



UCO BANK

(Govt . of India Under taking)

Zonal Office,Coimbatore ,

Vijay Towers, First Floor,22 Father Randy Street,

R S Puram,Coimbatore-641004

फोनPhone: 0422 -4509999 फैक्स Fax 0422 -4509988

E-mail: zocoimbatore.gad@ucobank.co.in/zo.coimbatore@ucobank.co.in

NOTICE FOR EMPANELMENT OF CONTRACTORS

Applications are invited from experienced Contractors for undertaking/ composite jobs of branches as follows.

- a) Interior Decoration and furnishing works.
- b) Electrical works including operation of gen- set.
- c) Data Cabling works.
- d) Air-conditioning works.
- e) Fire fighting/smoke detector installations.

Experienced **Contractors based in Coimbatore only** in the respective field from the are required to submit their credentials/ organizational profile in the prescribed format which can be downloaded from Bank's website. The Contractor should have registered with their local authority/ Chapter.

Bank reserves the right to accept or reject the prequalification application of the Contractor without assigning any reasons thereof. The Last date of submitting the completed application form is 20-04-2023.

**Deputy General Manager
& Zonal Manager**



(To be published in the Bank's website)



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NOTICE

FORMAT TO BE USED FOR EMPANELMENT OF CONTRACTORS

Application are invited from Firms/Individuals in the prescribed format given below for getting themselves empanelled for the following jobs, under UCO Bank, Coimbatore Zonal Office, who has proposed to form a panel for its branches in Coimbatore.

The jobs are:

1.Civil works. 2. Interior Decoration & Furnishing Works. 3. Electrical Works & Data Cabling Works. 5. Fire & Smoke alarm systems 6. Air-Conditioning Works.

The envelope should be superscripted "EMPANELMENT OF CONTRACTORS". The applicants should have registered with their local Authority/chapter in Coimbatore/Tamilnadu.

PARTICULARS OF THE FIRM TO BE FURNISHED FOR THE PURPOSE OF EMANELING OF CONTRACTORS

1. Name of the Organization :
2. Address :
3. Year of Establishment :
4. Status of the Firm:
(Whether Company/Firm/Proprietary)
5. Name of Directors /Partners/Proprietors:
 - i)
 - ii)
 - iii)
6. Whether registered with the Registrar of Companies /Registrar of Firms .if so, mention number and date:
7. Name & Address of existing Bankers:
 - i)
 - ii)
 - iii)
 - iv)
8. Whether registered for GST/sales tax purpose, if so mention number and date:
.....
9. Whether an assessee of Income Tax, if so, mention permanent account number:
10. Furnish copies of certificate of qualification/registration.



11. If you are registered in the panel of other organization s/statutory bodies, bank etc., furnish their names, category and date of registration

- | | |
|------|-----|
| i) | ii) |
| iii) | iv) |
| v) | vi) |
| vi) | |

12. What are your fields of activities? Mention the fields on preference basis.

- | | |
|------|-----|
| i) | ii) |
| iii) | iv) |
| iv) | vi) |

13. Whether willing to work anywhere in the State of Kerala or mention the places where you are willing to work.

14. i) Detailed description and value of works done of others in the past.
ii) Detailed description and value of works done for the Banks.

15. Specify the maximum value of work executed in a year.

16. Furnish the names of three responsible persons who will be in a position to certify about the quality as well as past performance of you /your organization.

- i)
ii)
iii)

SIGNATURE
(PROPRIETOR/PARTNER/DIRECTOR)



PROFORMA –I
PARTICULARS IN RESPECT OF WORK EXECUTED

SL. No.	Name of work /project with address	Sort prescription of work executed	Name & Address of Owner	Value of work executed	Stipend Time of Completion	Actual time of completion	Remarks
1.	2.	3.	4.	5.	6.	7.	8.

PROFORMA –II
KEY PERSONNEL PERMANENTLY EMPLOYED

SL No.	Name	Designation	Qualification	Experience	Years with Firm	Any other
1.	2.	3.	4.	5.	6.	7.

OTHER RELEVANT INFORMATION

SL No.	Particulars
1. Work Force	

**SEAL & SIGNATURE
(PROPRIETOR/PARTNER/DIRECTOR)**

