

Format of Letter of Expression of Interest

[On Company's/Firm's letterhead]

Reference:

Date:

Dean (Resources and Alumni)
Dean, Resources and Alumni Office
Room No. FB-270, IInd Floor, Faculty Building
Indian Institute of Technology Kanpur
Kanpur (UP) – 208 016

SUB: SUBMISSION OF EXPRESSION OF INTEREST

Dear Sir,

We hereby submit our expression of interest for consultancy services as explained in the Invitation for '*Expression of Interest*' for the aforementioned project. In support we submit all the necessary information and relevant documents (one original and one copy) for our participation in the procedure for short listing of applicants as a part of the selection process.

The submission is made by us, on behalf of In the capacity of duly authorized to submit the expression of interest.

We hereby submit our willingness to get shortlisted for our participation in the process for identifying the Consultant by the aforementioned Design.

We understand that IIT Kanpur reserves the right to reject the submission, without assigning any reason.

Yours faithfully,

Signature of Applicant:

Name of Signatory:

Designation:

Name and address of firm:

Contact number:

Fax:

Email:

Enclosures: Copy of Board Resolution/ Power of Attorney or Authority letter authorizing the representative to sign on behalf of the Company/firm as the case may be.

TO BE SWORN ON A NON-JUDICIAL STAMP PAPER OF RS.100/-

AFFIDAVIT

*I/we*Director/Proprietor/Partner of
.....(mention name of organization and its complete
address) do hereby solemnly affirm and declare as under:-

1. That *I/we *am/are registered as (mention name of
*firm/company) vide Registration No..... under the provisions of (Mention
the name of the Act).

2. That *I/we have applied in response to the Invitation for Expression of
Interest i.r.o. *Appointment of Public Relation Service Provider for IIT Kanpur.*

DEPONENT

VERIFICATION

I/we the above-named deponent do hereby verify that the contents of
the aforesaid paragraphs 1 and 2 are true and correct to the best of *my/our knowledge and belief
and nothing is concealed there from.

Verified at(place) this Day of 2019

(Strike off whichever is not applicable)

DEPONENT

Note: Deponent will be the authorized signatory of the Applicant

Annexure-3

TO BE SWORN ON A NON-JUDICIAL STAMP PAPER OF RS.100/-

AFFIDAVIT

*I/we*Director/Proprietor/Partner of(mention name of organization and its complete address) do hereby solemnly affirm and declare as under:-

1. That (Mention name of organization) is eligible to submit the aforesaid proposal as neither the applicant has been barred and/or blacklisted by the Central Government and/or any State Government of India at any time prior to the date of submitting this affidavit.
2. That (mention name of organization) or any of its constituents during the last three years has neither failed to perform on any agreement nor was expelled from any project or agreement nor any agreement terminated for any breach by the applicants or any of its constituents.
3. That an annexure attached to this affidavit gives list of all contracts of (mention organization) or any of its constituents with the state / central government that are in arbitration.

DEPONENT

VERIFICATION

*I/we the above named deponent do hereby verify that the contents of the aforesaid paragraphs 1 to 3 are true and correct to the best of *my/our knowledge and belief and nothing is concealed there from.

Verified at (place) this Day of 2019.

(Strike off whichever is not applicable)

DEPONENT

Note: Deponent will be the authorized signatory of the Applicant

Annexure-4

ORGANISATIONAL STRUCTURE

(This form to be furnished not only by the Prime Agency applying for the prequalification, but also furnish separately for sub-consultants (if any) who would be associated with this project)

1	Name & Address of the applicant with Telephone No./Fax No./ Email ID	
2	a. Year of Establishment b. Date & Year of commencement of practice.	
3	Legal status of the applicant (attach copies of original document defining the legal status) A proprietary firm A firm in partnership A limited company or Corporation	
4	Names of Directors & other executives with designation	
5	Designation of individuals authorized to act for the organization	
6	Total No. of professional staff (In house):- Architects: Service Consultants: Quantity Surveyors: Others:	
7	Was the applicant ever required to suspend the project for a period of more than six months continuously after you commenced the planning? If so, give the name of the project and reasons of suspension of project.	
8	Has the applicant or any partner in case of partnership firm, ever abandoned the awarded project before its completion? If so, give name of the project and reasons for abandonment.	
9	Has the applicant or any constituent partner in case of partnership firm, ever been debarred/ black listed for competing in any organization at any time? If so, give details.	
10	Has the applicant or any constituent partner in case of	

	partnership firm, ever been convicted by a court of law? If so, give details.	
11	In which field of Consultancy the applicant has specialization & interest	
12	Any other information considered necessary but not included above.	
13	Address of local office if any	

Annexure-5

DETAILS OF IN HOUSE SERVICES AVAILABLE FOR THE ASSIGNMENTS

SNo.	In-house Service	Availability of Services	Nos. of In-house Staff with experience		
			Experience of 10 years & above	Experience of 5 -10 years	Experience of less than 5 years
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					

Note:

Maximum two-page CV of each main member and key expert shall be furnished as per Annexure 7.

