NAINI AEROSPACE LIMITED NAINI, PRAYAGRAJ

ANNEXURE-7

Commercial Department

Application for Registration as Approved Supplier (Indian Suppliers)

Ref: (Office Use Only)

Complete all sections of the form, sign the declaration and send the completed form and attachments in an envelope marked 'Application for Registration as Approved Supplier':

Commercial Head Naini Aerospace Limited UPSIDC Industrial Area

PO: TSL, Naini, Allahabad- 211 010

The columns in this form may be filled up. No column should be left blank. If applicant has no information to

give in a particular column, "Nil" may be mentioned. In case, information not relevant in your case, please indicate "Not Applicable" in such column

Registration Category	o Original Ed	uipment Manufacturer (OEM)	
	o Stockist/Di	• • •	
	1	e Industry (MSE)	
	o Public Sec	or Unit	
	o Govt. Dept	t.	
	 Consortiur 	n / State/ Govt. Agencies	
	o Others (Ple	ease mention)	
Name of the Individual/ Firm/			
Company:			
Constitution or Legal status			
Registration Number	Registering	Date of	
	Authority	Registration	
Registered Office Address			
Email ID			
URL			

	Address of Factory					
	Senior Most Executive Name : Designation :					
	Contact / Dealing Person Name : Designation :					
	Address for Correspondence:					
	Tel. No.			Fax No.		
- 1	Mobile No (Contact / Dealing person)			Email ID :		
	Section 2: Applicant pro	ofile				
	2.1 Type of	Ownership	:			
	Individual / Proprietary		Partnership		Lt	td. Company (Pvt./ Public)
	PSU/ Govt. Undertaking		Research Ins	titute	Т	rust
	Joint Venture or other t Management (Please spe					_
	Other, please specify					
•	•	nent/ Cer	tificate of	incorporation,	•	/Articles & Memorandum of cate of Registration etc as
	2.2(a) Are you a Sn	nall Scale Ir	ndustry regis	tered with th	e N.S.I.C?	Yes / No
	If yes, please enclose cop	oy of NSIC (Competency,	Capacity cer	tificate. (k	o) Do you have
	ISO 9001-2015 /QMS Certification etc?	rtification (AS 9100 D)/I	SO 14001		Yes / No
	If yes, please specify & in	ndicate vali	dity:			
(c)	In case of certification by	other accre	dited institu	tions, please	give detai	ls:
	Institution		Type of Cert	ification		Valid up to (date)
			I			į

PSUs/ Central/State Govt	. /Major Private Institution	s/ Others(S	specify):	
Company	Registration Number	Dated	Validity	Class/ Type of Registration

(d) Give details of registration, if any, with HAL or its Divisions (Specify Division)/ GEM/

Company	Registration Number	Dated	Validity	Registration
Attach necessary certific	cates from the registering	authorities.		

2.3 Give the floor area of your factory and Offices. If you own more than one factory, please give separate details for each unit:

Location	Area in
	Square Meters

2.4 Give a list of your major products / services, you intend to offer as a supplier:

SI. No.	Major Products / Services	Are you Original Equipment Manufacturer for listed product
		Yes / No

Please enclose your Company/ Product Catalogues (In case of Stockist /Distributor please enclose relevant authorization from respective OEM/ Manufacturer /Principals)

.5	Give a List of yo	our major Customers		
SI. No.	Customer's Name	& Address		Serial No. of the Product/ Service (from para 2.3) provided to the Customer
ease atta	ach Proof in the for	m of Purchase Order co	pies/ Invoice etc.	
wer of <i>i</i>		of Owners/ Partners/Proble, in the format detai	omoters and Directors/ Corled below:	mpany Secretary/ Holde
and	•	Partners/ Promoters any Secretary/ Holder	Relationship of the person with the firm	
7 usts	List the names	& addresses of all asso	ciated, subsidiary & holding	companies, including
	npany Name	Address	Nature of Business	Relationship with Applicant
	Financial details nnual Turnover in th	ne past 3 years:		
Yeo	ır			
	rn-over			
nnuai Tu Rs. Lakhs	5)			

Attach the audited Balance sheet and Profit & Loss Account the above.

