

FOR OFFICE USE ONLY

CATEGORY	DESCRIPTION	VISITED BY & DATE	
		INTRODUCED BY	
		DATE OF REGISTRATION	
		DATE OF CONTINUOUS EVALUATION	

VENDORS REGISTRATION APPLICATION FORM (FOR NEW & EXISTING VENDORS)**1. GENERAL INFORMATION**

NAME OF THE COMPANY		
NAME OF THE COMPANY COLLABORATOR (IF ANY)		
MAIN PRODUCT		
ADDRESS	OFFICE	WORKS
CONTACT PERSON		
DESIGNATION		
PHONE NUMBER:	HANDHELD	
	LANDLINE	
	EXTENSION	
FASCIMILE NO.		
WEEKLY OFF.		

2. PROPOSED ITEMS'S FOR ENLISTMENT

SL NO	ITEM DESCRIPTION	CAPACITY / RANGE

3. WORKS DETAIL (if applicable)

AREA WORK				MODE OF WORK		
COVERED	OPEN	OWNERSHIP	RENTAL	LEASE	AV. SHOP LODING	MAX. VALUE OF SINGLE ORDER EXECUTED ANY GIVEN TIME

4. ORGANIZATION DETAIL

LEGAL ENTITY OF FIRM					NO. OF EMPLOYEES			NO. OF WORKERS		
PROP.	PARTNER	PRIVATE	LIMITED	LLP	MANAGERIAL	TECHNICAL	NON TECHNICAL	SKILLED	UNSKILLED	CONTRACT

5. QUALITY CONTROL

TESTING FACILITIES									
AVAILABLE	N.A	AVAILABLE	N.A	IN HOUSE			SUB CONTRACTED		

6. KEY PERSONNEL

NAME	POSITION	DEPT	SINCE (Enter date (dd-mm-yyyy))

7. ENCLOSURES (tick where applicable)

ORGANIZATION CHART	PRODUCT RANGE	PRODUCT CATALOG	Q.A.PLAN

I.S.O CERTIFICATES	LIST OF MACHINES	LIST OF ORDER / CLIENTS	DETAILS OF TEST FACILITIES

ENLISTMENT WITH PUBLIC SECTOR UNDERTAKINGS	ENLISTMENT WITH REPUTED COMPANIES

AUDITED ACCOUNTS FOR PREVIOUS THREE YEARS	ENLISTMENT WITH REPUTED COMPANIES

NOTE:

1. Use separate sheets, if required.
2. Enclose documentary evidences, where required.

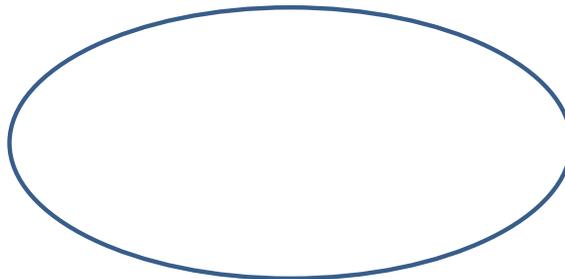
I / We, _____, the undersigned, is / are authorised by _____ to furnish the above particulars and / or information and hereby certify that the said information furnished is true to the best of our belief and understanding and we undertake full responsibility and indemnity to compensate in the event it is proved to be untrue.

Date: _____ Signature of authorised signatory: _____

Place: _____ Name of the person authorised to sign: _____

Designation of the person : _____

Affix rubber stamp / seal of the Company:



P.S: LPPL reserves an unconditional right to depute its representatives and / or authorised personnel to visit your establishment and / or premises at any time for verification etc