

		PRE-QUALIFICATION OF GENERAL CONTRACTOR / SUPPLIER	
Name of company			
Company address			
City, Province			
Telephone Numbers		Fax Numbers	
1.0 STATUS OF THE COMPANY			
S. No	DESCRIPTION	ANSWER	
1.1	Has your firm been involved in any litigation with APL or any another company? If yes, please provide details	Yes <input type="checkbox"/>	No <input type="checkbox"/>
1.2	National Tax No (Please Provide copy of NTN Certificate)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
1.3	Sales Tax (GST) No (Please Provide copy of GST Certificate)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
1.4	Type of Firm		
	• Public / Private Limited	<input type="checkbox"/>	
	• Partnership <input type="checkbox"/>	• Proprietorship <input type="checkbox"/>	
1.5	Company office/showroom		
	• Self owned	<input type="checkbox"/>	
	• Rented	<input type="checkbox"/>	
1.6	Office Setup with (Please provide copy of current letterhead)		
	• Telephone	<input type="checkbox"/>	
	• Fax	<input type="checkbox"/>	
	• Email	<input type="checkbox"/>	
2.0 FINANCIALS & PAST EXPERIENCE			
S. No	DESCRIPTION	ANSWER	
2.1	Average Annual Turnover in last 3 years (Please provide copy of Bank Statement / Income Tax Return)		
	• More than 05 Million	<input type="checkbox"/>	
	• Between 03 to 05 Million	<input type="checkbox"/>	
	• Between 02 to 03 Million	<input type="checkbox"/>	
	• Between 01 to 02 Million	<input type="checkbox"/>	
	• Less than 01 Million	<input type="checkbox"/>	
2.2	Readily available cash flow (in Rs) (Relevant supporting documents must be furnished by firm)		
	• More than 10 Lac	<input type="checkbox"/>	
	• 08 - 10 Lacs	<input type="checkbox"/>	
	• 06 - 08 Lacs	<input type="checkbox"/>	
	• 04 - 06 Lacs	<input type="checkbox"/>	
	• Less than 04 Lacs	<input type="checkbox"/>	



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2.3	Number of Years the Firm is in Business (Please provide the evidence of incorporation)	
	• Over 5 Years	<input type="checkbox"/>
	• 3-5 Years	<input type="checkbox"/>
	• 1 -3 Years	<input type="checkbox"/>
	• Less than 01 Years	<input type="checkbox"/>
2.4	No of Clients for relevant jobs: (Relevant supporting docuemnts must be furnished by the participating firm)	
	• More than 10 Clients	<input type="checkbox"/>
	• 5 - 10 clients	<input type="checkbox"/>
	• 2 - 5 clients	<input type="checkbox"/>
	• Less than 2 clients	<input type="checkbox"/>
2.5	Number of full-time employees (Please provide details on firm's Letterhead)	
	• Above 05	<input type="checkbox"/>
	• 4-5 employees	<input type="checkbox"/>
	• 2-3 employees	<input type="checkbox"/>
	• Less than 2 employees	<input type="checkbox"/>
2.6	Client List for relevant job	
	• Multinational + National Organizations	<input type="checkbox"/>
	• Multinationals only	<input type="checkbox"/>
	• Local Organizations only	<input type="checkbox"/>
	• Others	<input type="checkbox"/>