



राष्ट्रीय डिज़ाइन संस्थान  
NATIONAL INSTITUTE OF DESIGN

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NIT No. 09 / 2024-25  
Dated 21.01.2025

## Tender Document

Comprehensive Annual Maintenance Contract for Three years of Window and Split Air Conditioners at NID Bengaluru Campus ” including all material, labour, equipment, etc. required for various areas in Campus.

### Part-1: Technical Bid

(To be submitted separately)

Tender Submitted By:

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# Form-1

## General Information

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1	Name of Tenderer	
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2	Detailed Address for Correspondence	_____
		_____
		_____
		_____

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3	Email ID for Correspondence	
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4	Telephone Number	
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5	Authorized Contact Person	_____
	Designation	_____
	Mobile Number	_____

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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>
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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>	_____ _____ _____ _____ _____ _____

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

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

**Form-2  
GST Registration Detail**

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<b>1</b>	GST Registration Number
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<b>2</b>	Legal Name as per GST
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<b>3</b>	Trade Name as per GST
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<b>4</b>	Address	_____
		_____
		_____
		_____

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<b>5</b>	State
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<b>6</b>	PAN (Permanent Account Number)
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<b>7</b>	Constitution of Business (as per GST)
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<b>8</b>	Period of Validity
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**Signature of the Tenderer (with stamp).**

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

### Form-3

#### Eligibility Criteria: Authorized Company Registration

(Attach Copy Authorization Certificate issued by Company whose brand is being quoted valid upto the proposed date of completion of the Works)

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1	Name of Company / Brand being quoted	
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2	Company Authorization	<ul style="list-style-type: none"><li>• Manufacturer</li><li>• Authorised Distributor</li><li>• Authorized Dealer</li><li>• Authorized Installer</li><li>• Any Other _____</li></ul>
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3	Association with Company for	Since _____ / _____ Years
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4	Address of Company's Registered Office (for company / brand being quoted)	_____ _____ _____ _____
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5	Authorization Validity	Till ____ dd / ____ mm / ____ yyyy
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**Signature of the Tenderer (with stamp).**

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

## Form-5

### 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 including HP / tonnage of HVAC work	
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-6 : List of Similar Works Under Progress**

(Attach more sheets if required)

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<b>1</b>	Name of Project	
<hr/>		
<b>2</b>	Brief description of Project including HP / tonnage of HVAC work	
<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>	Current status of work	
<hr/>		
<b>8</b>	Copy of Work Order enclosed	Yes / No

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

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

**Form-7****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	2023-2024			
2	2022-2023			
3	2021-2022			

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

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**Signature of CA**

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

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