EXPRESSION OF INTEREST

Empanelment of Recovery/Enforcement Agent(s)

TO
DY. GENERAL MANAGER
RECOVERY
UCO BANK, HEAD OFFICE, 7TH FLOOR
10, B.T.M SARANI,
KOLKATA-700001

	ied for:	Recovery Agent	Enforcement	Agent	Both						
Tick v	wherever applicable										
		BIO-DAT	A								
SI.		Heads			Particulars						
No.			-								
1.	Name of the Recovery										
2.	Constitution (Individual										
2 0		constitution									
2.a.	(Partnership/Proprietorship/Ltd. Company etc. to be mentioned.										
_		onnel (please encl	ose letter of								
3.	3. Key Managerial Personnel (please enclose letter of Authority)										
4.											
	Present Net Worth of Ag										
	(It should be minimum I	Rs. 10.00 Lakh or abo	ove) CA								
	Certificate to be provide										
5.	Membership No./Regist										
6.	Having Operation in mu				(Yes/No)						
7.	Mention the name of	States in India wh	ere providing								
	Services	0.00									
8.	Regd. Office/Head Branch(es) if any)		also mention								
9.	Mention total number of Agency. (Documento										
	attendance sheet, Provident Fund sheet etc. is required)										
	Mention the name of		• ,								
10.	providing Services (Co		t/recent work								
	allotment order to be attached).										
11.	PAN /TAN No.	D. C. O. L. C. C.									
12.	ITR (previous two FYs), Profit & Loss Statement (previous two FYs)										
13.	Contact Numbers (i) Lo	Indline Nobile		Head O							
	(11)	Contact									
14.	E-Mail ID				<u> </u>						
15.	Details of past experier	nce in number of ye	ars and name								
15.	of institution where wor	ked									

16	Details of cases handled in last FY 2023-24:								
	Total No of cases handled in FY 2023-24		Recovery Made in FY 2023-24 (Amount in Lakh)		Commission Received in FY 2023-24 (Amount in Lakh)**		-24		
	**Con	nmission receive	ed to be to	allied witl	h 26 AS (Incom	ne Tax)			
17	<u>Detail</u>	s of Empanelme	ent with O	ther Bank	cs/FI in Last FY	2023-24:			
	SL No	Name of Banks/FI where empaneled during last FY	ere where d working		Total Cases handled last FY	Out of To Cases Recove made i how ma cases in	ry n ny	Recov made amount in las	e in (Lakh)
		TOTAL							
		panelment lette g mention of Ar				n Bank/Fl d	and oth	ner docı	uments
18		alization in any				mentione	<u>d:</u>		
	SL	Area o	Cases Handled in this segment in last FY	Out of such Cases, Recovery made in how many cases in last FY					
	1	SARFAESI Poss Sale of Stock, Land & Buildin	Plant & M		n				
	2	Vehicle Seizure	e & Sale**						
	3	Agriculture Sponsored/un	-	CC/Govt oans	•				
18A		se of Specialize ge Time taken					•		ntion
	Cate	gory for sale	Less tha	-	More than 6 m to 12 Mont			e than Ionths	
	Stoc			-					
		* & Machinery							
	Lanc	I & Building							

18 B	**In case of Specialization Agency is having own gavehicle: Yes/No (Please	ırage space			•		
	If yes, mention the Locatic	on:					
	No si 1 2	ocation pace/waret	of house	own	garage		
	Average time Required fro	om Seizure to	o Sale:				
	For Vehicle Seizure ment		of the v	ehicl	•	s) by	
	No of Days Up to 30 Days		Please	Tick			
	More than 30 to 60 Days More than 60 to 90 Days More than 90 days						
19	Whether agency run by Officials, senior ex-office Police/Defence Services in forces/ex-banker	cials of	CBI,	Ex-	Yes/No		
20	Whether Agency is having state of the art technology solutions, anchoring nu recovery, digital interfintegration with Platforms/Courts/Tribunals expressions.	viz., end-to- imerous o face, Cal different	-end dig ptions I Cer	gital for	Yes/No		
21	Additional Information, if ar						
22	Expression of Interest Submitted for: Empanelment as Recovery Agent Enforcement Agent Both						Tick
	Check List of Documents to	be Attache	ed:				
	Documents to be submitted in support of	Name of attested)	the De	ocum	ent Submitted (S	Self Pleas	ie .
23	Key Managerial Personnel Regd. Number	Letter of Au GST Reg Company/F	istration			the	
	Membership No./Registration No. of IIBF Mention the name of States in India where providing Services	recent wor	npanelm rk allotn	ent/ nent	order/ or any otl to satisfaction of t		

