

APPLICATION FOR PROCUREMENT OF LAPTOP

1. Name of the Applicant :
(Full Name in Block Capital Letters)
2. Designation & EIS No. :
3. Present Grade & Basic Pay :
4. Place of Posting (Area/Project/Deptt.) :
5. Date of Appointment :
6. Date of Superannuation :
7. Full Address of the Employee :
(A) Permanent :
- (B) Present :
8. E-Mail ID & Cell No. :
9. MAKE & Model of Laptop intended to be purchased :
10. Anticipated cost of the Laptop :
11. Name & Address of the Manufacturer / Dealer /
Vendor from whom the Laptop is to be purchased. :
12. Pro-forma Invoice No. & Date with Amount issued :
By the Dealer / Vendor.

DECLARATION

- + I have read and understood the Terms & Conditions of “**LAPTOP TO ALL EXECUTIVES OF NCL – 2014**” under which the Laptop will be sanctioned by the company and agree to abide by the conditions prescribed by the company.
- + The details furnished in the application are true to the best of my knowledge and belief.
- + I will use the Laptop for Official work and also undertake for the safety of the Laptop purchased under this scheme.
- + I will not use any pirated Software in this Laptop.
- + In case of submission of any false information / documents towards providing of Laptop, I shall abide under the applicable CDA Rules, 1978 of CIL and amendments thereof.

Date:

Signature of the Applicant

Signature with seal of Controlling Officer

THROUGH

**CONTROLLING OFFICER
(Not below the rank of Manager)**

For Office Purpose Only:

1. Personnel Department (APM’s Office at Coalfields Areas / Executive Establishment at NCL HQ) to certify whether the applicant is eligible to avail Laptop under the prescribed Scheme: **{YES} or {NO}**.

(All regular executives including Board level, Deputationists, who has completed at least three months service in CIL / NCL and posted in NCL will be eligible under the scheme. Management Trainees after confirmation / regularization in CIL / NCL will be eligible to avail the facility. The Welfare Officer (Trainee) and other Executives in E-2 Grade promoted from Non-Executive to Executive Grade will be eligible to avail the facility after closure of the probation period).

**Signature & Seal
GM (P/EE)/SO (Personnel)**



Northern Coalfields Limited
(A Mini Ratna Company)
(A Subsidiary of Coal India Limited)

ANNEXURE - II

NCL
Corporate Office, Singrauli

UNDERTAKING

I,, Employee No. working as (Designation to be indicated) In the (Name of the department and place of posting to be indicated) do hereby undertake on _____ (Day) of _____ (Month) in the year _____ that I am willing to procure and maintain the Laptop in accordance to the approved terms & conditions in the Scheme of the Company as communicated vide Sanction Order No..... dated

I, further undertake that I will make the Laptop available at my workplace every day and use it for official work. I also undertake for the safety of the "Laptop" purchased under this scheme and in case of theft / damage etc., and / or expiry of life span of the Laptop, written down value on pro-rata basis may be recovered by NCL from my monthly salary or other dues.

On separation / superannuation from the company, I undertake to deposit the residual value as per the scheme with the Company. In case of failure to do so, I authorized Northern Coalfields Limited to recover the dues from any amount due to me from the Company. The "**LAPTOP TO ALL EXECUTIVES OF NCL – 2014**" shall be the part of this Undertaking. I shall abide by the Terms & Conditions of "**LAPTOP TO ALL EXECUTIVES OF NCL – 2014**".

In case of submission of any false information / documents towards providing of Laptop, I shall abide under the applicable CDA Rules, 1978 of CIL and amendment thereof.

Name:

Designation:

Department:

Place of Posting:

Dated:.....

Signature:

e-Payment
(TO BE RETURNED TO THE COMPANY)

To
NORTHERN COALFIELDS LIMITED,
P.O. Singrauli Colliery,
Dist. Singrauli (M.P.) – 486889.

Dear Sir,

REF: AUTHORIZATION OF ALL OUR PAYMENTS THROUGH ELECTRONIC FUND TRANSFER SYSTEM/ RTGS/CBS/INTRA BANK TRANSFER.

WE, hereby authorize NORTHERN COALFIELDS LIMITED to make all our payments against our Bills, Refund of Earnest Money Deposit and Security Deposit, through Electronic Fund Transfer System/RTGS/SBS/Intra Bank Transfer. The details for facilitating the payments are given below:-

(TO BE FILLED IN CAPITAL LETTERS)

1	NAME OF THE BENEFICIARY	
2	ADDRESS (WITH PIN CODE)	
3	TELEPHONE NO. (WITH STD CODE)	<input type="text"/>
4	BANK PARTICULARS	
(A)	BANK NAME	
(B)	BANK TELEPHONE NO. (WITH STD CODE)	<input type="text"/>
(C)	BRANCH NAME	
(D)	BANK BRANCH CODE	
(E)	BRANCH ADDRESS (WITH PIN CODE)	
(F)	BANK FAX NO. (WITH STD CODE)	
(G)	9 DIGIT MICR CODE OF THE BANK BRANCH (ENCLOSE COPY OF A CANCELLED CHEQUE)	<input type="text"/>
(H)	11 DIGIT IFSC CODE OF BENEFICIARY BRANCH	<input type="text"/>
(I)	BANK ACCOUNT NUMBER	<input type="text"/>
(J)	BANK ACCOUNT TYPE (TICK ONE)	
	SAVING	
	CURRENT	
	LOAN	
	CASH CREDIT	
	OTHERS	

	IF OTHERS, SPECIFY	
5	PERMANENT ACCOUNT NUMBER (PAN)	<input type="text"/>
6	E-MAIL ADDRESS FOR INTIMATION REGARDING RELEASE OF PAYMENTS	<input type="text"/>
7	NCL VENDOR CODE	<input type="text"/>

I/WE hereby declare that the particulars given above are correct and complete. If the transaction is delayed or credit is not affected at all for reasons of incomplete or incorrect information, I/We would not hold the Company responsible. We also agree to bear the bank charges, if any, for such transfer.

