



## VENDOR REGISTRATION FORM

### **PARTICULARS OF THE COMPANY/ FIRM:**

Please fill the details against the respective fields, sign and stamp all the pages:

#### **1. Name of the Company/ Firm:**

*Notes to Vendor:* Please note that all future correspondence – tender enquiries, purchase orders etc. as well as payments will be made in the name provided against this field and at the address provided in the field below.

#### **2. Full Registered Address:**

#### **3. Telephone No:**

**Fax No:**

**Mobile No:**

**Land Line No.**

#### **4. E-mail address:**

5. (A) Whether Proprietary/ partnership/ Private ltd/ public ltd/ SSI/NSIC/SSI etc.:

(B) Whether vendor is Manufacturer / Supplier / Contractor/ Agent etc.:

(C) Whether Indian / Foreign company:

(D) If small scale Industry, fill in following details:

(i) NSIC Regn. No/ Udyog Aadhaar No.:

(ii) NSIC/ Udyog Aadhaar State.

(iii) Validity of NSIC Regn/ Udyog Aadhaar No.:

(iv) Type of jobs / items for which NSIC registration/ Udyog Aadhaar No. awarded for:

(E) Please select contract: LSTK / Projects / Maintenance and Repairs / Operations.  
(Please strike out whichever is not applicable)

#### **6. Name(s) of the proprietor/ partners/director along with Designation:**

7. Name of Authorized Signatory:

Contact Number of Authorized Signatory:

#### **8. Year/Date of establishment of company:**

9. **Type of jobs/ categories wish to register with HOGPL:**

Sr.No.	Job/ Category wish to register	Min Financial Limit (Rs) you wish to register	Max Financial Limit (Rs) you wish to register	Type (Supply, Contract, Manufacturing Etc.)	NSIC (Yes / No)	Details

10. **Name(s), Designations of contact persons with contact Nos and e-mail address (if any):**

11. **Statutory Docs:** (Self attested Photocopy of following applicable document to be submitted. Please ensure that the relevant documents are attached for quick reference.):

PAN No:	
GST No.:	
TAN No.:	
NSIC Registration/ Udyog Aadhaar No.:	
Valid Proof of Company Address	
Any other document:	

12. **Relationship(s) of Directors / Partners and Owners with HPCL/OIL/HOGPL:**

(a) Whether any of your Directors/ Partners and Owners is ex -employee of HPCL/OIL/HOGPL: (Yes/ No):

If yes, please fill the table below:

Sr. No	Name	Designation in HPCL/OIL	Location in HPCL/OIL	Year of separation from HPCL/OIL

(b) Whether any of family members of your Directors / Partners and Owners is/ are present employee(s) of HPCL/OIL/HOGPL (Yes/ No):

If yes, please fill the table given below:

Sr. No	Name	Designation in HPCL/OIL/HOGPL	Office/ Location in HPCL/OIL/HOGPL

**13. DECLARATION:**

I/ we do hereby declare that the entries made in this application form and the enclosed attachments are true to the best of my/ our knowledge. In case it is established that any of the data furnished by me / us is false, inaccurate, or misleading, I hereby accept that my application will be rejected outrightly. This application is made by me/ us on behalf of \_\_\_\_\_ the capacity of \_\_\_\_\_ I / we confirm that I / we are duly authorized to submit the same. Any information provided herewith, if found false later shall make us liable for disqualification / Holiday listing / blacklisting. I/ we further confirm that the applicant firm / company has not been delisted / blacklisted by any Government Organization/ public Sector Undertaking in the past and are not on a holiday list of any such organizations presently. I/we understand that HPOIL Gas Private Limited reserves the right to reject any / all or accept any application without any reason whatsoever.

**Signature :**

**Date :**

**Place :**

**Name :**

**Designation :**

**(Please affix Seal / Stamp of the organization here)**