Annexure-6

TO BE SWORN ON A NON-JUDICIAL STAMP PAPER OF RS.100/-

AFFADAVIT

Details of Associates/Sub Consultant

*I/we*Director/Proprietor/Partner of(mention name of organization and its complete address) do hereby solemnly affirm and declare that the following will be our sub-consultants/associates for the said project – *Appointment of Public Relation Service Provider for IIT Kanpur*

I/we are aware of the fact that any change in the name of the consultant without taking approval of IIT Kanpur may lead to termination of contract.

Details of the sub-consultants/Associates:

S.No	Proposed Associate for	Sub-Consultant	Name & Address	Years of Experience	Years of Association with the Prime Applicant
1					
2					
3					
4					
5					

Signature of Applicant:

Name of Signatory:

Designation:

Name and address of firm:

Contact number:

Fax:

Email:

Annexure-7

Brief Bio- Data of Key Professionals

(This form to be furnished not only by the Prime Consultant applying for the prequalification, but also furnish separately for sub-consultants who would be associated with this project)

Name of Firm: _____

Professional: _____

Date of Birth: _____

Years with Firm: _____

Nationality: _____

Membership in Professional Societies: _____

Detailed Task Assigned: _____

Key Qualifications: [Give an outline of staff member's experience and training relevant to responsibility in context of assignment. Describe degree of responsibility held by staff member on relevant previous assignment and give dates and location. Use up to half a page.]

Education: [Summarize college/university and other specialized education of staff member, giving names of schools, dates attended and degree(s) obtained. Use up to a quarter pages.]

Employment Record: [Starting with present position, list in reverse order every employment held. List all positions held by staff member since graduation, giving dates, name(s) of employing organization(s), title of positions held and location of assignments. For experience in last five years, also give type of activities performed and client references, where appropriate. Use up to three quarter of a page.]

Languages: [Indicate proficiency in speaking, reading and writing of English language: excellent, good, fair, or poor.]

Certification: I, the undersigned, certify that to the best of my knowledge and belief, these bio-data correctly describe my qualifications, my experience and myself.

Annexure-8

DETAILS OF QUALIFYING SUCH PROJECTS HANDLED/COMPLETED DURING THE
LAST FIVE YEARS.

SIMILAR NATURE OF ASSIGNMENT – COMPLETED WORKS				
S.No.	Description	Work No.1	Work No. 2	Work No. 3
1	Name of Service / Project			
2	Name & Address of Employer / Organization, Telephone no. of officer to whom reference may be made.			
3	Cost of work in Rs. Lakhs (Attach copy of Work Order)			
4	Date of commencement as per contract			
5	Stipulated date of completion			
6	Actual date of completion			
7	Litigation / arbitration pending / in progress with details *			
8	Service rendered			
	In-house teams			
	Associated Consultants (if any)			
9	Names of Project In charge & Key staff & nos. of staff involves.			
10	Any other information			

* Indicate gross amount claimed and amount awarded by the Arbitrator.

The Applicant may provide in this annexure, details of maximum 3 projects which in his opinion best present his ability to do justice to this Design (qualifying project referring to the project)

Annexure-9

CLIENT WISE PERFORMANCE REPORT OF SERVICE

1	Name of Service/ Project	
2	Agreement No.	
3	Estimated Cost	
4	Tendered Cost	
5	Date of start	
6	Date of completion	
	Stipulated date of completion	
	Actual date of completion	
7	Amount of compensation levied for delayed completion, if any	
8	Amount of reduced rate items, if any	
9	Performance Report	
	Quality of work	Very Good/Good/Fair/Poor
	Financial soundness	Very Good / Good / Fair / Poor
	Technical Proficiency	Very Good / Good / Fair / Poor
	Resourcefulness	Very Good / Good / Fair / Poor
	General Approach & Behaviour	Very Good / Good / Fair / Poor

Dated:

Signature & Seal of

Executive engineer or equivalent

Annexure-10

AVERAGE ANNUAL FINANCIAL TURN OVER (GROSS) OF LAST THREE YEARS

Financial Analysis:

Details to be furnished duly supported by figures in balance sheet/profit and loss account for the last three years duly certified by the Chartered Accountant, as submitted by the applicant to the Income Tax Department (copies to be attached).

Particulars	Financial Year		
	Year 2015-16	Year 2016-17	Year 2017-18
Gross Annual turnover on construction work. (In Lakhs)			
Profit / Loss			
Certified by			

Financial arrangements for carrying out the proposed work.

The following certificates are enclosed:

Current Income Tax clearance Certificate / Profit & Loss account

Signature of Chartered Accountant with seal