

**NATIONAL COUNCIL FOR HOTEL MANAGEMENT AND CATERING TECHNOLOGY**  
**A-34, SECTOR 62, NOIDA-201 301**

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**TENDER FORMAT**

1. Name & address of organization/  
agency / firm : \_\_\_\_\_
  
2. Date of establishment of  
organization/agency/firm : \_\_\_\_\_
  
3. Registered Office with No.  
and date of registration : \_\_\_\_\_
  
4. Sales Tax Registration No. : \_\_\_\_\_
  
5. PAN Regd. No. from Income Tax  
Authorities : \_\_\_\_\_
  
6. Financial turnover of minimum  
Rs.5 Crores during 2008-09  
(certified by statutory auditors) : \_\_\_\_\_
  
7. Year from which the agency has  
held the entrance examination  
on all India basis : \_\_\_\_\_
  
8. Client list to be attached of last  
five years indicating enrollment of  
candidates to each examination : Attached  Not Attached
  
9. Earnest Money Deposit of Rs.1 lac  
through DD drawn in favour of  
NCHMCT, payable at NOIDA : Attached  Not Attached
  
10. Successful tenderee shall have to provide  
Bank Guarantee of 10% of value of award  
of work in favour of NCHMCT, NOIDA : Yes  No

Sign. of the authorized  
signatory with seal