|  |
| --- |
| **Embassy of India**  **Kathmandu**  **NOTICE FOR EMPANELMENT OF FIRMS/CONTRACTORS**  1. Embassy of India, Defence Wing, Welfare Branch, Kathmandu wishes to empanel reputed and reliable firms/contractors to meet the requirement for execution of the repair/maint/renovation/upgradation/construction/demolition of the buildings and major electrical works at various District Soldier Boards (DSBs) and Bharatiya Gorkha Sainik Niwas (BGSN), Thamel for the financial years 2018-19 & 2019-20.  2. The interested firms/contractors may get their firms empanelled with Welfare Branch, Defence Wing, Embassy of India, Kathmandu. Interested firms/contractors are requested to contact Welfare Branch, Defence Wing, Embassy of India, Kathmandu during office hours (10 AM to 5 PM) from 14 May 2018 onwards for obtaining detailed scope of works. Further information is available on website [www.indianembassy.org.np](http://www.indianembassy.org.np) or contact on 01-4418064, 01-4412597.  3. The last date for submission of proposal is 12 Jun 2018 at 1200 hrs.  4. The Embassy of India reserves the right to reject/cancel any or all proformas without assigning any reason.  Asst Military Attaché (Welfare)  Embassy of India  Kathmandu, Nepal |

**PROFORMA FOR EMPANELMENT OF FIRMS/CONTRACTORS WITH**

**WELFARE BRANCH, INDIAN EMBASSY KATHMANDU FOR REPAIR/ MAINTENANCE/RENOVATION/UPGRADATION/CONSTRUCTION &**

**MAJOR ELECTRICAL WORKS AT VARIOUS DSBs AND BGSN**

**FOR THE FINANCIAL YEARS 2018-19 & 2019-20**

**Defence Wing, Welfare Branch, Embassy of India Kathmandu reserves the right to reject incomplete and in-correctly filled application forms. Any unsubstantiated claims/certificates would also result in disqualification of the application. Defence Wing, Welfare Branch, Embassy of India Kathmandu reserves the right to cancel the registration of any Firms/Contractors, if in his opinion, the Firm has not adhered to the terms and conditions relating to such registration. Any false declaration by firm to Defence Wing, Welfare Branch, Embassy of India Kathmandu will lead to cancellation of their registration.**

**PART 1 – GENERAL DETAILS**

**1. Firm/Company Name :**

**2. Head Office complete address :**

**(a) Functional Fax Number :**

**(b) Organisational Fax Number :**

**(c) Organisational E-mail ID :**

**(d) Organisational Web site :**

**3. Registered Office complete address :**

**(a) Functional/EPABX Number :**

**(b) Organisational Fax Number :**

**(c) Organisational E-mail ID :**

**(d) Organisational Web site :**

**4. National Association membership details :**

**5. Direct contact of the head of the organization :**

**(a) Name, Chairman/MD/President :**

**(b) Direct contact Number :**

**(c) Mobile Number :**

**(d) Personal E-mail-id :**

**6. Name Designation and address of the executive :**

**authority who would deal with Welfare Branch on behalf**

**of the firm/company**

**7. Whether empanelled with any other organizations :**

**-2-**

|  |  |  |
| --- | --- | --- |
| **Name of Company** |  | **Initials** |

**(Indicate Y/N)**

**PART – II AREAS OF OPERATION**

**Area(s) of Operation (Tick as applicable):-**

**1. Construction of physical infrastructure.**

**2. Renovation of buildings.**

**3. Repair/maintenance works**

**4. Others**

**(a) System Study and Consultancy.**

**(i) Have domain expertise about construction/repair/maint. Give Details**

**(ii) Have design/development/consultancy team, in Nepal. Give address.**

1. **Have executed similar project(s) in the past. Give details**

**of three largest projects with cost.**

1. **Be able to conform to nationally acceptable**
2. **Be able to confirm to nationality acceptable documentation standards.**

**Give details.**

**-3-**

|  |  |  |
| --- | --- | --- |
| **Name of Company** |  | **Initials** |

**(Indicate Y/N)**

**(v) Willing to execute a confidentiality agreement**

**(vi) Willing to conduct trails in remote areas if required**

1. **Be willing to demonstrate proof of concept on ‘No Cost**

**No Commitment’ basis.**

**(viii) Do you have adequate training infrastructure in terms of**

**construction/repair/maint etc.**

**(ix) Indicate total number of branches running in Nepal**

**(x) Do you have adequate qualified staff**

**for execution of works.**

**(xi) Are you willing to enter into a long term MOU with the Welfare Branch.**

**(xii) Are you ISO certified**

**(xiii) Any other quality certification (s).**

**(xiv) Are you willing to send “Resident/Site Engineer” to remote**

**locations.**

**(xv) Have a proper network of call and support escalation**

**Mechanism in place.**

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|  |  |  |
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| **Name of Company** |  | **Initials** |

