



APPLICATION FORMAT

1. Name of the Applicant :
Address :
Telephone No.:
Office :
Residence :
Mobile :
E-Mail :
2.
 - a) Status of the Firm (Whether company/Partnership / proprietary) :
 - b) Year of establishment:
3. Whether registered with Registrar of Companies/ firm. If so, No. & Date :
4. Registration with Tax Authorities:
 - a) PAN NO:
 - b) GST No:
5. Registration with Government / Public Sector / Banks

SL NO	NAME OF THE ORGANISATION	NATURE OF WORKS	VALUE OF WORKS	DATE OF REGISTRATION

What are your fields of core competence? Mention the fields on preference Basis

i)

ii)



यूको बैंक



UCO BANK

सम्मान आपके विश्वास का

Honours your trust

6. Details of the qualifying works executed (please mention only such works which qualifies for the category/class for which you have applied)

Sl. No	Name of Work	Work executed for (name of the organization with address, concerned office & telephone no)	Nature of work (in brief)	Location of the work	Actual Value of the works	Stipulated time for completion	Actual time for completion	If work left incomplete or terminated (furnish reasons)
1								
2								
3								

DECLARATION

1. All the information furnished by me / us here above is correct to the best of my knowledge and belief.
2. I / we have no objection if enquiries are made about the work listed by me / us in the Accompanying sheets / annexure.
3. I / We agree that the decision of UCO Bank in selection of firms will be final and binding to me / us.
4. I / We have read the instructions appended to the proforma and I / we understand that if any false information is detected at a later date the work order shall be cancelled at the discretion of the bank.

Place :

SIGNATURE OF THE APPLICANT

Date :

NAME & DESIGNATION
SEAL OF ORGANISATION

यूको बैंक, अंचल कार्यालय, एस.के.तरफदार रोड, आदमपुर, भागलपुर - 812001, UCO Bank, Zonal Office, S.K.Tarafdar Road, Adampur Chowk, Bhagalpur - 812001 फोन /Phone: 0641-2301751 फैक्स /Fax: 0641-2301758 ई-मेल / E Mail : zo.bhagalpur@ucobank.co.in

