

BALMER LAWRIE & CO. LTD.

Logistics Services
40/8417A, Narkathara Road
Opp.Shenoys Junction
Cochin – 682 035

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NOTICE NO: BL/COK/VENDOR/17-18/45

DATE: 21/03/2018

Enquiry for

VENDOR REGISTRATION

DUE DATE & TIME: 20/04/2018 upto 4.00 PM

LS /COKVR/01 21.03.2018

APPLICATION FOR VENDOR REGISTRATION AT

LOGISTICS SERVICES - COCHIN

- 1. Applications are invited for registration of vendor at Logistics Division , Trivandrum for a period of Three years for supply of different type / categories of services as below.
- 2. Your filled application duly signed along with covering letter and super scribed as "APPLICATION FOR VENDOR REGISTRATION "should reach the office within the due date as prescribed in Tender.
- 3. If you are supplying /serving multiple service, please give separate application for each category.
- 4. The company reserves the right to accept / reject any application form without assigning any reasons whatsoever.

Branch Manager

ANNEXURE

| SI.No | Category | Description |
|-------|----------|---|
| 1 | BL/LS/01 | CHA SERVICES (FOR AIR AND SEA) |
| 2 | BL/LS/02 | Transport contractors for Local movement of materials within Kerala State in AUTO/CANTER/LCV/TEMPO/Truck / Trailer |
| 3 | BL/LS/03 | Transport contractors for movement of materials within the state/ Interstate in 20FT AND 40 FT TRAILORS, MULTI AXLE TRAILORS, LOW BED TRAILORS, etc., |
| 4 | BL/LS/04 | Transport contractors Interstate movement of LCV Tempo / Canter / Standard Truck / Trailors |
| 5 | BL/LS/05 | Transport Contractors for state/ Interstate movement of |
| 6 | BL/LS/06 | Freight Forwarders for Export of Cargo from Trivandrum Airport To Various destinations in India/abroad |
| 7 | BL/LS/07 | Courier service providers for domestic movement (letters/parcels) |

Note: If required you may enclose separate sheet for details. Please mention your area of interest from the above categories.

Balmer Lawrie & Co. Ltd.

Logistics Services

40/8417A, Narkathara Road Opp.Shenoys Junction Cochin – 682 035

APPLICATION FOR VENDOR REGISTRATION

| 1 | Name of the Firm | | | | | |
|----|---|----------------|-------------|----------|---------------|------------------------|
| 2 | Type of Firm (PI tick) | | | | |] |
| | | Proprietorship | Partnership | Pvt. Ltd | Public Ltd | Govt/ Public Sector |
| 3 | Complete Address | | | | | |
| 4 | Name of Key Person/s | | | | | |
| | Phone Number | | | | | |
| | Mobile Number | | | | | |
| | E-Mail Id | | | | | |
| 5 | Nature of work for which registration is sought (Please mention the Job code mentioned against various Supply/ Service items.) | | | | | |
| 6 | PAN/ TAN Number* | | | | | |
| 7 | GST Registration number* | | | | | |
| 8 | PF Registration Number* | | | | | |
| 9 | ESI Registration number* | | | | | |
| 10 | Manufacture/ Trade Registration License Number* | | | | | |
| | Banker's Name | | | | | |

| 11 | Branch Address | | | | |
|----|---|----------------------------|---------|---------|---------|
| | Account Number | | | | |
| | IFSC Code | | | | |
| 12 | Turnover details of last 3 Financial year:* | Financial Year | 2014-15 | 2015-16 | 2016-17 |
| | Submit P&L A/c, Balance sheet or Certificate from CA | Turnover (In Rs. Lakhs) | | | |
| | | PAT (In Rs. Lakhs) | | | |
| 13 | Total experience in the specified area (in years) | | | | |
| 14 | Work Experience:* Credentials from Major Customers with Order value | | | | |
| 15 | Particulars of Interested Party like Plant & Machinery, Manpower etc. | | | | |
| 16 | Registered under MSMED/NSIC Act. If yes provide details* | | | | |
| 17 | Whether certified under ISO or any other Safety/ environmental Standards* | | | | |
| 18 | Details of Registration with any other Organisation* | | | | |
| 19 | Whether associated with any other PSU/ Govt. Sector. If yes please provide details* | | | | |

| 20 | Special Strength of the Party | | | | | |
|----------------------------------|-------------------------------------|---|--|--|--|--|
| 21 | Other Firms/ Companies of the Group | | | | | |
| 22 | References | | | | | |
| | | | | | | |
| Name of the Authorised Signatory | | | | | | |
| Signature | | | | | | |
| Place | | | | | | |
| Date | | | | | | |
| Office S | Seal | | | | | |
| | | | | | | |
| | | | | | | |
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^{*} Please provide documentary evidences in support of the information provided above.