

VENDOR REGISTRATION FORM

* Mark fields are mandatory

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Registration Category*	Original Equipment Manufacturer				
	☐ Distributor/Dealer/Stockist				
	Micro/Small Enterprise				
	Public Sector Unit				
	Govt. Dept				
	Consortium/State/Govt. Agencies				
	Others				
If others, please specify					
Name of Individual/Firm/Company*:					
Registration Number*:					
Registration Authority*:					
Date of Registration*:					
Name of the Chief Executive / Director / Ow	ner / Partner:				
Email:	Mobile:				
Landline. No. (prefix std code):					
Name and designation of the contact persor):				
Address for communication:					
Email:	Mobile:				
Landline. No. (prefix std code):					
Company website address:					
OFFICE ADDRESS					
Address*:					
Street*:	City* :				
District*:	State* :				
Pincode*:	Mandal :				
Telephone*:	Fax :				
Mobile(Start with 0)*:					
Email*:					
Alternate Email :					
Branch Address					
Address*:					
Street*:	City* :				
District*:	State* :				
Pincode*:	Mandal :				
Telephone*:	Fax :				
Mobile *:					
Email* :					
Alternate Email:					
Firm Address					
Address*:					
Street*:	City* :				
District*:	State* :				
Pincode*:	Mandal :				
Telephone*:	Fax :				
Mobile(Start with 0)*:					
Email*:					
Alternate Email :					

	APPLICANT PROFILE						
1	. Type of Ownership: [(Enclose supporting document attested by public Attorney) [[[☐ Individual ☐ Partnership ☐ Ltd. Company ☐ (Private/Public)PSU/Govt. ☐ Undertaking Research ☐ Institute ☐ Trust					
	Joint Ventures : If Others :	Joint Venture/other tie-up for equipment, financial backing or Project Management					
2	a) Category of Industry as per MSMED Act, 2006 If you are Micro/Small Enterprise, pleas if applicable please submit self certified						
	b) Is your firm a startup? Ifso, please pr Dept. of Industrial Policy and Promotion						
	(c) Do you have ISO 9000/9001/9002 certification? If yes, please specify & indicate validity	☐ Yes ☐ No ☐ Yes Valid Upto: ☐ No					
	(d) In case of certification by other accre Institution Type of Certification Valid up	on:					
3	Is your firm / Co. registered	☐ Yes ☐ No					
	a) As a proprietary firm? If yes, give the names of all firms having the same proprietor:	Yes No					
	b) Under Indian Partnership Act 1932?	☐ Yes ☐ No					
	If yes, give the names of all firms having same partners:						
	c) Under Indian Companies Act 1956? Detai	☐ Yes ☐ No					

 Nature of Business carried out: (Attach Brochures / leaflets of products manufactured)* 	☐ Manufacturer☐ Service/Subcontractor☐ Authorized Agent☐ Dealer☐ Trader				
	Consultant Civil Work Conversion/Outsourcing Others, please specify				
5. Items of Manufacture / Service / Civil Works / Agency / Dealership / Consultancy for which Registration is sought:					
6. List of product category being dealt with (Please put tick mark)	□ Capital Items □ Raw Materials (Metals / Ferro Alloys / Alum. Bars etc.) □ Production Consumables (Graphite electrodes etc.) □ General Consumables □ Hand tools, Gauges and Instruments □ Specific Tools □ General Spares □ Job work at supplier end / Conversion □ Services □ Civil works □ Transportation □ Stationery and other miscellaneous □ Others, please specify				
7. If manufacturer/sub-contractor	☐ Yes ☐ No				
8. If Agent, please give the details	 ☐ Territories ☐ Principal held details of the agent agreements ☐ Details of modalities of stock held ☐ Maximum value of supply at any time ☐ Facilities for after sales Service 				
Give related Details:					

9. I	f stockist, please state the level of stocks					
	held, approximate stock in trade					
	normally held, maximum value of supply					
	that can be executed at any time, Surety/					
	testimonial establishing dependency and					
	capacity to execute contracts.					
10.	Value of movable/immovable property					
	with details. Self certified documents to					
	be submitted.					
11.	Details of Sales turnover and	(a)	Year:			
	sales tax paid in last 3 years:		Details:			
	(Enclose Annual Reports)					
		(b)	Year:			
			Details:			
		(c)	Year:			
			Details:			
12	Are you listed/ Approved contractor		Yes			
12.	for other PSU/ Govt Department.		No			
	If "Yes", Please give details and enclose Reg			ent		
	Details:	513 (1 4 (1	on bocarrie			
	Details.					
13.	Have you ever been Black listed by	П	Yes			
	any of the above.	$\overline{\Box}$	No			
	If "Yes", Please give details and enclose sel	f-certi f	ied docume	ent.		
	Details:					
14.	Are already doing business with		Yes			
	Midhani?	Ш	No			
	If "Yes", Please give details:					
	(PO Number, Item Description)					
15.	Are you willing to furnish		Yes			
	security deposit?	<u> </u>	No			
1.0	Aro you willing to ohide by Midbaril		Voc			
10.	Are you willing to abide by Midhani's General Terms and Conditions of		yes No			
	contract.? Accept		NO			
<u> </u>	contract: Accept					
17	References of Your Customers: Please encl	റട്ടെട്ടി	f certified i	photoconies of orde	ירג פצפרוי	ted during the last one year
Ι/.	At least 2 PO's /Invoices executed during I					
	to be submitted	ast UII	c year ioi t	ne material /Service	Jougni	ioi registi du Oii
	to be submitted	Ma	terial /			
SI.	Plant / Organization		ervice	Order No. / D	ate	Value in Rs.
No	, 0.80		cription			
		203				

18. Whether you are registered in GeM? If so	please provide your GeM Seller Id
GeM seller Id:	
Note: If you are not registered in GeM as seller (https://gem.gov.in/). This is a mandatory req	r, please register yourself and upload your products in GeM uirement.
19. Please confirm whether your firm/companand central Government of India.	y abides to all labour laws (including child labour) and regulations of both stat
Yes No	
PLEASE	E FURNISH THE FOLLOWING DETAILS
1 Floor area of factory	:
2 Number of workers employed	:
3 Number of employees in QC/Inspection	:
4 Sources of raw materials	:
5 Collaborators	:
6 Any details of plant and machinery	:
	PLANT AND MACHINERY
1 Details of plant and machinery	:
2 Inspection equipment	:
3 Test facilities	:
4 Any facilities being sought from others	:
REGISTRATION	PARTICULARS (Enclose documents for each)
1 Permanent Account No*	:
2 GST Registration Number *	:
	of the company, duly endorsed by the bank (required for electronic Fund sfer - EFT/RTGS) is to be submitted.
1 Name of Company*	<u> </u>
2 Name of Bank*	:
3 Name of Bank Branch & Address*	:

4	City/Place*	:					
5	Account Number*	:					
6	Account Type*	:					
7	IFSC code of the Bank Branch*	:					
8	MICR Code of the Bank Branch*	:					
9	Details of other Bankers (for reference purpose only)	:					
	REGISTRATION FEE For registration, please send non refundable registration fee Rs. 500/- plus applicable GST (Presently GST applicable is 18%. Hence vendor has to pay Rs.590/-) in favor of 'MISHRA DHATU NIGAM LIMITED' payable at Hyderabad.						
1	DD NUMBER or UTR No. of NEFT payment done	:					
2	DD AMO UNT	:					
3	DD Date	:					
4	BANK NAME	:					
5	UTR No. /date for NEFT/RTGS	:					
The information furnished in this form is true to the best of my knowledge and belief. In case the same is found incorrect, MIDHANI reserves the right to cancel the registration and also take any other action as deemed fit.							
				Signature			
Da	te:			Name & Designation			
Pla	ace:			[Rubber / Stamped]			
				Seal of the Company			
*	1. Proprietor / Partner / Director						
	2. Company Secretary / Head of Admin	istration (fo	r foreign company	y's Indian Operation)			
Note:							
 Vendor registration if done shall be valid for 5 years and thereafter supplier has to renew the same 							

2. Please attach separate sheet where ever necessary

Following documents are required COPY OF REGISTRATION / MEMORANDUM AND ARTICLES OF ASSOCIATION (IF PUBLIC LIMITED COMPANY OR PRIVATE LIMITED COMPANY) CERTIFICATE OF INCORPORATION (IF PUBLIC LIMITED COMPANY OR PRIVATE LIMITED COMPANY) PARTNERSHIP DEED (IF PARTNERSHIP FIRM) ☐ LATEST LIST OF BOARD OF DIRECTORS/PARTNERS A. IF YOU ARE A MSE, PLEASE PROVIDE PROOF OF THE SAME ALONG WITH UDYOG AADHAR MEMORANDUM NUMBER AND CERTIFICATE B. PLEASE FURNISH CERTIFICATE IF YOU BELONG TO SC/ST OWNED MSE, WOMEN OWNED MSE ☐ START-UP CERTIFICATE (OPTIONAL) ISO 9001:2008 CERTIFICATE (OPTIONAL) ☐ INCOME TAX RETURNS (LAST 3 FINANCIAL YEARS) BALANCE SHEET AND PROFIT & LOSS STATEMENT (LAST 3 FINANCIAL YEARS) ☐ GST CERTIFICATE □ PAN CARD COPY DEALERSHIP / CHANNEL PARTNER CERTIFICATE (OPTIONAL) ☐ VALID REGISTRATION CERTIFICATE OF OTHER P.S.U. / GOVT. ORGANIZATION (OPTIONAL) RS.500/- PLUS APPLICABLE GST (PRESENTLY APPLICABLE GST IS 18%) IN FAVOUR OF MISHRA DHATU NIGAM LIMITED, PAYABLE AT HYDERABAD / RECEIPT OR PROOF IN CASE OF NEFT TRANSFER. MISHRA DHATU NIGAM LIMITED BANK DETAILS ARE GIVEN BELOW: BANK NAME: HDFC BANK LTD. BRANCH ADDRESS: LAKDIKAPUL BRANCH, HYDERABAD. ACCOUNT NO.: 00210330000440. IFSC CODE: HDFC0000021 EXPERIENCE CERTIFICATE (P.A.C. / PERFORMANCE CERTIFICATE / PREVIOUSLY EXECUTED P.O. COPIES / CONTRACTS FOR THE SAME OR SIMILAR MATERIAL / SERVICE FOR WHICH REGISTRATION IS SOUGHT. AT LEAST 2 POs / INVOICES WHICH ARE EXECUTED DURING THE LAST ONE YEAR TO BE SUBMITTED ☐ VENDOR REGISTRATION CERTIFICATES GIVEN BY PSU'S/GOVERNMENT ORGANISATIONS (OPTIONAL)

Note: All the above documents should be self certified

FACTORY LICENSE AND PCB CFO (IF APPLICABLE)