

**Annexure-I**  
**FORMAT FOR SUBMISSION OF AGENCY DETAILS**  
**(DATA SHEET TO BE SUBMITTED AT IITRAM)**

Sr. No.	Particulars	Details to be filled by the Agency
1	Name of Agency/ organization/ establishment/ company	
2	Registered Office Address: Telephone Number: Fax number: email:	
3	Correspondence Address : Telephone Number: Fax number: email:	
4	Details of the authorized person (Name, designation, address): Telephone Number: Fax number: email:	
5	Is the firm - <ul style="list-style-type: none"> <li>• Government/Public Sector Undertaking</li> <li>• Proprietary Firm</li> <li>• Partnership firm (if yes, give partnership deed)</li> <li>• Limited Company or Limited Corporation</li> <li>• Member of a group of companies (if yes, give name and address, and description of other companies):</li> <li>• Subsidiary of a large corporation (if yes, give the name and address) of the parent organization)</li> <li>• If the company is subsidiary, state what involvement if any, will the parent company have in the project</li> </ul>	
6	Permanent Account Number (PAN) of the firm	
7	GST Number of the firm	
8	Is the firm blacklisted in Semi Government/ State Government / Central Government / Government Undertaking? If Yes, provide the detail.	YES / NO

**Client's List:** Please attach Separate sheet showing the client list of only Govt./Semi Govt. department with name and addresses of the department.

Date:

Time:

Name of Authorized Person  
with Sign and Stamp