Regd. Office/Head Office Address (also mention Branch(es) if any)	MOA (Memorandum of Association)/AOA (Article of Association) or any other documentary proof up to satisfaction of the Bank	
Mention total number of Employees in the pay roll of the Agency.	Proof of attendance sheet, Provident Fund sheet etc./or any other documentary proof up to satisfaction of the Bank	
Agency run by Ex- Revenue/Tax Officials, senior ex-officials of CBI, Ex- Police/Defence Services including para-military forces/ex-Banker	Proof of ex-employee, if any, or any other documentary proof up to satisfaction of the Bank	
Name of Banks/FI where providing Services	Copy of empanelment/ recent work allotment order	
PAN /TAN No.	Copy of Document	
ITR (previous two FYs), Profit & Loss Statement (previous two FYs)	IT Return of Last 2 years & Copy of 26AS	
Present Net Worth	CA Certificate	
KYC Documents	Registration of Firm/ Certificate of Incorporation of the Entity.	
	 Voter Card/Aadhar Card & PAN Card (Key Personnel/Key Managerial Personnel); 	
Latest Police Verification Report	Original Report	
Notarized Undertaking	(Annexure-I)	
24		

I/We do hereby declare that the above information furnished by me/us is correct.

ignature with Stamp)
(anature with Stamp

<u>UNDERTAKING-CUM-DECLARATION</u> (TO BE DULY ATTESTED BY A NOTARY)

Sub:	Empane	lment of	Recovery	<u>//Enforceme</u>	ent Aae	nt (Ad	aencv).

(1)	I/We,	Proprietor/Partner(s)/Director(s)	of	M/s	hereby	confirm	that	I/We
hav	e read	d and understood the Eligibility C	rite	ria and fulfil the san	ne.			

- (2) I/We further confirm that all the information, furnished by me/us is as per the requirement of the Bank, have been included in our bid.
- (3) I/We further hereby undertake and agree to abide by all terms and conditions and guidelines stipulated by the Bank and RBI, as amended/modified from time to time. I/We understand that any deviation may result in disqualification of our bid/termination of the Agreement.
- (4) I/We further hereby declare and confirm that I/We have not been declared as Wilful Defaulter/Defaulters by any bank or financial organisation due to non-repayment of my/our dues or there is no adverse remark in my/our CIBIL report for default of our financial obligations. I am authorising the Bank to pull CIBIL report or any other CIC report to cross check the credentials submitted by me.
- (5) I/We further hereby declare that I/We have not been de-empanelled/black-listed or otherwise debarred/punished by any Bank/Financial Institution/Central Government/ State Government/any Central or State Undertaking or Corporation/ Reserve Bank of India or any other Regulatory Authority or any other Statutory Authority as on date of the publication of this EOI.

(OR)

I/We	further	hereby	y decl	are t	that	the	Proprie	etorship) Cor	icern/F	'artner	rship
Firm/C	ompany/.	(i	f any	other	entity	/) na	mely	M/s	•••••			was
de-em	panelled/	blacklist	ed/debo	arred b	у			(Nam	ne of th	e Auth	nority v	who
blacklis	sted/debo	arred) fi	rom taki	ng pai	rt in t	heir T	ender/	Procure	ement	or a	period	d of
	year	s w.e.f	f		to		Th	e pe	riod is	subs	isting/a	over
on	and	l now I/V	Ne is/are	entitled	d to ta	ke par	t in Ten	der/Pro	cureme	ent.		

- (6) I/We declare that no proceedings/inquiries/investigations have commenced/pending against me/us by any Statutory Authority/Regulatory Agency/Investigating Agency which may result in liquidation of company/ firm/proprietorship concern and/or may act as deterrent on the continuity of business and/or may hamper in providing the said services, as envisaged in this document.
- (7) I/We further hereby declare that no legal action is pending against me/us for any cause in any legal jurisdiction.
- (8) I/We undertake that adequate number of resources, if required by the Bank, will be deployed for the project to complete the assignment within the stipulated time and I/We am/are capable of providing services across the country.

*STRIKE OUT WHICH IS INAPPLICABLE

Original)

Signature: (1)
Name:
Designation:
(2) Name: Designation:
Name & Registered address of the Recovery/Enforcement Agency:(Seal of the Recovery Agency)

Enclo. Letter of Authority for execution of the Notarized undertaking cum declaration (in