



Vendor Registration Form

1. Name of the firm :
Corporate office Address :

Telephone no.
Office :
Residence :
Mobile :
Fax :
E-mail :

Branch Office address :
in state of Goa/Maharashtra

Telephone no.
Office :
Residence :
Mobile :
Fax :
E-mail :

2. a) Whether proprietary/partnership/
Pvt. Ltd. / Public Ltd.
(certificate Of registration /
partnership deed to be enclosed
as **Annexure- I**).

b) Name of the Proprietor, Partners, Directors, Key personnel

i)

ii)

iii)

c) Year of establishment :

3. Registration with Tax Authorities

i) Income Tax PAN no. :
ii) GST No. :

(Copies of certificates of registration with relevant authorities to be enclosed as
Annexure-II-A, II-B)

4. Registration detail with State Fire & Safety Services (Goa and/or Maharashtra State):
(please enclose a self-attested copy of registration/license/empanelment letter with state fire services)

5. Details of civil suit, if any, that arose during :
execution of contract in the past 3 years.

6. Name & relation, if any, with the staff :
member of Bank of Maharashtra.

7. Fire Audit done for last 3 years

S. No.	Year	Name of Firm/Bank (name only 02 bank/firm each year)	Date of Completion	Certificate from Firm/Bank for satisfactory Completion
1	2017-18			
2	2018-19			
3	2019-20			

Copy of certificates to be attached as **Annexure III-A, B & C**

Place:

Date:

SIGNATURE OF THE CONTRACTOR With STAMP

DECLARATION

I / We have read the instructions appended to the Performa and I / We understand that if any false information is detected at a later date, any future contract made between ourselves and Bank of Maharashtra, on the basis of the information given by me / us can be treated as invalid by the Bank and I / We will be solely responsible for the consequences.

I / We agree that the decision of Bank of Maharashtra in selection of contractors/vendors will be final and binding to me / us.

All the information furnished by me hereunder is correct to the best of my knowledge and belief.

I / We agree that I / we have no objection if enquiries are made about the work listed by me / us in the accompanying sheets.

I / We agree that I / We have not applied in the name of sister concern for the subject empanelment process.

Place:

Date:

Signature

Name & Designation

Seal of Organisation

SCOPE OF WORK

The Goa Zonal office of the Bank has initiated steps to assess the fire safety preparedness as per RBI directives. Subsequently, we have **proposed to carry-out fire audit for 65 branches including Currency Chest and Zonal Office under Goa Zone.** The addition/deletion in the branches/offices will be at the discretion of the Bank. The Bank will select the eligible fire auditor on L-1 basis. Upon approval of tendered rate, work order will be placed with the selected agencies consequently. The Zonal Office will directly place the work order to selected agency. The selected agencies are to ensure and deliver the Fire Audit report in given format and in editable word/excel format **within 30 days** upon such request to Zonal Office, Goa. **Consolidated bill** shall be submitted to Zonal Office, Goa for payment. Zonal Office upon confirming satisfactory services of the order will make 100% payment within due date. The fire audit agency should ensure proper compliance of RBI directives.

If deficiency in services are found for more than 15 days, the agency will be put on first notice. For further deficiency in services for more than 15 days, second notice will be issued. Even after issue of 2 notices deficiency in services are observed to be continuing nature, the Bank will be free to cancel the work order without further notice and bank will be free to obtain such services from another eligible agency.

List of Branches under Goa Zone, Bank of Maharashtra:

State of Goa	Sindhudurg Distt. of Maharashtra	Ratnagiri Distt. of Maharashtra
MADGAON	BANDA	RATNAGIRI
PANAJI	PHONDAGHAT	MALGUND GANPATIPULE
VASCO DA GAMA	KUDAL	PALI
MAPUSA	SAVANTWADI	JAIGAD
BANDORA	MALVAN	CHIPLUN
MADKAI	REDI	RAJAPUR
KUMBHARJUA	AJGAON	RAT SHIVAJINAGAR
PONDA	KHAREPATAN	PAWAS
PORVORIM	KATTA PENDUR	MARG TAMHANE
GOGAL	PAT PARULE	MAKHJAN
CHINCHINIM	TALERE	KHERDI
PERNEM	JAMSUNDE	HEDVI
CANACONA	ACHARA	SAGAVE
CARAPUR	KADAVAL	BURONDI
CALANGUTE	KANKAVALI	BHOO
	DODAMARG	BHOM
	VAIBHAVWADI	KHED
	VENGURLA	KUWARBHAV
	KALAMBIST	WATAD KHANDALA
	KASAL	RP GOGATE COLLEGE
	PADEL	GANAPATIPULE
		LANJHA
		DEVROKH
		DAPOLI
		KHEDSHI
		JAITAPUR
		NACHANE
		KASARVELI

QUOTATION FOR FIRE AUDIT OF BRANCHES IN GOA ZONE

To,

The Zonal Manager,
Bank of Maharashtra
Goa Zone,

Date:

We, hereby quote the fee Rs. Rate in words Rs.
..... per branch for
Fire Audit.

Note:

1. While quoting rate, agency should consider all other expenses of commutation, lodging/boarding. Bank shall not pay any amount other than above quoted rate.
2. Rates quoted shall be exclusive of GST. GST will be paid as applicable
3. Rates quoted shall not have any hidden cost.
4. Rate quoted shall be valid for 1 year from date of work-order/contract.

Place:

Date:

Signature

Name & Designation

Seal of Organisation