

**ANNEXURE AND ATTACHMENTS OF NIT APPLICATION**

**EMPANELMENT OF UPS REPAIR/MAINTENANCE OF (NON-OEM) UPS CONTRACTOR**

| S. No | Particular                                                                                                                                                                                                                                         | Annexure   | Attachment<br>(Supported documents along with annexure)                               | Mandatory |
|-------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------------------------------|-----------|
| 1.    | Empanelment Notice Application Form (Total 12 pages application)                                                                                                                                                                                   | Annexure-A |    | Yes       |
| 2.    | Name of the Firm ( Company/Proprietorship/Partnership/ LLP)                                                                                                                                                                                        |            |                                                                                       |           |
| 3.    | Name of contact person<br>Telephone No-<br>Mobile No-<br>Email ID-                                                                                                                                                                                 |            |                                                                                       |           |
| 4.    | Date, month & year of Establishment of the firm.<br>Establishment/ companies registration/<br>partnership deed                                                                                                                                     |            |    | Yes       |
| 5.    | Name of Directors/Partners/Proprietor                                                                                                                                                                                                              |            |                                                                                       |           |
| 6.    | Bio-data of Partners / Associates, Details may be given in the enclosed format                                                                                                                                                                     | Annexure-B |  | Yes       |
| 7     | Name and address of Banker                                                                                                                                                                                                                         |            |  | Yes       |
| 8     | Whether registered for sale tax purpose. If, so, mention TIN number and date<br><br>Details of GST registration:<br>(Copy of valid registration to be enclosed)<br><br>Details of PAN registration:<br>(Copy of valid registration to be enclosed) |            |  | Yes       |
| 9     | Whether an assesses of Income Tax. If so, mention PAN number. (Furnish copies of I.T. clearance                                                                                                                                                    |            |  | Yes       |

|    |                                                                                                                                                                                                                                                                                                                 |            |                                                                                       |     |
|----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------------------------------|-----|
|    | certificate) (Copy of valid registration to be attached)                                                                                                                                                                                                                                                        |            |                                                                                       |     |
| 10 | Whether registered for service tax. If so, mention service tax registration number & date (Copy of valid registration to be attached)                                                                                                                                                                           |            |    | Yes |
| 11 | Whether registration/obtention of license from Govt authorities e.g., labour deptt, ESIC, etc are in place:                                                                                                                                                                                                     |            |    | Yes |
| 12 | Detailed description of high value of three UPS repair/maintenance (NON-OEM) UPS works done during the last 7 years, as per the criteria given.<br><br><b>(i.e. name of organization, value of work done and date of completion)- copies of work orders, completion certificates must be enclosed</b>           | Annexure-C |    |     |
| 13 | Name & value of the major UPS repair/maintenance works of (NON-OEM) UPS in hand. Details may be given in the enclosed format                                                                                                                                                                                    | Annexure-D |  | Yes |
| 14 | Annual turnover for the last 3 years (Copy of audited certificate to be attached)                                                                                                                                                                                                                               |            |  | Yes |
| 15 | Details of features of green building provided in the buildings                                                                                                                                                                                                                                                 |            |                                                                                       |     |
| 16 | List of Technical Personnel employed & other Personnel employed                                                                                                                                                                                                                                                 | Annexure-E |                                                                                       | Yes |
| 17 | If, you are registered in the panel of other organizations/statutory bodies such as CPWD, PWD, MES, Banks etc., furnish their Names, category and date of registration Weather registered/ empaneled with Central Govt./State Govt./ Financial Institutions/ PSU's/Public Sector Banks/ Public limited (Listed) | Annexure-F |                                                                                       | Yes |

