केंद्रीय विद्यालय द्वारका

फर्म/आपूवतमकतामपंजीकरण के साथ आवेदन पत्र (2024-25) TO BE FILLED BY AUTHORIZED PERSON / OWNER OF ORGANIZATION

1	Registration/Establishment sought for	☐ As a supplier	As a	a co	ntra	ctor	As a	As a service agency					
2	Name of supplier/Vendor/												
	Contractor (in block letters)												
3	Address for communication												
		City:	Г	ist.:				State:			PIN	V:	
4	Telephone numbers	Landline											
	•	(O)											
		Mobile											
5	Banker's details	Bank Name											
	Builder's details	& Address											
		A/C No											
		IFSC Code		1 1					1 1	l			
	D 14 41 3 4 3												_
6	Registration related information	Reg. Number											
	(Attach Documents)	GST No.											
		PAN Number											
		EPF Reg.											
7 List of items you can supply: List of services you ca													
1	List of items you can supply	/ •	1	AST OI	ser	vices	s you	can p	rovia	e:			
		DECLA	RATI	ON									
I/v	ve declare that the information	furnished above is	true to	the be	est o	of m	y/oui	know	ledge.				
	ve undertake to inform KV Dw		•	_									
	ve hereby agree to abide by the	ne conditions presci	ribed in	n the e	nclo	osed	state	ment c	of KV	Dwa	arka	•	
Tha	nking you,												
		Signature of authoriz	ed pers	on witl	h Da	ate _							
	CEAL CEIDM	N 0 D :											
	SEAL of FIRM	Name & Designation	·										
		Office Us	se only	7									1
(i)	(i) Copy of registration of firm / company / shop							YES			N	С	
(ii)	Copy of GST number copy							YES] N(С	
(iii)	17							YES] N(С	
(iv)	11 0							YES] N(
(v)	Proof of 3 years performance						YES			N			
(vi)	Turnover for last three finar F.Y 2020-21)	ncial years (F.Y 202	2-23, F	F.Y 202	21-2	22 &		YES			N	С	
(vii)						Vc_		YES			N	CC	
	Remarks:												