

IMM Department

Application for Registration as Approved Supplier for Goods and Services (for Vendors based in India)

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':

Head of IMM Department

Hindustan Aeronautics Limited

.....Division

(Vendor is requested to preferably apply for 'Registration as Approved/Empanelled Supplier' through HAL e-Procurement Portal - <https://eproc.hal-india.co.in>)

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

Section 1: Applicant Particulars

Registration Category: <i>(Tick the correct category and strike out which is not applicable in the selected category)</i>	<input type="checkbox"/>	Original Equipment Manufacturer (OEM)/ Licensor			
	<input type="checkbox"/>	Stockist/ Distributor/ Dealer/ Trader			
	<input type="checkbox"/>	Partner/ India Sales Office/ Subsidiary of Registered Foreign Supplier			
	<input type="checkbox"/>	Service Provider			
	<input type="checkbox"/>	Others (Please mention			
Name of the Individual/ Firm/ Company:					
Constitution or Legal status:					
Registration Number:		Registering Authority		Date of Registration	
Type of Enterprise: <i>(strike out which is not applicable)</i>	Large/ Medium/ Small/ Micro	Whether Registered on GeM		Yes/ No	
		If yes, GeM Seller ID			
Year of commencement of Business:		PAN		GSTIN	
Registered Office Address:					
	City		State	PIN	
Primary Email ID:			Tel. No. (with STD Code)		
Primary Mobile no.:			Fax No.		

Company Website/ URL	
Address of Factory [§] :	
Address for Correspondence [§] : Telephone no.:	
Senior Most Executive Name: Designation: Email ID: Mobile No.:	
Contact/ Dealing Person Name: Designation: Email ID: Mobile No.:	

§ If not same as Registered Office Address.

Section 2: Applicant profile

2.1 Type of Ownership:

<input type="checkbox"/>	Individual/ Single person/ Proprietorship	<input type="checkbox"/>	Partnership	<input type="checkbox"/>	Limited Liability Partnership
<input type="checkbox"/>	Public Limited Company	<input type="checkbox"/>	Private Limited Company	<input type="checkbox"/>	Research Institute
<input type="checkbox"/>	PSU/ Govt. of India Undertaking/ State Govt. Undertaking	<input type="checkbox"/>		<input type="checkbox"/>	Registered Co-Operative Society
<input type="checkbox"/>	Joint Venture or other tie-up for technology, equipment, financial backing and/or Project Management (Please specify.....)				
<input type="checkbox"/>	Other, please specify				

Note: Enclose copies of Income Tax Return (in case of individual) Partnership Deed/ Articles & Memorandum of Association/ JV Agreement/ Certificate of Incorporation/ Certificate of Registration etc. as applicable, duly certified by Chartered Accountant.

2.2 (a) Are you a Medium, Small or Micro Enterprise (MSME) - Yes /No

If yes, please enclose copy of certificate.

- i) Enterprise owned by (please tick which is applicable) - General/ Woman/ SC/ST
- ii) Udyam Registration Number (URN) -
- iii) Whether Registered on TReDS - Yes/No

(b) **Certifications:**

Type of Certification	Accredited Institution	Standard	Valid up to (date)
Quality Management			
Environment Management			
Operational Health & Safety Assessment			
Social Accountability			

(c) Give details of registration, if any, with HAL or its Divisions (Specify Division)/GeM/PSUs/ Central/State Govt./ Major Private Institutions/ Others (Specify):

Company	Registration Number	Dated	Validity	Class/ Type of Registration

Note: Attach necessary certificates from the registering authorities.

(d) Do you have License form Drug Controller – Yes/No.

If Yes, Indicate License Number

and Validity

(Applicable only in case of applications pertaining to registration of Drugs/ Medical Equipment suppliers).

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:

Factory or Office	Location	Area in Square Meters

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

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

*Please enclose your Company/ Product Catalogues.