|    |                                                                                                                                                                                                                                                                                                                                                                                     |            |                                                                                       |     |
|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------------------------------|-----|
|    | company, furnish their names category and date of registration.                                                                                                                                                                                                                                                                                                                     |            |                                                                                       |     |
| 18 | Information relating to whether any litigation is pending before any Arbitrator for adjudication of any litigation or else any litigation was disposed during last 7 years by an arbitrator. If so, submit the details.                                                                                                                                                             | Annexure-G |                                                                                       | Yes |
| 19 | Furnish the names of -3- responsible persons along with their designation, address, contact no., etc., for whose organization, you have completed the above-mentioned jobs and who will be in a position to certify about the quality as well as performance of your organization (Annexure-F)                                                                                      | Annexure-H |    | Yes |
| 20 | Whether willing to work anywhere in the States of ..... and..... or mention places where you are willing to work.                                                                                                                                                                                                                                                                   |            |                                                                                       | Yes |
| 21 | Enclose copy of valid Electrical Contractor's License (applicable only for the firms/contractors applying for empanelment as electrical contractor) (Copy of valid electrical license to be attached), If contained/having in the name of firm                                                                                                                                      |            |  | Yes |
| 22 | Declaration regarding near relatives working in the State Bank of India                                                                                                                                                                                                                                                                                                             | Annexure-I |  | Yes |
| 23 | Declaration<br>I hereby confirm that all information, particulars, copies of certificates and testimonials in connection with my empanelment are correct and genuine. I am, therefore, liable to face appropriate actions as deemed fit by the Bank in the event of any of the information, particulars, copies of certificates and testimonials are not found correct and genuine. | Annexure-J |                                                                                       | Yes |

**EMPANELMENT OF UPS REPAIR/MAINTENANCE OF NON-OEM UPS CONTRACTOR FIRM-FORMAT FOR BIODATA OF PARTNERS/ASSOCIATES**

| S.No | Particulars                                                         | Data to be filled by UPS repair/maintenance contractor of (NON-OEM) UPS |
|------|---------------------------------------------------------------------|-------------------------------------------------------------------------|
| 1    | Name of Firm(company/proprietorship/partnership/LLP)                |                                                                         |
| 2    | Address                                                             |                                                                         |
| 3    | Name of Proprietor/Partners/Associates                              |                                                                         |
| 4    | Year of Establishment                                               |                                                                         |
| 5    | Name of contact person                                              |                                                                         |
| 6    | Contact number                                                      |                                                                         |
| 7    | Mobile number                                                       |                                                                         |
| 8    | Email id                                                            |                                                                         |
| 9    | Associates with the firm since:                                     |                                                                         |
| 10   | Date of Birth/ Age                                                  |                                                                         |
| 11   | Professional Qualifications:                                        |                                                                         |
| 12   | Professional Experience                                             |                                                                         |
| 13   | Professional Affiliation                                            |                                                                         |
| 14   | Membership in                                                       |                                                                         |
| 15   | Details of Published papers in Magazine:                            |                                                                         |
| 16   | Details of cost-effective methods/ designs adopted in the projects: |                                                                         |
| 17   | Exposure to new materials/ Techniques:                              |                                                                         |
| 18   | Details of Features of green buildings provided in the buildings:   |                                                                         |
| 19   | Details of modern amenities provided in the buildings.              |                                                                         |

Name & signed of Authorized Signatory

**ANNEXURE – C**

**EMPANELMENT OF UPS REPAIR/MAINTENANCE OF NON-OEM UPS CONTRACTOR/FIRM FORMAT FOR LIST OF WORK COMPLETED**

**LIST OF MAJOR WORKS COMPLETED IN CENTRAL GOVT./STATE GOVT./FINANCIAL INSTITUTIONS/PSUs/PUBLIC SECTOR BANKS/PUBLIC LIMITED(LISTED) COMPANY DURING LAST 7 YEARS (ENDING AS ON 30.06.2026 )**

