Advanced Centre For Treatment, Research And Education In Cancer. (ACTREC)

Kharghar Node, Navi Mumbai – 410210

A GRANT-IN-AID INSTITUTE UNDER DEPARTMENT OF ATOMIC ENERGY, GOVERNMENT OF INDIA

### Form "A" & "B" Financial Information & Bank Solvency

NIT.: NIT No. : TMC/ACTREC/ENGG/SPM/LT-97/Ramp Work/2022.

NAME OF WORK:- Ramp work near patient waiting area and Union office at ACTREC

S. NO	PARTICULARS				REMARKS
I	Name of the Agency				
1	BELOW GIVEN DOCUMENTS TO BE SCANNED AND UPLOADED IN THE WEBSITE  www.eprocure.gov.in/eprocure/app WITHIN THE PERIOD OF SUBMISSION  Financial Turn Over Certified by CA	Gross turnover Amount in lakh	Profit/ Loss Amount in lakh	Certified by Chartered Accountant	SCAN COPY ATTACHED "YES" OR "NO"
	2017-2018				
	2018-2019				
	2019-2020				
2	Latest Bank Solvency Certificate.				
3	Financial Arrangements for carrying out the proposed work				

## SOURCE OF THE PARTY OF THE PART

#### TATA MEMORIAL CENTRE

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FORM C: Details of all similar works completed in all respect during the last seven years ending previous day of last date of submission of tenders. (Starting with latest work)

NIT.: NIT No.: TMC/ACTREC/ENGG/SPM/LT-97/Ramp Work/2022.

Name	of work:- Ram	p work nea	r patient wai	ting area and l	Jnion offic	e at ACTR	EC		
	l								İ
S. NO	Name of the	Owner or	Cost of work	Date of	Stipulated	Actual date	Litigation/	Name &	REMARKS
	work/ Project	sponsoring	Rupees (in	commencement	date of	of	arbritation		
	and location	organisation	lakhs)	as per contract	Completion	completion	pending/	/ Phone	
				-			in	Nos of the	
							progress	officers to	
							(with	whom	
							details)	reference	
								can be	
								made.	
1	2	3	4	5	6	7	8	9	10
Name									
of the									
Agency									
1									
2									
3									
4									
5									
6									

<sup>\*</sup> Indicate gross amount claimed and amount awarded by the Arbitrator if any.

#### Notes:-

- The agency may submit separate form for giving details of work (completed) for each year to fill up the details as above.
   Separate sheets if any shall be numbered in sequence.
- ii) The scanned copies of the work orders for each work be uploaded . BOQ shall be furnished at a later date on request.
- iii) Certified that the above list of works is complete and no work has been left-out and the information given is correct to my knowledge and belief.
- iv) The hard copy all similar works completed during last seven years ending previous day of last date of submission of tenders. shall also be submitted on or before due date.

NOTE: THE AGENCY MUST FILL UP ALL THE SHEETS VIZ.FORM A AND B, FORM C,

FORM D, FORM E, FORM F, FORM G, FORM H, FORM I & FORM J

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## FORM D : Details of all works of any nature under execution or awarded **shall be left out)**.

(No work

#### NIT.: NIT No.: TMC/ACTREC/ENGG/SPM/LT-97/Ramp Work/2022.

Name (	of work:- Ramp work near	patient waitir	ng area ar	nd Union	office at A	CTREC			
S. NO	Name of the work/ Project and location	Owner or sponsering organisation	Cost of work Rupees (in lakhs)	Date of commence ment as per contract	Stipulated date of Completion		progress,	Name & addresses/Phone Nos of the officers to whom reference can be made.	REMARKS
1	2	3	4	5	6	7	8	9	10
Name of the Agency									
1									
2									
3									
4									
5 6									
7									
8									

#### Note:

- i. The agency may submit separate form for giving details of each project (in progress/awarded) and fill up the details as above. Separate sheets if any shall be numbered in sequence.
- ii. The scanned copies of the work orders for each work be uploaded. BOQ shall be furnished at a later date on request.
- iii. Certified that the above list of works is complete and no work has been left-out and the information given is correct to my knowledge and belief
- iv. The hard copy all works of any nature in hand and awarded shall also be submitted on or before due date. No works shall be left out