SIGNATURE

**(AUTHORIZED SIGNATORY)
NAME:
OFFICIAL SEAL:**

Date:

BANK CERTIFICATION:

It is certified that above mentioned beneficiary holds a Bank Account No..... with our branch and the Bank particulars mentioned above are correct.

SIGNATURE

**(AUTHORIZED SIGNATORY)
NAME:
OFFICIAL SEAL:**

Date:

Northern Coalfields Limited

Approval for Addition of New Vendor

Reference No.:

Dated:

1	VENDOR CODE	:	<input type="text"/>					
2	VENDOR TYPE	:	<table border="1"> <tr> <td>PURCHASE VENDOR</td> <td rowspan="2">SELECT ONE OPTION</td> </tr> <tr> <td>MISC. VENDOR</td> </tr> </table>	PURCHASE VENDOR	SELECT ONE OPTION	MISC. VENDOR		
PURCHASE VENDOR	SELECT ONE OPTION							
MISC. VENDOR								
3	CATEGORY	:	<table border="1"> <tr> <td>PRIVATE</td> <td rowspan="2">SELECT ONE OPTION</td> </tr> <tr> <td>GOVERNMENT</td> </tr> </table>	PRIVATE	SELECT ONE OPTION	GOVERNMENT		
PRIVATE	SELECT ONE OPTION							
GOVERNMENT								
4	CLASS	:	<table border="1"> <tr> <td>ONE TIME VENDOR</td> <td rowspan="2">SELECT ONE OPTION</td> </tr> <tr> <td>OTHERS</td> </tr> </table>	ONE TIME VENDOR	SELECT ONE OPTION	OTHERS		
ONE TIME VENDOR	SELECT ONE OPTION							
OTHERS								
5	PAY MODE	:	<table border="1"> <tr> <td>CASH</td> <td rowspan="2">SELECT ONE OPTION</td> </tr> <tr> <td>CHEQUE</td> </tr> </table>	CASH	SELECT ONE OPTION	CHEQUE		
CASH	SELECT ONE OPTION							
CHEQUE								
6	PAY TERM	:	<table border="1"> <tr> <td>2</td> <td>1</td> <td>D</td> <td>21 DAYS</td> <td>CAN BE CREATED MORE</td> </tr> </table>	2	1	D	21 DAYS	CAN BE CREATED MORE
2	1	D	21 DAYS	CAN BE CREATED MORE				
7	WHETHER APPROVED?	:	<table border="1"> <tr> <td>SELECT IF APPROVED, DESELECT IF NOT APPROVED</td> </tr> </table>	SELECT IF APPROVED, DESELECT IF NOT APPROVED				
SELECT IF APPROVED, DESELECT IF NOT APPROVED								
8	CUSTOMER CODE	:	<input type="text"/>					
9	PAYMENT VENDOR	:	<input type="text"/>					
10	FUNCTION	:	TO BE DECIDED IN THIS WORKSHOP					
11	VENDOR NAME	:	<input type="text"/>					
12	ADDRESS - 1	:	<input type="text"/>					
13	ADDRESS - 2	:	<input type="text"/>					
14	ADDRESS - 3	:	<input type="text"/>					
15	CITY	:	<input type="text"/>					
16	PIN	:	<input type="text"/>					
17	STATE	:	<input type="text"/>					
18	COUNTRY	:	<input type="text"/>					
19	FAX	:	<input type="text"/>					
20	PHONE	:	<input type="text"/>					

21	EMAIL	:																						
22	STATUS	:	SELECT ONE FROM ACTIVE, HOLD BUY, HOLD PAY OR SUSPENDED																					
23	REASON	:	REASON FOR STATUS																					
24	OPERN. DATE	:	<table style="border-collapse: collapse; margin: auto;"> <tr> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; text-align: center;">/</td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; text-align: center;">/</td> <td style="border: 1px solid black; width: 20px; text-align: center;">2</td> <td style="border: 1px solid black; width: 20px; text-align: center;">0</td> <td style="border: 1px solid black; width: 20px; text-align: center;">0</td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> </tr> </table>			/			/	2	0	0												
		/			/	2	0	0																
25	TYPE OF SUP/ MFG	:	<table style="border-collapse: collapse; margin: auto;"> <tr> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> </tr> </table>																					
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30	SERV. TAX REG. NO.	:	<table style="border-collapse: collapse; margin: auto;"> <tr> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> </tr> </table>																					
31	BANK NAME	:	<table style="border-collapse: collapse; margin: auto;"> <tr> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> </tr> </table>																					
32	BRANCH NAME	:	<table style="border-collapse: collapse; margin: auto;"> <tr> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> </tr> </table>																					
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34	RTGS NO	:	<table style="border-collapse: collapse; margin: auto;"> <tr> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> </tr> </table>																					
35	ITEMS (IF ITEM SPECIFIC)	:	TO BE SELECTED FROM ONLINE HELP SCREEN. PLEASE WRITE MAT CODE FOR APPROVAL.																					

The above mentioned documents have been verified. Vendor Code is required for placement of Work Order.

SIGNATURE OF HOD

SIGNATURE OF NODAL OFFICER