3.2 <u>IMPORTANT NOTE – Financial Assessment:</u>

Before the assessment of this application can be completed, a representative from NAeL may contact you concerning the financial and technical information that you provide. Your co-operation is required to assist in the assessment process. Failure to co-operate may affect registration

The assessment report is specifically for use by NAeL for the purpose of assessing Suppliers for registration and will be treated as strictly confidential.

3.3 Bank(s) details:

Will you authorise your Bank/s to provide information to NAeL with a reference as to your financial position, if required?

YES / NO

Name of Bank **Branch Name** Designation of Contact

Person: Address:

Tel No:

3.4 Details of Income assessed, as per clearance Certificate, in the last 3 years:

No:				
Service	e registration No:			
(Copie	s of registration certi	icate shall be attached)		
Details	s of assessed, as per c	earance Certificate, in the	last 3 years:	
<u> </u>	/EAR			
	Amount Assessed (Rs. .akhs)			
ķ	Amount paid/ payable Rs. Lakhs)			

Attach copies of Clearance Certificates for the past 3 years.

/Service Details:

Central Registration No:..... State registration

3.5

In the last 3 years, has your firm, or any firm with which any of your company's owners, officers or partners were associated, been debarred, disqualified, removed, business dealings banned or otherwise prevented from bidding ? YES / NO

If yes, State the reference to Customer and their orders and the basis for the action.

5 Please provide any additional information, which will help you in securing registration with NAeL

6 DECLARATION:

(This declaration should be completed by Proprietor/ Partner/ Director or other Senior Manager who has the authority to do so.) I/We declare and confirm that –

- a. The NAeL Conditions of Registration are acceptable.
- b. All information and attachments submitted in this application are true and correct.
- c. I/We are aware that any false information provided herein will result in the rejection of my application and cancellation of any registrations granted.
- d. I/We shall be bound by the acts of duly constituted attorney who has signed this application and of any other person who in future shall be appointed by us in his place to carry on business of the concern whether or not an intimation of such changes is given to NAeL
- e. I / We have read and understood NAeL's General Conditions of Contract and agree to abide by the same in all respects,
- f. I/We undertake to communicate promptly to NAeL L any changes in condition or working of the firm.

Signed:	Name:			
Position:	Date:			
	ding the Power of Attorney) y of Power of Attorney)		1	
Name	Tel. No	Mobile No	Position	Fax No. (Fax
No				

Official Seal

Note: Vendor is requested to get e-registered online at NAeL E-Portal.

CHECK LIST FOR FILLING UP THE VENDOR REGISTRATION FORM

SL NC	Details Required as per Form	Proof Required	Yes/N	lo
1	Company Registration/ Address:	(As applicable to your company)	[]
a.	For Proprietary firm - where firm	Notary certified affidavit for Proof of	[]
	registration is not mandatory	Company address		
b.	For Partnership firm - where firm registration is not mandatory	Copy of Registration with Registrar of Firm (In case of Partnership Firm)	[]
		Partnership Deed	[]
		Notary certified affidavit for Proof of	[]
		Company address		
c.	For companies registered under	Memorandum of Association	ſ]
	Company Act 1956	Certificate of Incorporation]]
		Certificate of Registration]]
2	Income registration	PAN	1	1
3	Registration Category	If Stockiest / Distributor - Authorized]	1
		Distributor Certificate / Copy of Agreement with	'	•
		Principal/ OEM.		
4	Registration with MSEs	Relevant . Certificate	[]
5	Quality Certification	ISO Certificate/ Any Other Certificate	[]
6	Registration with other	Registration Certificate	[]
	Divisions/ Organizations			
7	List of Major Products/ Services	Product Catalog/ Service Catalog	[]
8	List of Major Customers	Past Purchase Orders Copy	[]
		Any other proof]	j
9	Annual Turnover	Audited Balance Sheet of FY last three	ſ	1
	(of Past 3 yrs)	years	-	-
		Audited Profit / Loss A/C of FY last three] [1
		years		•
10	Bank(s) Details	ECS Format duly certified by Bank	[]
	(In enclosed ECS format)	, , , , , , , , , , , , , , , , , , , ,	'	•
11	Income Assessed	Copy of ITR Acknowledgment for AY last	[1
	(of Past 3 yrs)	03 years.	'	•
12	Details	Copy of Registration under	[1
	TIN / GST	TIN / GST	'	,
	,	(As applicable to your company)		
13	Details & Mandatory document upload	ded on NAeL e-proc portal for 'e-Registration'	ſ	1
		nts as above, tick mark and send back along with form.	"	