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## FORM E: Performance Reports of Works (Separate certificates for each work) NTT. NIT No. 1 TMC/ACTERIC/BING/RPM/1-07/Ramp Work/2022. Name of work: Ramp work near patient waiting area and Union office at ACTREC

Name of the Agency																	
S. NO	Name of the Work/ Project & Location	Agreement No.	Estimated Cost	Tendered Cost	Date of start	Date of completion		Amount of compensation reduced		educed						REMARKS	
						(i) Stipulated date of Completion	Date of Completion	(iii) Present position of the work, if in progress.	levied for delayed completion, if any.		Quality	(2) Financial soundness	Technical	Resourcef	(5) General behaviour	(6) Time consciouness	
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	



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NIT.: NIT No.: TMC/ACTREC/ENGG/SPM/LT-97/Ramp Work/2022.

Nan	ne of work:- Ramp work near patient waiting	area and	I Union office at A	ACTREC
1		]		
	FORM F: STRU	CTLID	E AND OPGA	NISATION
	TORWIT. OTKO	CIOK	L AND ONOA	MIOATION
1	Name & Postal Address of the applicant:			
2	Telephone No./Telex No./Fax No.			
3	Legal status of the applicant (Please tick and attach attested			
	copies of original document defining the legal status)			
	(a) An individual; (b) A proprietary firm; (c) A firm in partnership			
	(d) A limited company or Corporation			
4	Particulars of registration with various Government bodies	SI.No.	Dept/Organisation	Registration No.
	(scanned & uploaded photocopy)		&Place of	-
			registration	
5	Names and Titles of Director & Officers with designation			
3	proposed to be concerned with this work			
6	Designation of individuals authorised to act for the organisation			
	W II I I I I I I			
7	Was the agency ever required to suspend construction for a period of more than six months continuously after you			
	commenced the construction? If so, give the name of the			
	project and reasons of suspension of work.			
8	Has the agency or any constituent partner in case of partnership firm, ever abandoned the awarded work before its			
	completion? If so, give name of the project and reasons for			
	abandonment.			
9	Has the agency, or any constituent partner in case of			
	partnership firm, ever been debarred / black listed for tendering in any organisation at any time? If so give details.			
	in any organisation at any time? It so give details.			
10	Has the agency, or any constituent partner in case of			
	partnership firm, ever been convicted by a court of law? If so,			
11	give details.  In which fields of Engineering construction the applicant has			
Ľ	specialisation and interest?			
12	Any other information considered necessary but not included			
I	above.			

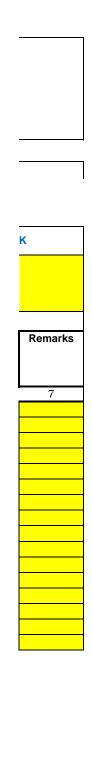
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#### NIT.: NIT No.: TMC/ACTREC/ENGG/SPM/LT-97/Ramp Work/2022.

NAME C	F WORK:- Ramp work nea	r patient waiting ar	ea and Union of	fice at ACTREC	_						
	Form "G"- DETAILS OF T	ECHNICAL & ADMI	NISTRATIVE PER	SONNEL TO BE EMPLOY	ED FOR THIS WOR						
Name of the Agency											
0:: 11:	Name -	I Basinanian	Louississis	In							
Sr. No	Name	Designation	Qualifications	Professional experience and details of work carried out	be involved in this work						
1	2	3	4	5	6						
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											



# TO SECOND 
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#### NIT.: NIT No.: TMC/ACTREC/ENGG/SPM/LT-97/Ramp Work/2022.

NAME	OF WORK:-R	amp w	ork near	patie	ent waitir	ng area a	and Un	ion office	e at ACT	REC
Form	H- DETAILS OF	CONST	RUCTION	I PLAN	NT AND EC		T LIKEL	Y TO BE	USED IN	CARRYI
Name of the										
Agency										
Sr. No	Name of Equipment/ Plant		Capacity		Condition		Current Location			
						Presently owned	Leased	To be purchased	Proposed to be hired	
1	2	3	4	5	6	7	8	9	10	11
1										
2										
3										
4										
5			1							
6										
7										
9	1	1	1	I	1	1		1	1	

NOTE: THE AGENCY MUST FILL UP ALL THE SHEETS VIZ.FORM A AND B, FORM C,

FORM D, FORM E, FORM F, FORM G & FORM H.

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