

PREQUALIFICATION OF CONTRACTORS
FOR THE YEAR 2018
(To be filled by the Contractor / Firm)

Name of the Firm / Contractor: _____

Contact Person, Address & Telephone:

Basic Requirements:

1. Year of Firm Establishment: _____
2. Year of PEC registration: _____
3. Category of PEC: _____
4. PEC Certificate: _____
5. Work Experience with Banks: _____
6. Work Experience with Others: _____
7. Total no of Banks /
Branches Renovated: _____
8. NTN No: _____
9. Sales Tax No: _____

Remarks if any:

Sign & Stamp