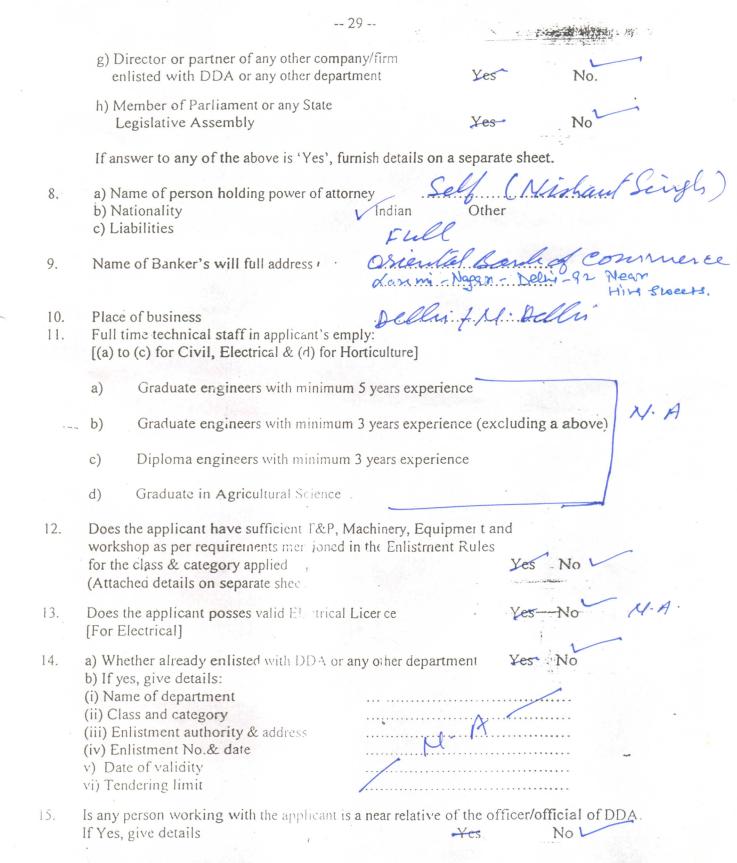


DELHI DEVELOPMENT AUTHORITY APPLICATION FOR ENLISTMENT AS CONTRACTOR

[The applicant should study carefully the Rules of Enlistment and the list of documents to be annexed with the application form before filling the form. Applications found deficient in any respect are liable to be rejected without any further correspondence.]

| C | lass Category | BRK | |
|----------|--|---|--|
| 1. | Name of applicant Father's Name Nationality Sh. Med. Sh. Den. Indian | Sheart Seingle neurolen Seingle Other | gh. |
| 2. 3. | Name of the firm: NISHANT EN Address Regd. Office G-9 Ist flows Sugar | TERPRISE Subash co Dellas -1 | S Loo 3, 2. |
| | Head Office Abou | ~ | •••••• |
| 4. 5. | Telephone No 93/22/732/ Fax No:- Constitution Individual Partnership Firm Private Ltd. Company | Sole Proprietorship Public Ltd. Compa | |
| 5. | If partnership firm, names of the partners If company, name of directors | i 2 | ··········· |
| | | 3 | |
| 7. | Is the individual/sole proprietor/any partner/direct a) Dismissed Government Servant or DDA emplo b) Removed from approved list of contractors c) Demoted to a lower class of contractors d) Having business banned/suspended by | | No. No No |
| | any government in the past e) Convicted by a court of law f) Retired engineer/official from engineering Department of Govt. of India within last two years. | Yes Yes | No No |
| | The Indiana Programme in Indiana Programme I | | The second of the second of the second |

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Neybourt Tomer

Branch

Amount

Issuing Bank &

Oriental Bark

Branch drawn

upon

16. Enlistment fee enclosed:

Date

Draft No.

Drawn in favour of

P.A.O.(Engg.) DDA Vikas Minar

| 8 | 31794 | 5 1000/- | Oriental Bart of Commerce, | 4 | | | |
|---------|--|---|--|----------------|------------------------|------------|--|
| L | | | Caxmi Nagar | | | | |
| 17. | Details of Works completed and in progress during the last 5 years. This list should include all works whose gross amount of work done is more than the required magnitude for the class in | | | | | | |
| | | egistration is required. The list she | | | | 5 111 | |
| | | Name & brief particulars of each | | | | / | |
| | | a) Date of commencement of each | work. | tholo | Capy of order. by atta | 7 | |
| | | b) Date of completion of each wor | rk. | 1 -1 | | , | |
| 1 | | a) Gross amount of each work. | | Warn | orale. | es . | |
| | | o) Net amount of each work | sh aaah wark | hore | butt | neled | |
| | | Name of the Authority under whic Executed with its completed posta | l address | | og will | | |
| | | | a ddd coo. | | | | |
| 18. | Certificates: i) I/We (including all partners) certify that I/We have read the Rules of Enlistment of Contractors | | | | | | |
| | | | | the Rules of E | nlistment of Cont | ractors | |
| | | A as amended upto-date and shall certify that the information giver | The state of the s | the best of ou | ır knowledge I/\ | We also | |
| | | ii) I/We certify that the information given above is true to the best of our knowledge. I/We also understand that if any of the information is found wrong. I am liable to be debarred. | | | | | |
| | | certify that I/We will not get mys | | | | | |
| | Departme | ent under more than one name. | | | | | |
| | iv) a) I ce | ertify that I did not retire as an E | ngineer of Gazett | ed rank of as | any Gazetted Off | ficer on | |
| | | ring or Administrative duties in a | | | | | |
| | | ne last two years. I also certify the | | | | | |
| | | I I employ any such person with | | | - | e prior | |
| | - | on of the Government. (For individual of the most and /D | | | | | |
| | | ertify that none of the partners/D | | | | | |
| | | etted Officer employed on Engin fy that we have neither under our | | | | | |
| | | within two years of his retirement | | | | | |
| | | nership firms and limited compan | | prior perimos | ion of the dotter | | |
| | | | | | | | |
| | (Strike ou | it whichever is not applicable) | | | | | |
| Signati | ure(s) of ap | pplicant(s): | | | | | |
| Vame | _ | Signature Nulland To | Address | | 01 | 1 - 1 | |
| 1. Nu | shaut Sc | ugh 11 1 | G-9 I | st floo | or, Sul | and enough | |
| 2. | | Nighant Tomer | | | 0 | 10 0. | |
| 3. | | | Laxon | u la | gar, Del | ku-110092. | |
| | | | | | | | |
| Dated. | | | | | | | |
| Vo of I | Documents | sattached 2 | | * | | | |
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| | | | 1 + Tours | | | | |
| | | $\mathcal{N}_{\mathcal{N}}$ | hant Tome | ^ | | | |