(Enclose supporting documents i.e. Work order, Proof of payment, Satisfactory Completion Certificate Obtained from the Clients)

| S. No. | Name of the client & addresses & contact details | Nature of work | Features of green building and modern amenities provided | Location of the building/municipal limits | Estimated Value | Built up area in Sq.ft | Height of the building/other specification | Present Position | Date of Completion | Remarks |
|--------|--------------------------------------------------|----------------|----------------------------------------------------------|-------------------------------------------|-----------------|------------------------|--------------------------------------------|------------------|--------------------|---------|
|        |                                                  |                |                                                          |                                           |                 |                        |                                            |                  |                    |         |
|        |                                                  |                |                                                          |                                           |                 |                        |                                            |                  |                    |         |
|        |                                                  |                |                                                          |                                           |                 |                        |                                            |                  |                    |         |

*(Add separate sheet if required)*

Note:

1. Information has to be filled up specifically in this format.
2. Name & signed of Authorized Signatory

**EMPANELMENT OF UPS REPAIR/MAINTENANCE OF NON-OEM UPS CONTRACTOR/ FIRM FORMAT FOR LIST OF WORKS IN HAND****LIST OF MAJOR WORKS ON HAND IN CENTRAL GOVT./STATE GOVT./FINANCIAL INSTITUTIONS/PSUs/PUBLIC SECTOR BANKS/PUBLIC LIMITED(LISTED) COMPANY DURING LAST 7 YEARS (ENDING AS ON 30.06.2026)**

(Enclose Copies of Work Orders Issued by Clients)

| S. No. | Name of the client & address & contact details | Nature of work | Features of green building and modern amenities provided | Location of the building/ municipal limits | Estimated Value | Built area Sq.ft | up in | Height of the building/other specification | Date of start | Period of completion | Actual date of completion | Final value of the project | Reasons for the variation/delay if any. |
|--------|------------------------------------------------|----------------|----------------------------------------------------------|--------------------------------------------|-----------------|------------------|-------|--------------------------------------------|---------------|----------------------|---------------------------|----------------------------|-----------------------------------------|
|        |                                                |                |                                                          |                                            |                 |                  |       |                                            |               |                      |                           |                            |                                         |
|        |                                                |                |                                                          |                                            |                 |                  |       |                                            |               |                      |                           |                            |                                         |

*(Add separate sheet if required)*

Note:

1. Information has to be filled up specifically in this format.

Name & signed of Authorized Signatory

**ANNEXURE-E****DETAILS OF KEY PERSONNEL (PERMANENT EMPLOYEE) AND OTHER PERSONNEL EMPLOYED, GIVING DETAILS ABOUT THEIR TECHNICAL QUALIFICATION & EXPERIENCE INCLUDING THEIR IN-HOUSE ESTABLISHMENT**

| S. No. | Name | Qualification | Experience | Particulars<br>of Work<br>Done | Employed in<br>Your Firm<br>Since | Any Other<br>Informatio<br>n |
|--------|------|---------------|------------|--------------------------------|-----------------------------------|------------------------------|
|        |      |               |            |                                |                                   |                              |
|        |      |               |            |                                |                                   |                              |
|        |      |               |            |                                |                                   |                              |

*(Add separate sheet if required)*

Notes:

1. Information has to be filled up specifically in this format.
2. Indicate other points, if any, to show your technical competence to indicate any important point in your favour.
3. The details of the consultants (In-house / External) shall be furnished in separate sheets.

Name & signed of Authorized Signatory

**ANNEXURE-F****DETAILS OF REGISTRATION OR EMPANELMENT WITH OTHER ORGANIZATIONS**

| S.<br>No. | Name of firm | Name of company or<br>organization where<br>empanelled or registered | Contact Numbers of<br>that<br>company/organization | E-mail ID of that<br>company/organization |
|-----------|--------------|----------------------------------------------------------------------|----------------------------------------------------|-------------------------------------------|
|           |              |                                                                      |                                                    |                                           |
|           |              |                                                                      |                                                    |                                           |
|           |              |                                                                      |                                                    |                                           |

*(Add separate sheet if required)*

Notes:

1. Information has to be filled up specifically in this format.

Name & signed of Authorized Signatory

**DETAILS OF LITIGATION / ARBITRATION CASES RESULTING FROM THE CONTRACTS EXECUTED IN THE  
LAST SEVEN YEARS OR CURRENTLY UNDER EXECUTION**

| Year | Awarded for or<br>against Applicant | Name of Client | Cause of Litiga-<br>tion and Matter<br>of Dispute | Disputed Amount | Actual<br>Awarded<br>Amount |
|------|-------------------------------------|----------------|---------------------------------------------------|-----------------|-----------------------------|
|      |                                     |                |                                                   |                 |                             |
|      |                                     |                |                                                   |                 |                             |
|      |                                     |                |                                                   |                 |                             |

*(Add separate sheet if required)*

Notes:

1. Information has to be filled up specifically in this format.
2. Indicate other points, if any, to show your technical competence to indicate any important point in your favour.

Name & signed of Authorized Signatory

**ANNEXURE-H**

**DETAILS OF THREE RESPONSIBLE CLIENTS/PERSONS TO WHOM THE MAJOR WORKS CARRIED OUT BY THE APPLICANT**

| S.<br>No. | Name of the Official | Organization & Address | Contact Numbers | E-mail ID |
|-----------|----------------------|------------------------|-----------------|-----------|
|           |                      |                        |                 |           |
|           |                      |                        |                 |           |
|           |                      |                        |                 |           |

*(Add separate sheet if required)*

Notes:

2. Information has to be filled up specifically in this format.
3. Indicate other points, if any, to show your technical competence to indicate any important point in your favour.

Name & signed of Authorized Signatory

**ANNEXURE-I**

**DECLARATION REGARDING NEAR RELATIVES WORKING IN THE STATE BANK OF INDIA**

| Name of Bank Staff Related to Applicant | Designation | Office/Branch & Place of Posting | Relation with the Applicant |
|-----------------------------------------|-------------|----------------------------------|-----------------------------|
|                                         |             |                                  |                             |
|                                         |             |                                  |                             |
|                                         |             |                                  |                             |

*(Add separate sheet if required)*

Notes:

1. Information has to be filled up specifically in this format.
2. Indicate other points, if any, to show your technical competence to indicate any important point in your favour.

Name & signed of Authorized Signatory

**DECLARATION**

1. All the information furnished by me/us here above is correct to the best of my knowledge and belief.
2. I/We have no objection if enquiries are made about the work listed by me/ us in the accompanying sheets/ annexures.
3. I/We agree that the decision of Bank in selection of Architect will be final and binding to me/ us
4. I/We hereby confirm that our firm/agency/company has not been disqualified / debarred / blacklisted by any Governments, Semi-governments, PSUs, Banks including any of the Offices/Branch of State Bank of India Pan India during last 7 year from the date of application.
5. I hereby confirm that all information, particulars, copies of certificates & testimonials in connection with my empanelment are correct and genuine. I am, therefore, liable to face appropriate actions as deemed fit by the Bank in the event of any of the information, particulars, copies of certificates and testimonials are not found correct and genuine.
6. The SBI reserves the right to accept or reject any or all the applications without assigning any reason thereof and no correspondence will be entertained in this regard.

Place:

Name & signed of Authorized Signatory

Date:

### CHECK LIST

| SR.<br>NO. | PARTICULARS                                                   | SUBMITTED (Y or N) |
|------------|---------------------------------------------------------------|--------------------|
| 1          | Application Form (All pages filled in,<br>signed and stamped) |                    |
| 2          | Enclosure A                                                   |                    |
| 3          | Enclosure B                                                   |                    |
| 4          | Enclosure C                                                   |                    |
| 5          | Enclosure D                                                   |                    |
| 6          | Enclosure E                                                   |                    |
| 7          | Enclosure F                                                   |                    |
| 8          | Enclosure G                                                   |                    |
| 9          | Enclosure H                                                   |                    |
| 10         | Enclosure I                                                   |                    |
| 11         | Enclosure J                                                   |                    |