

ANNEXURE AND ATTACHMENTS OF NIT APPLICATION
EMPANELMENT OF CIVIL REPAIR CONTRACTOR

S. No	Particular	Annexure	Attachment (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 Telephone No- Mobile No- Email ID-			
4.	Date, month & year of Establishment of the firm. Establishment/ companies registration/ partnership deed			Yes
5.	Name of Directors/Partners/Proprietor			
6.	Biodata 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 Details of GST registration: (Copy of valid registration to be enclosed) Details of PAN registration: (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 certificate)			Yes

	(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 Civil works done during the last 7 years, as per the criteria given. (i.e., Name of organization, value of work done and date of completion)- copies of work orders, completion certificates must be enclosed	Annexure-C		
13	Name & value of the major Civil works 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 Whether registered/ empaneled with Central Govt./State Govt./ Financial Institutions/ PSU's/Public Sector Banks/ Public limited (Listed) company, furnish their names category and date of registration.	Annexure-F		Yes

18	In formation 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 able 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	Declaration regarding near relatives working in the State Bank of India	Annexure-I		Yes
22	Declaration 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

ANNEXURE-B**EMPANELMENT OF CIVIL REPAIR CONTRACTOR FIRM-FORMAT FOR BIODATA OF PARTNERS/ASSOCIATES**

S.No	Particulars	Data to be filled by Civil Contractor
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 CIVIL REPAIR 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 & address & 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 must be filled up specifically in this format.
2. Name & signed of Authorized Signatory

ANNEXURE-D

EMPANELMENT OF CIVIL REPAIR CONTRACTOR FIRM FORMAT FOR LIST OF WORKS IN HAND

**LIST OF MAJOR WORKS ON HAND IN CENTRAL GOVT./STATE GOVT./FINANCIAL INSTITU-
TIONS/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 & addre ss & contac t details	Nature of work	Features of green building and modern amenities provided	Location of the building/ municipa l limits	Estimat ed Value	Built area Sq.ft up in	Height of the building/o ther specificat ion	Date of start	Period of comple tion	Actual date of compl etion	Final value of the proje ct	Reas ons for the vari ation/d elay if any.

(Add separate sheet if required)

Note:

1. Information must 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 of Work Done	Employed in Your Firm Since	Any Other Information

(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. No.	Name of firm	Name of company or organization where empaneled or registered	Contact Numbers of that company/organization	E-mail ID of that company/organization

(Add separate sheet if required)

Notes:

1. Information must 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 against Applicant	Name of Client	Cause of Litiga- tion and Matter of Dispute	Disputed Amount	Actual Awarded Amount

(Add separate sheet if required)

Notes:

1. Information must 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. No.	Name of the Official	Organization & Address	Contact Numbers	E-mail ID

(Add separate sheet if required)

Notes:

2. Information must 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 must 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. NO.	PARTICULARS	SUBMITTED (Y or N)
1	Application Form (All pages filled in, 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	