(In case of Stockist/ Distributor please enclose relevant authorization from respective OEM/ Manufacturer/ Principals)

B. Please refer Material Categorisation chart as per **Annexure - 1** and mention the material category/ies, under which you intend to register with HAL:

Material Group	Material Category	Material Sub-Categories

Note: In case of “Others” – please mention the products description.

2.5 Give a List of your major Customers

Sl.No.	Customer's Name & Address	Serial No. of the Product/ Service (from para 2.4 above) provided to the Customer

Note: Please attach Proof in the form of Purchase Order copies/ Invoice etc.

2.6 List the names of Owners/ Partners/Promoters and Directors/ Company Secretary/ Holder of Power of Attorney, as applicable, in the format detailed below:

Name of Owners/ Partners/ Promoters and Directors/ Company Secretary/ Holder of Power of Attorney	Relationship of the person with the firm

Note: Indicate Director Identification Number (DIN) also, wherever applicable.

2.7 List the names & addresses of all associated, subsidiary & holding companies, including trusts

Company Name	Address	Nature of Business	Relationship with Applicant

Section 3: Financial details

3.1 Annual Turnover in the last 3 years:

Year			
Annual Turn-over (Rs. Lakhs)			
Profit/ Loss (Rs. Lakhs)			

Attach the audited Balance sheet and Profit & Loss statement for the above.

3.2 IMPORTANT NOTE – Financial Assessment:

Before the assessment of this application can be completed, a representative from HAL 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 HAL 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 HAL with a reference as to your financial position, if required?	YES / NO
Name of Bank & Branch	
Account Number	
Account Type	
IFSC code of the Bank	
Name and Designation of Contact Person:	
Address:	
Tel No:	

The above bank account details will be used for processing any payment to you.

Attach the cancelled cheque or bank mandate as a proof of the bank account details.

3.4 Furnish details of Income Tax Assessment in the last 3 Assessment years.

Assessment YEAR			
Amount Assessed (Rs. Lakhs)			
Amount paid/ payable(Rs. Lakhs)			

Attach the copies of Income Tax Returns filed.

3.5 Goods & Services Tax (GST) Details:

Goods & Service Tax Registration Number (GSTIN) _____

Attach copy of GST Registration along with copies of GST Returns filed for the past 3 years.

- 4** 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** Whether any criminal case/s is/are pending in the name of the company for the last 5 years. YES/NO

If yes, provide a brief of the same.

- 6** Please provide any additional information, which will help you in securing registration with HAL.

7 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 HAL 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 HAL.
- e) I/We have read and understood HAL's General Conditions of Contract and agree to abide by the same in all respects,
- f) I/We undertake to communicate promptly to HAL any changes in organization, management, condition or working of the firm.

Note: Refer **Annexure – 2** for the list of documents to be submitted along with the Vendor Registration Application Form.

Signed:.....

Name:.....

Position:.....

Date:.....

Details of person holding the Power of Attorney (If different from above) (attach attested copy of Power of Attorney)

Name Tel. No. (....) Mobile No.....

Position Fax No. (....)

