Address of Branch</li><li>• City &amp; Pin-code of Branch</li><li>• IFSC Code</li><li>• MICR</li><li>• Category of Account</li></ul>	_____ _____ _____ _____ _____ _____ _____

---

\_\_\_\_\_  
**Signature of the Tenderer (with stamp).**

Place: \_\_\_\_\_  
Date: \_\_\_\_\_

**Form-2**  
**GST Registration Detail**  
(Attach Copy GST Registration Certificate)

---

<b>1</b>	GST Registration Number
----------	-------------------------

---

<b>2</b>	Legal Name as per GST
----------	-----------------------

---

<b>3</b>	Trade Name as per GST
----------	-----------------------

---

<b>4</b>	Address	_____
		_____
		_____
		_____

---

<b>5</b>	State
----------	-------

---

<b>6</b>	PAN (Permanent Account Number)
----------	--------------------------------

---

<b>7</b>	Constitution of Business (as per GST)
----------	---------------------------------------

---

<b>8</b>	Period of Validity
----------	--------------------

---

---

**Signature of the Tenderer (with stamp).**

Place: \_\_\_\_\_  
Date: \_\_\_\_\_

**Form-3**

**Eligibility Criteria: Authorized Company Registration**  
(Attach Copy Authorization Certificate issued by Company)

---

<b>1</b>	Name of Company	
----------	-----------------	--

---

<b>2</b>	Company Authorization	
----------	-----------------------	--

---

<b>3</b>	Association with Company for	Since _____ / _____ Years
----------	------------------------------	---------------------------

---

<b>4</b>	Address of Company's Registered Office (for company)	_____ _____ _____ _____
----------	---	----------------------------------

---

<b>5</b>	Authorization Validity	Till ____ dd / ____ mm / ____ yyyy
----------	------------------------	------------------------------------

---

---

**Signature of the Tenderer (with stamp).**

Place: \_\_\_\_\_  
Date: \_\_\_\_\_

**Form-4 (A)**  
**Eligibility Criteria: Manpower Infrastructure**  
 (Attach more sheets if required)

No	Name	Designation	Qualification	Total experience (Years)	Working with this company since (Years)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

# Form-4 (B)

## Eligibility Criteria: Workshop & Equipment Infrastructure

(Attach more sheets if required)

1 Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

No	Name of Equipment	Quantity	Owned or Leased	Age of Equipment	Remarks
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

\_\_\_\_\_  
 Signature of the Tenderer (with stamp).

Place: \_\_\_\_\_  
 Date: \_\_\_\_\_

## Form-5 (A)

### Eligibility Criteria: List of Similar Works Completed in last 5 years (Attach more sheets if required)

---

1	Name of Project	
---	-----------------	--

---

2	Brief description of Project	
---	------------------------------	--

---

3	Address	_____ _____ _____ _____
---	---------	----------------------------------

---

4	Authorized Contact Person Designation Mobile Number	_____ _____ _____
---	---	-------------------------

---

5	Work Order Amount	
---	-------------------	--

---

6	Completion Date (Stipulated)	
---	------------------------------	--

---

7	Completion Date (Actual)	
---	--------------------------	--

---

8	Copy of Work Order enclosed	Yes / No
---	-----------------------------	----------

---

9	Completion Certificate Enclosed	Yes / No
---	---------------------------------	----------

---

10	TDS Certificates Enclosed	Yes / No
----	---------------------------	----------

---

\_\_\_\_\_  
**Signature of the Tenderer (with stamp).**

Place: \_\_\_\_\_  
Date: \_\_\_\_\_



**Form-5 (B)**

**Eligibility Criteria: List of Similar Works Completed in last 5 years**  
(Attach more sheets if required)

---

<b>1</b>	Name of Project	
<hr/>		
<b>2</b>	Brief description of Project	
<hr/>		
<b>3</b>	Address	<hr/> <hr/> <hr/> <hr/>
<hr/>		
<b>4</b>	Authorized Contact Person Designation Mobile Number	<hr/> <hr/> <hr/>
<hr/>		
<b>5</b>	Work Order Amount	
<hr/>		
<b>6</b>	Completion Date (Stipulated)	
<hr/>		
<b>7</b>	Completion Date (Actual)	
<hr/>		
<b>8</b>	Copy of Work Order enclosed	Yes / No
<hr/>		
<b>9</b>	Completion Certificate Enclosed	Yes / No
<hr/>		
<b>10</b>	TDS Certificates Enclosed	Yes / No

