



INSTRUMENTATION LIMITED, PALAKKAD

VENDOR REGISTRATION CUM RE - EVALUATION APPLICATION FORM

Instructions : 1) Please fill by typewriting 2) Attach additional sheets, wherever space is insufficient

A) Details for communication:

1. Name of Vendor : M/s.

2. Address :

Telephone :

Telex :

Fax :

3. Contact person/s :

a) Name :

c) Designation :

b) Name :

d) Designation :

4. Please give detailed instructions to reach your factory. Attach sketch showing location from the nearest bus-stop.

B) Organisation :

1. Type : Individual / Partnership / Pvt Ltd Co / Public Ltd Co

2. Registration details (attach copies of certificates)

a) SSI Registration No :

b) Sales Tax Registration No :

c) Excise Registration No :

d) Company's Act Registration No :

e) Partnership Act Registration No :

f) Factory Act Registration No :

3. Whether manufacturer or trader :

4. No. of employees : a) In production :

b) In quality control :

c) others :

C) Facilities : of total sales during the previous year :

1. Production equipment : (Attach additional sheets if necessary)

Description	Size	Make	Year of mfr	Accuracy	Spare capacity
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6. Banker's name & address :

7. Amount up to which surety can be made at one time :

8. Have you obtained income tax clearance certificate ? If so, state number & date and enclose a copy of the same showing details of income assessed, tax demanded and paid for the last three years -

2. Quality control equipment : (Attach additional sheets if necessary)

Description	Range	Make	Year of mfr	Accuracy	Calibration frequency
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Sl. No.	Description	Specification	Size	Qty
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G) Any other relevant information :

D) Quality system :

1. Whether your quality system has been certified by any agency to any standard ? If YES, give details :

H) Number of sheets attached as enclosures :

2. Please give a list of your major customers and the items being supplied to them with approximate values :

I) Declaration : I certify that the information furnished herein (including all pages attached) are TRUE to the

3. Please describe the quality plan followed by you for your products :

Signature :

4. Do you inform your customer about any anticipated delay in delivery ?

5. How do you control the documents received from your customer ?

Place :

E) Financial status :

1. Value of current assets as on date :
2. Value of current liabilities as on date :
(Attach balance sheets, for last three years)
3. Value of total sales during the previous year :
4. Value of orders in hand :
5. Value of total capital employed :
6. Banker's name & address :
7. Amount up to which surety can be made at one time :
8. Have you obtained income tax clearance certificate ? If so, state number & date and enclose a copy of the same showing details of income assessed, tax demanded and paid for the last three years.

F) Items for which registration is applied for :

Sl.No.	Description	Specification	Size	Qty
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G) Any other relevant information :

H) Number of sheets attached as enclosures :

- I) Declaration : I certify that the information furnished herein (including all pages attached) are TRUE to the best of my knowledge and belief.

Signature :

Name :

Designation :

Place :