**(Indicate Y/N)**

**PART-III : BACKGROUND, CREDIBILITY AND PERFORMANCE**

**1. Financial**

**(a) Turnover during last three financial years.**

**(b) Income Tax Paid during.**

**2. Branches Across the Country.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Region** | **City/Town** | **Type of Office**  **Branch/Regional/Area/Channel**  **Partners/ASPs/Franchisee**  **(indicate address & tele No)** | **No of Employees** |
| **Eastern Development Region (Dharan area).** |  |  |  |
| **Central Development Region (Kathmandu area)** |  |  |  |
| **Western Development Region (Pokhara area).** |  |  |  |

**-5-**

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| --- | --- | --- |
| **Name of Company** |  | **Initials** |

**(Indicate Y/N)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Mid Western Development Region (Surkhet area).** |  |  |  |
| **Far Western Development Region (Dipayal area).** |  |  |  |

**3. Major projects Executed in the last Five Years.**

(a) **Projects Implemented for Govt (indicate Organisation for whom project executed, year cost & whether implemented or under implementation. State five largest projects).**

**(i)**

**(ii)**

**(iii)**

**(iv)**

**(v)**

**-6-**

|  |  |  |
| --- | --- | --- |
| **Name of Company** |  | **Initials** |

**(Indicate Y/N)**

**4. Skill Sets.**

**(i) Total workforce -**

**(ii) Technical -**

**(iii) Management -**

**(iv) Semi Skilled -**

**(v) BE/B Tech -**

**(vi) MCA/MCM etc -**

**5. Infrastructure.**

**(a) Development Centre Location**

1. **Size, Number of Work Station, Type at each**

**(i)**

**(ii)**

**(iii)**

**6. Litigation.**

**(a) Is the company involved in any kind of litigation dispute**

**Y/N**

**or arbitration on works related issues.**

**(b) If yes, then indicate details as follows :**

**Y/N**

**(i) With Govt**

**(ii) With Govt Deptt/State Govt Depott**

**Y/N**

**(iii) With Multinational Company**

**Y/N**

**(iv) With Private Companies**

**Y/N**

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|  |  |  |
| --- | --- | --- |
| **Name of Company** |  | **Initials** |

**(Indicate Y/N)**

**(c) Amount involved in litigation Rs**

**(d) Date since litigation is in progress**

**(e) Likely date of conclusion of the litigation**

**7. List of 10 or more clients in Nepal and abroad.**

**8. Any other information considered important for empanelment.**

**-8-**

|  |  |  |
| --- | --- | --- |
| **Name of Company** |  | **Initials** |

**(Indicate Y/N)**

**PART-IV : CONTACT DETAILS**

**1. Contact details Name :**

**Designation :**

**Telephone No :**

**Mobile No :**

**Fax No :**

**E-mail ID :**

**PAN No:**

**Sales Tax No & address :**

**VAT/PAV Registration :**

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name :**

**Company Seal Designation :**

**Date:**

**Note:- Please include attested photocopies of following documents:-**

|  |
| --- |
| **Y/N** |

**(a) Company registration certificate**

**(b) Last tax clearance certificate**

**Y/N**

**(c) Copies of last three years Annual Returns including audited**

**Y/N**

**profit and Loss account and Balance Sheet**

**Y/N**

**(d) Certified true copy of the Income Tax Department giving VAT/PAN**

**No to the firm. In case of partnership and limited concerns, VAT/PAN**

**No of each partner may be intimated. Where the proprietorship is an**

**Individual VAT/PAN No of sole proprietor should be given in this case.**

**(e) A copy of the Memorandum of Understanding (MoU) between**

**Y/N**

**The two registered firms (in case of joint venture).**

**(f) A copy of the Certificate of Incorporation along with the Articles**

**Y/N**

**of Association and Memorandum in case of limited company.**

**(g) A power of Attorney with a copy of the Resolution of Board of**

**Y/N**

**Directors (The Power of Attorney should authorize the constituted**

**attorney to sign for on behalf of the firm which would bind the firm to**

**all contractual obligations/disputes.**

**(h) Average Annual turnover of the company based on**

**Y/N**

**audited Annual balance Sheet and Profit & Loss Accounts**

**for last three years**

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|  |  |  |
| --- | --- | --- |
| **Name of Company** |  | **Initials** |

**(Indicate Y/N)**

**(j) ISO Certification**

**Y/N**

**(k) Any other quality certification**

**Y/N**

**(l) A bank report from your Bank regarding financial standing**

**Y/N**

**of your firm. (Applicable in case of firms, which are not covered under**

**statutory auditing process).**

**Y/N**

**(m) VAT/PAN Registration Certificate**

**Y/N**

**(n) Tax Clearance Certificate as on Asar 2072 (BS)**

**Y/N**

**(o) Any other enclosures (give details)**

***Note:-***

1. ***Columns not applicable may be written as* NA.**
2. ***Clearly indicate Name of the project for which Empanel mode.***