

(A GOVERNMENT OF KERALA UNDERTAKING)

20.01.2024

Renewal of Registration of Empanelled Contractors/ Consultants

Applications from Empanelled Contractors/ Consultants are invited for the renewal of their registration with KEL for a further period of one year, in the enclosed format. All the existing empanelled contractors/ consultants having validity upto 31.01.2024 and those who wish to renew are requested to furnish their applications with Annexure 1 & 2 (formats enclosed) duly filled and with renewal fee, on or before 27-01-2024, 12:00 PM

Details of Renewal fee

Category	Renewal Fee (including GST @18 %)			
A	Rs.11800.00			
В	Rs.8850.00			
С	Rs.5900.00			

Bank Details for remitting the renewal fee

Name of the Bank	: SBI
Branch Name	: SSI Branch, Ernakulam.
Account No-Current A/c	:67220687709
IFSC Code for RTGS}	: SBIN0005387
Fund Transfer	

Dy. General Manager (BDC), Corporate Office, KERALA ELECTRICAL & ALLIED ENGG. CO. LTD., Mamala P O, Kochi 682305. e-mail: <u>bdc.corporate@kel.co.in</u> website: www.kel.co.in

Date:

To, **The General Manager,** Kerala Electrical & Allied Engineering Company Mamala PO, Kochi 682305.

From,

.....

Dear Sir/Madam,

Sub: Request to renew the registration of Empanelment.

Ref: Empanel Regn. No.

With reference to the above, we request you to kindly renew our registration for a further period of one year under category(A/B/C) in the area of our expertise, for which the required renewal fee was remitted and details are as follows.

Renewal fee Amount: Rs.

Mode of remittance...... (Cheque/DD/Fund Transfer)

(If Cheque/DD, No. dated)

For fund transfer,

Date of fund transfer and reference no. :-

Thanking you,

Yours faithfully,

Authorised Signatory

ANNEXURE -1

FORMAT FOR THE BIDDERS INFORMATION

1.	Name of the bidder			
	Empanelment Registration number			
2.	Registered Category as per empanelment certificate			
3.	Registered class as per empanelment certificate	А	В	С
	Date of expiry of registration			
4.	Address of the Bidder			
5.	Name & Designation of the contact person with whom all correspondence shall be made.			
6.	Mobile Number of the contact person			
7.	Telephone No. (with STD Code) of the contact person			
8.	E-Mail of the contact person with whom all correspondence shall be made:			
10.	Fax No. (with STD Code)			

SIGNATURE, Name, Designation with Seal

ANNEXURE 2

Details of Successfully executed Projects with KEL

	Name of Project	District	Year and	Value	
SI. No.			Work order awarded	Completion	(Rs in lakhs)

Signature, name and designation of authorized signatory

Details of On Going Projects with KEL

SI. No.	Name of Projects	District	Year and month of		Value	% of work
			Work order awarded	Completion as per Work Order	(Rs in lakhs)	completed/Re marks

Signature, name and designation of authorized signatory