No.		Dated:	
То	,		
	Sub: Ver	ndor Registration	
Dear Sir,		-	
2.	We are pleased to inform you that contractor/ service provider as per details	t M/shave been registered as approve	ed
1	Vendor Code		
2	Date of Registration		
3	Validity of Registration	years	
4	Registration category	OEM/ Authorized distributor/ Stockiest	
5	Registration granted for	Stores/ Services	
6	Category of Stores/ services for which registered		

- 3. Your registration at NAeL will be governed by company rules, directives etc. for Vendor Registration.
- 4. This registration will be renewed after the validity period at the discretion of NAeL Division.
- 5. Please note that this registration does not guarantee your firm/company, award of any/all the orders/contracts or inclusion on a particular tender list. Further, this registration shall not be a binding on NAeL to float the enquiries only to the registered vendors.
- 6. You are required to keep confidential all trade / business / technical information etc. received from NAeL .
- 7. You will not resort to any publicity / advertisement of registration with NAeL, without prior permission of NAeL.
- 8. NAeL reserves the right to remove your firm/company's name from registered list at any time any of the following grounds / or will render registration in valid :
- a) Failing or neglecting to quote in response to invitation to tender on ten successive occasions.
- b) Failing to abide by the agreed terms & conditions of signed contract/ order
- c) Failure to execute the contracts/orders to NAeL's satisfaction. d) Making a false declaration to NAeL.
- e) Failing to meet quality services

- f) Scoring a vendor rating of less than 50 consecutively for over last 03 years g) The firm is declared bankrupt or insolvent
- h) In the opinion of the NAeL , retention of firm's name in registered list is not in public interest.
- i) Any other reason, which might disable your firm from satisfactorily performing the execution of likely contracts
- j) Using corrupt or unfair means to gain advantage
- 9. Any of the following will also render registration in valid:
- a) In case, it comes to our notice that you have rendered of false information / Misrepresentation/suppression/distortion of facts in the application for registration/ at time of assessment, it will result in cancellation of your registration and NAeL Company shall reserve the right to take suitable action.
- b) Any other ground, which in the opinion of NAeL renders the retention of the registration undesirable in the interest of the Company.
- 10. You will be responsible for informing NAeL company immediately (within 30 days) in case of any change in information furnished by you for the registration.

Please acknowledge the receipt.

Yours faithfully,
For Naini Aerospace Ltd.,

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Vendor Registration Cell

Commercial Department

Application for Registration as Approved Supplier (Foreign Suppliers - Manufacturer)

Ref: (Office Use Only)

1	Name of the Firm	
2	Parent Company	
3	Address City	
	State & Zip Code	
	Country	
 4	Contact Name	
 5	Phone	
 6	Fax	
 7	E-mail	
 8	Web site	
9	Category	 Original Equipment Manufacturer (OEM) Consortiums/ State/ Govt. Agencies Others
10	Company Type	 Limited Company Partnership Individual Educational or Research Institute Trust Others
 11	Capital Employed	
12	Annual	
13	Quality Certifications/ Accreditation	
 14	Employees (Total)	

15	Products / Services			
16	Major Customers			
17	Address of Liaison Office/Branch office/ subsidiary in India if any with details of necessary clearance from RBI			
18.	Details of authorised Stockist/ Distributor/ Service Centers if any to Manage NAeL supplies			
19	Company's Catalogue/	Brochure enclosed.	Yes	No
Date		Name		
		Position		

Note: Vendor is requested to get e-registered online at NAeLE-portal.

COMMERCIAL DEPARTMENT Application for Registration as Approved Supplier (Foreign Suppliers stockiest /Distributor)

Ref: (Office Use Only)

1	Name of the Firm	
2	Name of OEM(s)	
	represented by the	
	firm	
3	Address for	
	communication	
	Communication	
	City	
	State & Zip Code	
	Country	
4	Contact Name	
. 1	Contact Name	
_	51	
5	Phone	
6	Fax	
7	E-mail	
7A	Address of	
7A		
7A	Registered office with	
7A		
7A	Registered office with proof thereof	
7A	Registered office with proof thereof (Certified copy of	
7A	Registered office with proof thereof (Certified copy of Charter,	
7A	Registered office with proof thereof (Certified copy of Charter, Memorandum of	
7A	Registered office with proof thereof (Certified copy of Charter, Memorandum of Association and	
7A	Registered office with proof thereof (Certified copy of Charter, Memorandum of Association and Articles of association,	
7A	Registered office with proof thereof (Certified copy of Charter, Memorandum of Association and Articles of association, Income tax, sales Tax	
7A	Registered office with proof thereof (Certified copy of Charter, Memorandum of Association and Articles of association, Income tax, sales Tax registration as per law	
7A	Registered office with proof thereof (Certified copy of Charter, Memorandum of Association and Articles of association, Income tax, sales Tax registration as per law of country of	
7A	Registered office with proof thereof (Certified copy of Charter, Memorandum of Association and Articles of association, Income tax, sales Tax registration as per law of country of registration and	
7A	Registered office with proof thereof (Certified copy of Charter, Memorandum of Association and Articles of association, Income tax, sales Tax registration as per law of country of registration and Country of Business	
7A	Registered office with proof thereof (Certified copy of Charter, Memorandum of Association and Articles of association, Income tax, sales Tax registration as per law of country of registration and Country of Business operation if different	
7A	Registered office with proof thereof (Certified copy of Charter, Memorandum of Association and Articles of association, Income tax, sales Tax registration as per law of country of registration and Country of Business operation if different from country of	
7A	Registered office with proof thereof (Certified copy of Charter, Memorandum of Association and Articles of association, Income tax, sales Tax registration as per law of country of registration and Country of Business operation if different	
7A	Registered office with proof thereof (Certified copy of Charter, Memorandum of Association and Articles of association, Income tax, sales Tax registration as per law of country of registration and Country of Business operation if different from country of registration to be	
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7A	Registered office with proof thereof (Certified copy of Charter, Memorandum of Association and Articles of association, Income tax, sales Tax registration as per law of country of registration and Country of Business operation if different from country of registration to be	

8	Document proof of for stockiest/				
	distributor				
9	Web site				
10	Category	Stockiest			
		P I rust 2 Educational or Research Institute 22 2 Partnership			
11	Company Type	P Limited Company P Individual			
12	Capital Employed				
13	Annual Sales				
14	Equipment				
15	Facilities (sq. mtr)				
16	Quality Certifications/ Accreditation				
17	Employees (Total)				
19	Key Sector				
20	Products / Services				
21	Major Customers				
22	Company's Catalogue/	Brochure enclosed. Yes No			
ate					
	Name				
		Position			
ompany	,'				

Note: Vendor is requested to get e-registered on line at NAeL E-Portal.

CHECK LIST FOR FOREIGN VENDORS/ STOCKIEST/DISTRIBUTORS

SI.No	Details Required	Proof Required	Yes/	No
1		A certified copy of the charter, statutes, or Memorandum and Articles of the company or other instrument constituting or defining the constitution of the company; and if the instrument is not in the English language, a certified translation thereof	[]
2	Full address of Registered office of the company/ firm & proof thereof	Notary certified affidavit for Proof of Company address	[]
3		If Stockiest / Distributor - Authorized Distributor Certificate / Copy of Agreement with Principal/ OEM.	[]
4	GST Registration as per law of the country of registration	Copy of GST Registration	[]
5	Income Registration as per law of the country of registration	Copy of Income Registration	[]
6	Certification from reputed Accreditation agencies	Certificate of accreditation	[]
7	Major customers list	Past Purchase Orders or any other suitable document	[]
8	Product Details	Product catalogs/ Brochures	[]
9	Annual	Audited Balance Sheet of FY Last 03 years	[]
10	Any other important detail		[]
	Remarks	Kindly provide all current documents as above, tide and send back along with form.	ck m	ark

Note - In case of distributors of foreign OEMs located in foreign country, NAeL reserves the right to take up the matter of verifying your credentials (with Indian Embassy abroad or any other agency as deemed suitable.