DISTRICT SCIENCE CENTRE

(National Council of Science Museums) National Highway No.7 Kokkirakulam, Tirunelveli – 627 009

PRE-QUALIFICATION / REGISTRATION FORM FOR SHORT LISTING OF AGENCIES FOR OPERATION OF SOUVENIR/GIFT CORNER IN THE PREMISES OF DISTRICT SCIENCE CENTRE, NH NO.7, KOKKIRAKULAM, TIRUNELVELI - 627009

	<u>, 11011111111111111111111111111111111</u>		021005	
1.	Name of the Agency	:		
2.	Full postal address	:		
3.	Telephone/FAX nos.	:	Office Residence	<u>:</u>
4.	E-mail Id	:	<u> </u>	_
5.	Whether proprietorship or partnership or company	:		
6.	Name and address of partners / owners	:		
7.	No. of employees in the existing establishment	:		
8.	Name/Full address of all organizations where the agency is presently having contract (indicate in each case date from which contract is being held and submit copies of work orders etc.).	:		
9.	Name & full address of the banker	:		
10.	Whether Income Tax is paid by the agency (If so, latest IT clearance certificate along with copy of PAN to be enclosed).	:		
11.	Whether the agency has got valid Trade License with the appropriate Authorities. If yes, please	:		

- with the appropriate Authorities. If yes, please enclose a copy in support.
- 12. Whether the agency has got valid registration/License issued by the competent authority for running Souvenir/Gift Corner, if yes, please enclose a copy in support.
- 13. Whether the agency has got valid GST registration. If yes, pl. enclose a copy
- 14. Audited annual accounts for the last 3 years need to be enclosed

Certified that the information furnished above is true to the best of my/our knowledge. It is hereby declared that I/We will abide by the decision of VITM, Bangalore (National Council of Science Museums) for registration and short listing of agencies for issue of Tender Papers.

Place : Date :

SIGNATURE WITH DATE AND SEAL OF AGENCY

NB: Copies of all credentials must be enclosed, failing which, the registration form is liable to be rejected.