---

\_\_\_\_\_  
**Signature of the Tenderer (with stamp).**

Place: \_\_\_\_\_  
Date: \_\_\_\_\_

**Form-5 (C)**

**Eligibility Criteria: List of Similar Works Completed in last 5 years**  
(Attach more sheets if required)

---

<b>1</b>	Name of Project	
----------	-----------------	--

---

<b>2</b>	Brief description of Project	
----------	------------------------------	--

---

<b>3</b>	Address	_____ _____ _____ _____
----------	---------	----------------------------------

---

<b>4</b>	Authorized Contact Person Designation Mobile Number	_____ _____ _____
----------	---	-------------------------

---

<b>5</b>	Work Order Amount	
----------	-------------------	--

---

<b>6</b>	Completion Date (Stipulated)	
----------	------------------------------	--

---

<b>7</b>	Completion Date (Actual)	
----------	--------------------------	--

---

<b>8</b>	Copy of Work Order enclosed	Yes / No
----------	-----------------------------	----------

---

<b>9</b>	Completion Certificate Enclosed	Yes / No
----------	---------------------------------	----------

---

<b>10</b>	TDS Certificates Enclosed	Yes / No
-----------	---------------------------	----------

---

\_\_\_\_\_  
**Signature of the Tenderer (with stamp).**

Place: \_\_\_\_\_  
Date: \_\_\_\_\_

**Form-6 (A)**  
**Eligibility Criteria: List of Similar Works Under Progress**  
(Attach more sheets if required)

---

<b>1</b>	Name of Project	
----------	-----------------	--

---

<b>2</b>	Brief description of Project	
----------	------------------------------	--

---

<b>3</b>	Address	_____ _____ _____ _____
----------	---------	----------------------------------

---

<b>4</b>	Authorized Contact Person Designation Mobile Number	_____ _____ _____
----------	---	-------------------------

---

<b>5</b>	Work Order Amount	
----------	-------------------	--

---

<b>6</b>	Completion Date (Stipulated)	
----------	------------------------------	--

---

<b>7</b>	Current status of work	
----------	------------------------	--

---

<b>8</b>	Copy of Work Order enclosed	Yes / No
----------	-----------------------------	----------

---

\_\_\_\_\_  
**Signature of the Tenderer (with stamp).**

Place: \_\_\_\_\_  
Date: \_\_\_\_\_

**Form-6 (B)**  
**Eligibility Criteria: List of Similar Works Under Progress**  
(Attach more sheets if required)

---

<b>1</b>	Name of Project	
----------	-----------------	--

---

<b>2</b>	Brief description of Project	
----------	------------------------------	--

---

<b>3</b>	Address	_____ _____ _____ _____
----------	---------	----------------------------------

---

<b>4</b>	Authorized Contact Person Designation Mobile Number	_____ _____ _____
----------	---	-------------------------

---

<b>5</b>	Work Order Amount	
----------	-------------------	--

---

<b>6</b>	Completion Date (Stipulated)	
----------	------------------------------	--

---

<b>7</b>	Current status of work	
----------	------------------------	--

---

---

**Signature of the Tenderer (with stamp).**

Place: \_\_\_\_\_  
Date: \_\_\_\_\_

**Form-6 (C)**  
**Eligibility Criteria: List of Similar Works Under Progress**  
(Attach more sheets if required)

---

<b>1</b>	Name of Project	
----------	-----------------	--

---

<b>2</b>	Brief description of Project including HP / tonnage of HVAC work	
----------	--	--

---

<b>3</b>	Address	_____ _____ _____ _____
----------	---------	----------------------------------

---

<b>4</b>	Authorized Contact Person Designation Mobile Number	_____ _____ _____
----------	---	-------------------------

---

<b>5</b>	Work Order Amount	
----------	-------------------	--

---

<b>6</b>	Completion Date (Stipulated)	
----------	------------------------------	--

---

<b>7</b>	Current status of work	
----------	------------------------	--

---

---

**Signature of the Tenderer (with stamp).**

Place: \_\_\_\_\_  
Date: \_\_\_\_\_

**Form-7 (A)****Eligibility Criteria: Financial Strength Information**

(At least past 3 years' data to be given, duly certified by CA)

No	Financial Year	Gross Turnover (Rs.)	Profit / Loss (Rs.)	Net worth on first day of F.Y. (Rs.)
1	2020-2021			
2	2019-2020			
3	2018-2019			

---

**Signature of the Tenderer (with stamp).**

Place: \_\_\_\_\_  
Date: \_\_\_\_\_

---

**Signature of CA (with stamp & Registration Number).**

Place: \_\_\_\_\_  
Date: \_\_\_\_\_