



**SPORTS AUTHORITY OF INDIA**  
**NATIONAL CENTER OF EXCELLENCE,**  
**SECTOR-6, ROHTAK**

Telephone: 8383059705 e-mail: sainbartk@gmail.com

**Vendor Registration Form**  
**(For Tenders up to Rs. 5.0 Lakh)**

**(A) Organization Profile**

1. Name of firm / Agency .....
2. Name of the Proprietor/Partner .....
3. Educational Qualification of Proprietor/Partner .....
4. Address of the firm .....
5. Telephone, Fax No. & Email ID .....
6. PAN Number (attach self-attested copy) .....
7. GST No (attach self-attested copy) .....
8. Attach copies of ITR for the preceding 3  
 AY - (2020-21, 2021-22, 2022-23) .....

9. Valid Establishment/Registration Certificate: (Attach self-attested copies)

10. Legal Structure: Type of Business entity (Check One):

- Corporation  Partnership Sole  Proprietorship  Joint Venture   
 Franchise  Non-Profit

11. Type of Business// Commodity Service: (Check One)

|  |                          |   |                                     |
|--|--------------------------|---|-------------------------------------|
| Retailer <input type="checkbox"/>                | Publication /Broadcaster | Manufacturer <input type="checkbox"/>           | Wholesaler <input type="checkbox"/> |
| Construction Contractor <input type="checkbox"/> | Professional Services    | Consultant <input type="checkbox"/>             | Other <input type="checkbox"/>      |
| Distribution / Dealer <input type="checkbox"/>   | Service Provider         | Freight/Transportation <input type="checkbox"/> |                                     |

12. Geographic Service Area: (Check One)

|                                |                                   |                                   |  |
|--------------------------------|-----------------------------------|-----------------------------------|--|
| Local <input type="checkbox"/> | Regional <input type="checkbox"/> | National <input type="checkbox"/> | International <input type="checkbox"/> |
| Please specify _____           |                                   |                                   |  |

13. Have You Previously Done Business with The National Center of Excellence of Rohtak, Haryana Punjab

Yes,  if yes, please specify the No. of Year/Months . . . . .

No

14. Short Details on Services or Goods Your Company Provides/Supplies:

15. Whether the company is under litigation/ arbitration cases during last 5 years: if yes, if attach details in separate Sheet.

Yes

No

16. Whether the Company has been blacklisted/ debarred from business in last 3 years. If yes, give the reasons thereof

Yes

No

**(B) FINANCIAL SOUNDNESS**

1. Annual Turnover and Profit/Loss in the past 3 years and average turnover should be above Rs. 10.0 Lakh (CA Certified Copy):

| Year   | 2020-2021 | 2021-2022 | 2022-2023 |
|--|-----------|-----------|-----------|
| Annual Sales/business excluding other income (Rs. Lakhs) |           |           |           |
| Profit Before Tax (PBT) (Rs. Lakhs)                      |           |           |           |

2. Bank Detail (for payment through RTGS// PFMS): -

- a. Account Number .....
- b. Name of Bank .....
- c. IFSC Number .....

2. Bank Solvency: Current year solvency certificate of 10% of average turnover of past 3 years of audited balance sheet as per Annexure-B. (Enclose attested copy by Nationalized Bank).

**(C) TECHNICAL COMPETENCY**

1. Details of supplies/works of similar nature executed during last three years:  
Copy of work order(s)/ Service Contract(s) executed during last Three years to be submitted along with the performance certificate issued, if any (Attach separate sheet if required).

| Sr. No. | Name Of The Work | Client's Name | Value Of The Work/ Contract | Date Of Starting | Actual date of completion of Work/ Delivery Date | Date Of Completion as Per Contract | Remarks |
|---------|------------------|---------------|-----------------------------|------------------|--|------------------------------------|---------|
| 1.      | -                | -             | -                           | -                | -  | -                                  | -       |

2. Manpower details:

|                  |   |      |
|------------------|---|------|
| Manpower details | Total Organization Strength                 | Nos. |
|                  | Resident Managers/Resident Engineers        | Nos. |
|                  | Site Engineers (Erection & Commissioning)   | Nos. |
|                  | Site Safety Coordinators / Site Supervisors | Nos. |
|                  | Skilled Manpower                            | Nos. |
|                  | Unskilled Manpower                          | Nos. |

3. Readiness for participation in e-tendering/ procurement:

Yes

No

**DECLARATION**

1. I accept that this registration is for works up to Rs. 5.0 lakhs only.
2. I shall abide by the terms and conditions as per the direction of Deputy Director (A) SAI, NCOE, Rohtak, Haryana
3. I, the undersigned, certify that to the best of my knowledge and belief, the above information is correct.
4. I understand that any misstatement or misrepresentation described herein may lead to my disqualification or dismissal.

Signature .....

Name .....

(Seal of Firm)

**FORMAT FOR SOLVENCY CERTIFICATE**  
**(To be issued by a Nationalized Schedule Bank only)**

Reference No. \_\_\_\_\_

Dated:

**TO WHOMSOEVER IT MAY CONCERN**

This is to certify that M/s. \_\_\_\_\_

having their office at \_\_\_\_\_ are a regular

customer of our bank. They are solvent to an extent of

Rs. \_\_\_\_\_ (Rupees \_\_\_\_\_ only).

The conduct of their Account is good.

It is certified that this certificate is issued without any risk and responsibility on the part of this Bank or any of it's officials in any respect whatsoever, more particularly either as guarantor or otherwise. This certificate is issued at the specific request of the customer.

**(Signature, Name & Designation of issuing  
authority with Seal)**