Official Seal

Material Categorisation

Material Group	Material Categories	Material Sub - Categories				Additional Types
		Type-1	Type-2	Type-3	Type-4	
Direct Project Materials (Bonded Materials)	Raw Materials	Metallic	Non-metallic	Prepreg/ Foams/ Cores	Others	
	Project Consumables	Paints and Chemicals	Oil and Lubricants	Fuel/ Gases	Sealants, Adhesives and Tapes	Others
	Bought Out Finished parts	Electrical Power System	Hydraulic System	Fuel System	Landing Gear System	Others
	Standard Parts - IS, MS, NAS, AGS, GOST etc.	Metallic Fasteners	Bearings	Rubber items	Washers and Gaskets	Others
	Special Tools & Test Equipment (specific to Project and Forming part of DRE)	Jigs & Fixtures	Hand Tools	Consumable Tools	Special Purpose Tools	Others
	SACL, Ground Tools forming part of Aircraft/ Engine/ End Product delivery	Ground Handling Equipment (GHE)	Ground Support Equipment (GSE)	Others		
	Raw Materials for Jigs/ Fixtures/ Tooling	Metallic	Non-metallic	Prepreg	Others	
	Consumables for commercial applications	Paints and Chemicals	Oil and Lubricants	Masking Tapes	Cleaning Agents	Others
	Standard Parts/ items for Jigs/ Fixtures/ Tooling and other commercial applications	Metallic Fasteners	Rubber sheets	Others		
	Maintenance Spares (including all Equipment, Vehicles etc.)	Mechanical	Electrical	Electronics	Civil	Others
Overhead Materials (Non-bonded Materials)	Safety items	Personal Protective Equipment (PPE)	Fire and Safety	Alarm systems	CCTV Camera	Others
	Loose Tools & Equipment - Shop tools, Gauges and Hand tools	Measuring Tools	Hand Tools	Power Tools	Grinding Tools	Others
	Loose Tools & Equipment - Cutting Tools	Single Point tools	Multi point tools	Cut of wheels	Gas cutting Equipment	Others
	Welfare & other items including Stationery, Medical, Canteen Supplies, etc.	Printed Articles	Memento & Gift items	Clothing	Medicine/ Pharmacy	Others
	SACL, Ground Tools not forming part of Aircraft/ Engine/ End product delivery	Ground Handling Equipment (GHE)	Ground Support Equipment (GSE)	Others		
	Construction material	Cement	Sand	Stone chip	Brick	Others
	Plant, Machinery and Factory Equipment	Air conditioning equipment	Electrical & Electronics equipment	Machines	Vehicles	Others
	Computer & associated equipment	Computers/ Laptops	Software	Storage solutions	Tablets/ Phones	Others
	Testing/ Calibration	EMI/ EMC test	Vibration test	Dust test	Others	
	AMC/ CAMC/ Repairs	Conventional machine tools	CNC machine tools	Air conditioning systems	Thermal and Exhaust systems	Others
Services	Logistics	Logistics				
	Other services	Other services				

Check List of Documents to be Submitted along with the Vendor Registration Application Form (for Vendors based in India)

SI	Details Required as per Form	Proof/ Document Required	Yes/No
1	Company Registration/ Address:	(As applicable to your company)	[]
a.	For Individual/ Single person/ Proprietorship firm - where firm registration is not mandatory	Notarised affidavit for Proof of Company address	[]
b.	For Partnership/ Limited Liability Partnership (LLP) firm - where firm registration is not mandatory	Copy of Registration with Registrar of Firm (in case of Partnership/ LLP Firm) Registered or Unregistered Partnership Deed Notarised affidavit for Proof of Company address	[] [] []
c.	For companies registered under Company Act 1956	Memorandum of Association/ Article of Association Certificate of Incorporation with registrar of firms Certificate of GST Registration	[] [] []
2	Income Tax registration	PAN or TIN document	[]
3	Registration Category	If Stockist/Distributor/ Dealer/ Trader - Authorized Distributor Certificate and Copy of Agreement/Contract with Principal/ OEM.	[]
4	Udyam Registration (in case of MSME only)	Udyam Registration Certificate	[]
5	Quality Certification	ISO Certificate/ Any Other Certificate	[]
6	Registration with other HAL Divisions/ Organizations	Registration Certificate	[]
7	List of Major Products/Services	Product Catalog/ Service Catalog	[]
8	List of Major Customers	Past Purchase Orders Copy Any other proof	[]
9	Annual Turnover (of Past 3 years)	Audited Balance Sheet of FY..... last three years Audited Profit/Loss statement of FY... last three years	[] []
10	Bank(s) Details	Cancelled Cheque/ Bank Mandate	[]
11	Income Tax Assessed (of Past 3 years)	Copy of ITR Acknowledgment for AY... last 03 years.	[]
12	Tax Details	Copy of GST returns filed for FY..... last 3 years	[]
13	Details & Mandatory document uploaded on HAL e-procurement portal for 'e-Registration'		[]
Note - Kindly provide all current documents as above, tick mark and send back along with form.			