**okfM;k fgeky; HkwfoKku laLFkku**

**WADIA INSTITUTE OF HIMALAYAN GEOLOGY**

¼Hkkjr ljdkj ds foKku ,oa izkS|kSfxdh foHkkx dk ,d Lok;Rr’kklh laLFkku½

(An Autonomous Institution of Deptt. of Science & Technology, Government of India)

33, General Mahadev Singh Road/ 33] th0,e0,l0 jksM+

Dehradun nsgjknwu (Uttarakhand) - 248 001 (INDIA)

# **Annexure I**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| **Manufacturer** |  |  **Authorized Dealer/Agent**  |  |  **Retailer**  |  | **Service Provider** |

**Form for Registration of Suppliers**

1. Name of the Company/Firm/Agency/Individual:
2. a) Head Office / Registered Office :

Telephone No. : Fax No. : Email : Web site (if any) Date of Establishment :

b) Branch Office in Dehradun, Uttarakhand (if any):

Telephone No. : Fax No. :

1. Name of Chief Executive / : Proprietor / Partners

Telephone No. : Fax No. : Email :

1. Name & Designation of contact person: Telephone No. : Fax No. : Email :
2. Contact Details for correspondence regarding enquiries /Purchase order /Purchase Follow-Ups from Institute:

Name & Designation of contact person: Telephone No. : Fax No. : Email :

1. Central Public Procurement Portal ID
2. Category of registration
3. Name of Items
4. Other details (please specifiy):

**10. Documents need to be provided.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Serial No.** | **Documents** | **Yes/ No** | **Number*****(i.e. GST No. /PAN Card No. etc.)*** |
| 1. | Copy of GST Registration Certificate**.** |  |  |
| 2. | Copy of PAN card. |  |  |
| 3. | Current dealership agreement from Principal/Manufactureralong with SSI/NSIC certificate **(If Applicable).** |  |  |
| 4. | Audited Statement of Accounts and Income Tax Return for thelast three financial years. |  |  |
| 5. | Affidavit/ undertaking of not being blacklisted by any Govt.Agency/ department. |  |  |
| 6. | List of clients presently being served (**IITS/ Research Institutes/public sector/private sector/others separately in the last three years)** with Contact name & address with mobile no. |  |  |
| 7. | Bank Details on letter head along with cancelled cheque. |  |  |

 **DECLARATION BY SUPPLIERS**

I confirm that

* 1. No employee or direct relation of any employee of WIHG, Dehradun is in way connected as Partner/Shareholder/Director/Advisor/Consultant/Employee etc. with the Company.
	2. The information furnished are correct to the best of my knowledge and belief.

(Signature of the Authorized Person (Suppliers) with Seal and Date)

Name (In Capital)

Place:

Date: