VENDOR REGISTRATION FORMAT

THE SINGARENI COLLIERIES COMPANY LIMITED
(A GOVERNMENT COMPANY)

CORPORATE PURCHASE DEPARTMENT

P.O: KOTHAGUDEM COLLIERIES  E-Mail : gm_pd@scclmines.com
District- Khammam  Telefax : 91-08744-245651
Andhra Pradesh, India Telephone : 91-08744-243109

EPABX : 242301 Extn.422,423
Telex : 0423-205 SCCL IN
Grams : 'MANAGER'

Ref. No. PD/ Date:

TO

Sir,

Sub: Registration of suppliers-Regarding.

Ref:

With reference to the above, kindly furnish the details called for in the VENDOR REGISTRATION APPLICATION.

You should produce in support of your application, the following.

1. Income-Tax Clearance Certificate.
2. Sales Tax Clearance Certificate.
3. Photostat copy of the Factory Registration/SSI/NSIC.
4. Profit and Loss Account as certified by the chartered accountant for PAST 3 YEARS:
5. Balance Sheet
6. List of Machinery installed as Certified by Chartered Engineer.

Registration will be done solely at our discretion.

Yours faithfully,

for SINGARENI COLLIERIES COMPANY LIMITED.

CGM / G.M.(PURCHASE)
THE SINGARENI COLLIERIES COMPANY LIMITED
(A GOVERNMENT COMPANY)

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VENDOR REGISTRATION APPLICATION

PART-I
(TO BE FILLED IN BY ALL VENDORS)

I. CLASSIFICATION OF VENDOR

MANUFACTURER PROPRIETORY DEALER AUTHORISED SELLING AGENT

FABRICATOR AUTHORISED DISTRIBUTOR

II. Name of the firm
Address for service

Telegrams:
Telephone:
Telex:
Fax:

Post Box No.

Pin code No.

III. Name of authorised area (Local)
Dealer.
Address for service

Telegrams:
Telephone:
Telex:
Fax:

IV. Type of company and year of incorporation:

Proprietorship Partnership Pvt. Ltd. Public Ltd. Co-operative Joint Sector Others

V. Foreign collaboration :
(furnish details in a separate sheet)

YES/NO

VI. LICENCED CAPACITY.
VII. Name of the Bankers:
Branch:
Pin code No.:

VIII. Registration with and number
S.S.I. N.S.I.C DEPT. OF INDUSTRIES D.G.S.D RAILWAYS
LLOYD'S INSPECTION C.S.T A.P.G.S.T I.T. CLEARANCE NO. EXCISE DUTY

IX. Firms/Customers for Previous supplies
(Furnish details of purchase order and performance certificate)

   a) S C C L
   b) Other Public Sector Companies
   c) Private firms
   d) Exports

Date: Signature

EXISTING FACILITIES:
   a) Manufacturing
   b) Repair
   c) Testing
   d) Inspection

If R&D facility available
(furnish details in a separate sheet)

Whether spare parts service organisation maintained:

Signature

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PART- II
(To be filled in by Manufacturers / Repairers)

SECTION - I

Location of Works.

Nearest Railway Station.

Godown / ware house facility.

No. of executives No. of supervisors

No. of workmen (skilled)

Connected power load:- H.P. KW

Capacity of stand by diesel generating set

To what specification are the equipment, materials manufactured(ISI,BS,DIN etc.)

Whether ISO certification is available.
(Enclose copy of certificate)

EXISTING FACILITIES:

a) Manufacturing

b) Repair

c) Testing

d) Inspection

Is R&D facility available
(furnish details in a separate sheet)

YES/NO

Is after sales service organisation maintained : Whether spares maintained

Date: Signature
SECTION - II.
(To be filled in by Dealer)

Is an authorised selling agent
YES/NO (if Yes, fill in details below)
Name of the Principal:

(NOTE: Photostat copy from the principal should be enclosed)

Products represented
(List of products to be attached separately).

Whether sole agency operating
in a specified territory

Number of branches and their location.

Date: 

SIGNATURE

(TO BE FILLED IN BY SCCL)

(i) List of products identified for registration.
(ii) Inspecting Officers Names & Designation
(iii) Items recommended for Registration.

CGM/G.M.(PURCHASE)  DY.G.M.(F&A) (PD)  AGM (E&M)(PD) / AGM (PD)
(Signature of Committee Members)

Approved

DIRECTOR (OPERATIONS)

Vendor Code:
Product Code: