### 6. THE FORMATS FOR TECHNICAL BID PART A Indian Institute of Information Technology Sri City, Chittoor

Annexure I

### **UNDERTAKING FORM**

То

The Registrar I/c. IIIT Sri City Chittoor PIN:517646

Dear Sir,

Sub: Recharge Point situated in IIIT Sri City Chittoor campus (Scope of work is provided in the tender document) – Reg.

Ref: e-Tender Event No.IIITS/NIT/Recharge Point/2021/12/01, dt.14.12.2021

1. Having visited the site and examined the complete tender document including instructions for bid submission, terms and conditions, we offer to run Recharge Point in conformity with the conditions for contract, specifications, and Bill of Quantities of this Tender Documents or such other sum as may be ascertained in accordance with the said conditions of contract.

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- 2. We agree to abide by this tender for the period of ninety days from the date fixed for receiving of tender and it shall remain binding upon us and may be accepted at any time before the expiry of the period.
- 3. Unless and until a formal Agreement is prepared and executed this tender together with your Acceptance thereof shall constitute a binding contract between us.
- 4. We understand that you are not bound to accept the lowest or any tender you may receive. Also you are not bound to assign any reason for rejection of any tender.

Dated ......day of......2021

Signature of the bidder with seal.....

In the capacity of duly authorized to sign Tenders on behalf of

.....

Address of the bidder:

.....

Witness:

Signature.....

Annexure -II

# BASIC DETAILS TO BE FURNISHED BY THE BIDDERS

# Ref: e-Tender Event No.IIITS/NIT/Recharge Point/2021/12/01, dt.14.12.2021

| S.No. | Description  | Information |
|-------|--|-------------|
| 1a.   | Name of the Firm / Company :   |             |
|       | Date of Incorporation/Establishment                                      |             |
|       | Complete Address   |             |
|       |  |             |
|       | Phone No.  |             |
|       | Mobile No.   |             |
|       | Email id   |             |
|       | Constitution: Proprietorship/<br>Partnership/Pvt. Ltd Co./Public Ltd Co. |             |
| 1b.   | Details of Proprietor /Director/MD :                                     |             |
| 1c.   | Contact Person/Representative<br>Name and Designation :                  |             |
|       | Phone (with STD Code)  |             |
|       | Mobile No.   |             |
| 2a.   | Licence No.  |             |
|       | GSTN   |             |
|       | PAN  |             |

|     | ESI  |  |
|-----|--|--|
|     | EPF  |  |
|     | (Enclose copies of the above)  |  |
| 2b. | Proof for payment of Income Tax and<br>Service tax/ GST (last three years) (copy<br>of Income Tax and Service Tax/GST<br>payment to be enclosed  |  |
| 3   | No. of Food Courts/dining facilities<br>serviced in Higher Education Institutions<br>(Enclose list of work handled upto 2019-<br>20 and ongoing work, separately with all<br>the relevant documents          |  |
| 4.  | Whether Quality Certification obtained for<br>any of the Food Courts/Dining<br>facilities/Catering Services provided. For<br>example FSSAI, ISO etc., (If yes, copy to be<br>enclosed, showing the validity) |  |
| 5   | Bidders Solvency (Capital Employed) Rs.<br>(in lakhs) (Solvency Certificate for an<br>amount not less than Rs.20.00 lakhs<br>should be enclosed)   |  |
| 6   | Turnover per annum Rs. (in lakhs)<br>Authenticated copy of audited statement<br>of Accounts during the three financial<br>years out of five financial years (from<br>2016-17 to 2020-21)                     |  |
| 7   | No. of Employees<br>(Please submit proof of ESI, PF records of<br>list of employees in summary)  | Regular                                  |
|     |  | Temporary                                |
| 8   | Litigations, if any, connected with Catering work  | Yes/No (If yes, details to be furnished0 |
| 9   | Authorized Signatory Details   |  |
|     | Name:  |  |

|    | Designation   |  |
|----|---|--|
|    | Email   |  |
|    | Contact No.   |  |
| 10 | Details of contact other than Authorized<br>Signatory |  |
|    | Name:   |  |
|    | Designation   |  |
|    | Email   |  |
|    | Contact No.   |  |
| 11 | Any other information in support of the credentials   |  |

This is to certify that the above facts are true, complete and correct to the best of my knowledge and belief. Further, it is certified that I/We have read and understood the terms and conditions of the Tender Notice.

I/We give an undertaking and give our unconditional and unequivocal acceptance of all terms and conditions of the Tender and agree to abide by these terms and conditions. List of licences to be included.

Signature and Seal of the bidder Name in Block letter Designation Contact no. Full Address

Date: Place:

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Note : i) Authenticated certificates, testimonials and proof of experiences to be produced in support of information furnished above.

Seal

### Annexure – III

Ref: e-Tender Event No.IIITS/NIT/Recharge Point/2021/12/01, dt.14.12.2021

### Declaration regarding black-listing and/ or litigations

I/we hereby declare that our firm/Contractor is not black-listed by any Ministry or Department of Central Government/State Government or PSU or other bodies under the Central Government/State Government. I/we further declare that no criminal case is registered or pending against the firm/company or its owner/partners/directors anywhere in India.

Date the ..... day of ..... 2021

| Signature of Bidder      |
|--------------------------|
| Name & Address of Bidder |
|                          |
|                          |

Annexure – IV

Ref: e-Tender Event No.IIITS/NIT/Recharge Point/2021/12/01, dt.14.12.2021

#### BALANCE SHEET DETAILS

|           |                   | (Amount in INR Lakhs) |              |         |         |                          |  |  |
|-----------|-------------------|-----------------------|--------------|---------|---------|--------------------------|--|--|
| Partic    | culars            | ←                     | $\leftarrow$ |         |         |                          |  |  |
|           |                   | 2016-17               | 2017-18      | 2018-19 | 2019-20 | 2020-21<br>(provisional) |  |  |
| Total Re  | Total Revenue     |                       |              |         |         |                          |  |  |
| Total Ex  | Total Expenses    |                       |              |         |         |                          |  |  |
| Profit be | Profit before tax |                       |              |         |         |                          |  |  |
| Profit a  | Profit after tax  |                       |              |         |         |                          |  |  |

(Enclose copies of audited balance sheet for the years up to March 2020 and Trial Balance, certified by a Chartered Accountant for the year 2021 on the letterhead of firm/CA)

Signature of Bidder with date ...... Name & Address of Bidder .....

#### Annexure – V

## Ref: e-Tender Event No.IIITS/NIT/Recharge Point/2021/12/01, dt.14.12.2021

#### Solvency Certificate (To be issued in the letterhead of the Bank)

Name of Entity/Authority

Address

| This   | is    | to    | state   | that    | M/s     | having  | g Regd.    | Office   |
|--------|-------|-------|---------|---------|---------|---|------------|----------|
| at     |       |       |         |         |         | _is/are a customer of our Bank for over             | years, an  | d is/are |
| preser | tly o | enjoy | ing cer | tain cr | edit f  | acilities with us. The conduct of the account(s) of | the Comp   | any has  |
| been s | atisf | actor | ry. The | compa   | any ca  | an be considered good up to Rs.20 lakhs (Rupees T   | wenty lakl | ns only) |
| in ter | ns c  | of Ne | et Wor  | th show | wn in   | their Audited Balance sheet as on                   |            | ·        |
| This c | ertif | icate | is bein | g issue | d for ] | Bidding Catering Tender 2021-22 at IIIT Sri City C  | hittoor.   |          |

This certificate is issued for the above-mentioned specific purpose, and at the specific request of our customer M/s.\_\_\_\_\_.

Authorized signatory of the bank with seal and Date

N.B. Solvency certificate in any other format will not be considered for tendering process

Annexure - VI

Ref: e-Tender Event No.IIITS/NIT/Recharge Point/2021/12/01, dt.14.12.2021

Name of the Bidder:

Address:

### Proof for payment of Service Tax/GST

(During the three financial years out of five financial years (from 2016-17 to 2020-21))

| Financial Year        | Taxable Value (Rs.) | Service Tax / GST paid (Rs.) |
|-----------------------|---------------------|------------------------------|
| 2016-17               |                     |                              |
| 2017-18               |                     |                              |
| 2018-19               |                     |                              |
| 2019-20               |                     |                              |
| 2020-21 (Provisional) |                     |                              |

(Please enclose copy of Service Tax/GST Return & payment receipts)

#### **Proof for payment of Income Tax**

(During the three financial years out of five financial years (from 2016-17 to 2020-21))

| Financial Year           | Assessment Year | Gross Income<br>(Rs.) | Net Income (Rs.) | Income Tax paid<br>(Rs.) |
|--------------------------|-----------------|-----------------------|------------------|--------------------------|
| 2016-17                  | 2017-18         |                       |                  |                          |
| 2017-18                  | 2018-19         |                       |                  |                          |
| 2018-19                  | 2019-20         |                       |                  |                          |
| 2019-20                  | 2020-21         |                       |                  |                          |
| 2020-21<br>(Provisional) | 2021-22         |                       |                  |                          |

(Please also attached form 26AS downloaded from TDS Centralized Processing Cell of Income Tax Department)

Signature of Bidder with date and seal

Annexure - VII

Ref: e-Tender Event No.IIITS/NIT/Recharge Point/2021/12/01, dt.14.12.2021

Name of the Bidder:

Address:

#### Details of Academic Institutions and Non-Academic Institutions served from January 2016 to till date

| S.No. | Name and<br>Address of<br>Institution<br>served | Period of service | No. of students | Type of service<br>(Food<br>court/Mess) |
|-------|---|-------------------|-----------------|---|
|       |   |                   |                 |   |
|       |   |                   |                 |   |
|       |   |                   |                 |   |
|       |   |                   |                 |   |
|       |   |                   |                 |   |
|       |   |                   |                 |   |
|       |   |                   |                 |   |
|       |   |                   |                 |   |
|       |   |                   |                 |   |
|       |   |                   |                 |   |
|       |   |                   |                 |   |

Please attach:

- a) Work order copy
- b) Details of contact person Name, Designation, Mobile number
- c) For Completed work –Testimonial from Institution served

Signature of Bidder with date and seal

Annexure - VIII

Name of the Bidder:

Address:

## Ref: e-Tender Event No.IIITS/NIT/Recharge Point/2021/12/01, dt.14.12.2021

Quality Certification obtained

| S.No. | Issued by | Valid until |
|-------|-----------|-------------|
|       |           |             |
|       |           |             |
|       |           |             |
|       |           |             |
|       |           |             |

Attach photocopies in support of the above.

Signature of Bidder with date and seal

ANNEXURE IX

Name of the Bidder:

Address:

Ref: e-Tender Event No.IIITS/NIT/Recharge Point/2021/12/01, dt.14.12.2021

#### PERFORMANCE REPORT FOR RUNNING OF RECHARGE POINT OR SIMILAR NATURE OF WORK SUCCESSFULLY IN RENOWNED EDUCATIONAL INSTITUTIONS SUCH AS IITS, NITS, IIITS, IIMS, AIIMS, CENTRAL UNIVERSITIES OR INSTITUTE OF NATIONAL IMPORTANCE.

(To be issued by the organization where facility is being provided)

| 1. | Name of the Owner  | : |
|----|--|---|
| 2. | Name of the Company/Firm & Location  | : |
| 3. | Name of organization where catering services are provided                  | : |
| 4. | Name and contact No. of the person in the<br>Organization for verification | : |
| 5. | Date of award of contract  | : |
| 6. | Date of expiry of license/completion<br>of contract                        | : |

7. Performance Report

| a) | Quality of items / works   | : | Excellent / very Good / Good / Fair / Poor |
|----|--|---|--|
| b) | Resourcefulness  | : | Excellent / very Good / Good / Fair / Poor |
| c) | Interpersonal relationship   | : | Excellent / very Good / Good / Fair / Poor |
| d) | Punctuality Opening & Closing<br>of shop and Maintaining<br>service hours. | : | Excellent / very Good / Good / Fair / Poor |
| e) | Regularity in paying dues  | : | Excellent / very Good / Good / Fair / Poor |

Date: