

WESTERN RAILWAY**Suppliers' Registration Form - 2022****FORM No.****RECEIPT No.**

Chief Commercial Manager (Claims & Catering)
3rd Floor, Commercial Department,
Station Building, Head Quarter Office,
Churchgate, Mumbai - 400 020.
Telephone no.: 022 676 22592
Email: shortlistingwr@gmail.com

SUPPLIERS' REGISTRATION FORM**w.e.f 05.06.2022**

(This form is valid till further order)

(For supply of PAD items & Packaged Drinking Water (other than Rail Neer mandatory stations) to licensee operated Catering units over Western Railway)

(Cost of Form Rs. 2500/- is non refundable.**Exempted for certified & valid MSMEs/Startups)****M/s** _____**Address:** _____

_____**Telephone:** _____**Mobile:** _____**Email:** _____

WESTERN RAILWAY**Suppliers' Registration Form - 2022****INSTRUCTIONS TO THE APPLICANTS & GENERAL TERMS & CONDITIONS**

1. Suppliers' Registration Form is available at Western Railway website www.wr.indianrailways.gov.in
2. The mode of application is offline online only. Applicants needs to submitted filled application form along with requisite documents, application form cost & non refundable registration fee at the address mentioned in form.
3. Categories of Shortlisting for PAD items:
Category 'A': The firms/companies shortlisted in category 'A' will be allowed to supply PAD items to licensee operated Mobile and Static Catering Units over Western Railway.
Category 'B': The firms/companies shortlisted in category 'B' will be allowed to supply PAD items to licensee operated Static Catering Units Only over Western Railway.
4. Application form cost and Non Refundable Registration Fees payable with application form is as under:
A. Application Form Cost: Rs. 2500/-
B. Non Refundable Registration Fee:
 - a. **Category 'A' – Rs. 5,00,000/-.**
 - b. **Category 'B' – Rs. 3,00,000/-.**
5. All Demand Drafts for Application Form Cost & Non Refundable Registration Fee shall be drawn in favor of Chief **Cashier, Western Railway, Churchgate, Mumbai** drawn from a Nationalized/Scheduled Bank.
6. Applicant should fulfill eligibility criteria of turnover mentioned in Annexure – I for the preceding last two completed financial year on the date of application.
7. The Non Refundable Registration Fee submitted will be valid for the period of three years & non refundable. After three years same may be reviewed or revised by Minimum 10%.
8. Application not accompanied with Application Form Cost & Non Refundable Registration Fee will summarily be rejected. Application Form Cost once paid will not be refunded under any circumstance.
9. In the space given on the top of the form, indicate the brand and product for which short-listing for supplies to licensee units is sought. Each form is valid for **one product only.**

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10. Suppliers' Registration Form contains 12 pages. Applicant should sign all pages of application form with stamp & seal. Application must be signed by Proprietor/Partner/Director or any person authorized by Proprietor & Partner and in case of Company, authorized by Board Resolution. Applicant must submit copy of PAN Card of authorized signatory.
11. Information desired in all fields are essential, applicants must comply with the corresponding query. If the space provided is not sufficient the applicant may attach extra sheet(s). Applicants should fill all fields, if the field is not applicable, write 'Not Applicable'.
12. All the details must be given also with required supporting documents duly attested by Gazetted Officer/First Class Magistrate/Notary.
13. Western Railway reserves the right to reject any application at any point of time without assigning any reason.
14. Western Railway decision on Short-listing of applicants shall be final and binding.
15. The applicant will be shortlisted for the period of three years subject to renewal after every one year on satisfactory performance & submission of following documents:
 1. Submission of Balance Sheet & Profit/Loss Account for the preceding last two completed financial year duly audited by Chartered Accountant. In case of certified MSMEs/Startups, Balance Sheet & Profit/Loss Account for the preceding last one completed financial year.
 2. Chartered Accountants certificate, certifying sales turnover of specific products/brand for the preceding last two completed financial year duly audited by Chartered Accountant. In case of certified MSMEs/Startups, Balance Sheet & Profit/Loss Account for the preceding last one completed financial year.
 3. Valid FSSAI License.
 4. Valid Lab Test Report for all shortlisted products as per list of specification.
 5. Affidavit regarding not been banned/blacklisted or debarred by any Zonal Railway/IRCTC or Ministry of Railways.
16. Fresh application for shortlisting shall be submitted along with all the requisite documents as mentioned in this form, application form cost and non refundable registration fee on completion of three years of shortlisting well in advance.
17. This application is for granting permission for supplying applicant's products in licensee operated catering units. The applicant will directly deal with the licensee and Railway does not guarantee any specific or minimum sales volume. Further, Railway will not be responsible for any dispute between the applicant and the licensee of whatsoever.

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18. The applicant should submit the affidavit duly executed on appropriate non-judicial stamp paper undertaking that
- i. The firm/company and its brand/product is not banned/debarred or blacklisted by any Zonal Railway over Indian Railway/IRCTC or Ministry of Railways.
 - ii. The facts/statements mentioned in the Application Form and Documents submitted with the application form are genuine and true. If Railway finds any facts/statements/documents fake or wrong, at any point of time, application/shortlisting may be rejected and suitable penalty including termination of shortlisting, blacklisting, banning and debarring of firm/company & it brand/products may be imposed.
 - iii. The MRP of the products as well as quantity will be uniform both in open market as well as in Railways. The products should not be marked as 'Specially packed for Railways'.
19. In case, the validity of any of the documents such as FSSAI/BIS license expires during the period of shortlisting, the applicant should submit the renewed or new certificate issued by the concerned Authority within a month of its expiry. If the applicant fails to submit such renewed/new certificate within a specified period, Railway may take suitable punitive action including termination of shortlisting with forfeiture of shortlisting fee.
20. Any addition/deletion of item in the approved list of products and any revision in weight and rate shall be done with the prior approval of this office.
21. Railway reserves the right to inspect the production/manufacturing units of the applicants, as and when deemed necessary.
22. In case of any deficiencies notices/reported in products, failure of samples, complaints etc during the shortlisting period. The Railway reserves the right to impose any penalty(ies) including blacklisting/ debarring/revoking permission granted.

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Application Form for _____ brand(s) of _____ product for bringing them on shortlisting/approved list for Category _____.

(Note: Please refer Annexure I for eligibility criteria)

Application Form Cost and Non Refundable Registration Fee shall be submitted in the form of Demand Draft drawn in favor of **Chief Cashier, Western Railway, Churchgate, Mumbai** drawn from a Nationalized/Scheduled Bank.

	D.D. No.	Dated	Bank	Amount
Form Cost				
Registration Fee				

Sr. No	Particulars	Details	Encl No.
1	NAME OF BRAND(S) (ENCLOSE COPY OF CERTIFICATE FOR REGISTRATION OF BRANDS)		
2	NAME OF PRODUCTS		
3	NAME AND FULL ADDRESS OF THE MANUFACTURER OF THE BRAND, WITH TELEPHONE & FAX NO.	OFFICE:	
		FACTORY:	
4	STATUS OF APPLICANT- PROPRIETORSHIP/PARTNERSHIP/PRIVATE CO/PUBLIC LTD CO/COOPERATIVE/SSI COPY OF INCORPORATION CERTIFICATE, PARTNERSHIP DEED, MEMORANDUM OF ARTICLES & ARTICLES OF ASSOCIATION		
5	APPLICANT'S TURNOVER PER ANNUM FROM SALE OF FOOD & BEVERAGE ITEMS, FOR THE LAST TWO COMPLETED FINANCIAL YEARS* (Enclose audited Balance Sheet, P&L account duly audited by C.A.)	F.Y - 20	
		F.Y - 20	
6	APPLICANT'S TURNOVER PER ANNUM FROM THE SPECIFIC BRAND(S) FOR WHICH SHORTLISTING IS SOUGHT FOR THE LAST TWO COMPLETED FINANCIAL YEARS AS PER ANNEXURE-I* (Enclose C.A. certificate specifying turnover from brand(s))	F.Y - 20	
		F.Y - 20	

Stamp & Signature of Applicant

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7	VALID HEALTH LICENSE ISSUED BY COMPETENT AUTHORITY- FSSAI/BIS ETC. (Enclose attested copy of the license)							
8	TEST REPORT FROM A GOVT. APPROVED/ NABL ACCREDITED LABORATORY NOT OLDER THAN 6 (SIX) MONTHS, CERTIFYING THAT THE PRODUCT(S) IS/ARE CONFIRMS TO SPECIFICATIONS STANDARDS AS PER FSSAI & AS FOR PACKAGED DRINKING WATER AS PER IS 14543:2004 MENTIONED IN ANNEXURE-II AND OTHER SIX WATER PUFIFICATION PROCESS MENTIONED IN ANNEXURE – III							
9	DETAILS OF NATIONAL/REGIONAL DISTRIBUTION NETWORK (enclosed list of distributors/ dealers)							
10	DETAILS OF TESTING FACILITIES AVAILABLE IN THE FACTORY/PLANT (IN HOUSE/ OUTSOURCED FACILITIES) (Submit the details of facilities on letter head)							
11	PAN CARD NO. (Enclosed attested copy)							
12	GSTIN REGISTRATION NO. (Enclosed copy of the registration Certificate)							
13	AFFIDAVIT OF THE APPLICANT AS PER INSTRUCTION NO. 20 OF THE FORM. (To be submitted in original)							
SPECIFICATION OF THE PRODUCT(S)(ATTACH EXTRA SHEET IF REQUIRED)								
14	Sr. No.	Flavour	Color	Weight	Unit Packing Size	Supply Packing Size for	Other Information	MRP
15	DETAILS OF THE SUPPLIES MADE DURING THE LAST TWO YEARS (20__ & 20____) (Enclosed copies of invoices.)							

Stamp & Signature of Applicant

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WESTERN RAILWAY**Suppliers' Registration Form - 2022****VERIFICATION**

- I/We _____ solemnly declare that to the best of my/our knowledge and belief, the information given in this application form and the annexure and statements accompanying is/are correct, complete and truly stated and also that I/we shall be bound by the acts of my/our duly constituted attorney.
- I/We understand that, in case the brand is not shortlisted due to some reasons, the Non Refundable Registration Fees deposited, shall be returned to the party without any interest. Form cost will not be refunded.
- It is certified that this is not a Tender Form but an Application for shortlisting of brands of PAD items & Packaged Drinking Water (in absence of Rail Neer) for private licensee units only.
- Samples of the products will be sent as & when demanded for shortlisting, free of cost to Western Railway.
- The following person(s) may be contacted for any information or clarifications relating to this Registration Form:

NAME:**DESIGNATION:****TELEPHONE:****MOBILE:****DATED:** _____**(Signature of the Applicant)****Seal of Firm/Company****Address:**

Stamp & Signature of Applicant

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WESTERN RAILWAY**Suppliers' Registration Form - 2022****ANNEXURE I****Eligibility Criteria:**

The firm should have requisite turnover, as given below, from sale of Food & Beverages items and from the sale of specific brand/product for which Shortlisting is sought, for the last two completed financial years..

Sr. No.	Segment	Category	Turn Over per annum from sale of F &B items	Turnover from the sale of the specific Brand	EMD to be submitted as per application
1					
a	ICE CREAM/FROZEN DESERT Must comply with FSSAI standards	'A'(Mobile & Static Catering Units)	Rs.20.00 Crore	Rs.05.00 Crore	Rs.5.00 Lakhs
b	AERATED/ENERGY DRINKS Must comply with FSSAI standards				
c	BISCUITS Must comply with FSSAI standards				
d	CONFECTIONERY ITEMS INCLUDING SWEETS & CHIKKI Must comply with FSSAI standards				
e	FLAVOURED MILK/MILK PRODUCTS Must comply with FSSAI standards	'B'(Static Catering Units)	Rs.05.00 Crore	Rs.02.00 Crore	Rs.3.00 Lakhs
f	FRUIT DRINKS Must comply with FSSAI standards				
g	FRUIT DRINKS Must comply with FSSAI standards				
2	PACKAGED DRINKING WATER (PDW)	'A'(Mobile & Static Catering Units)	Rs.05.00 Crores	Rs.05.00 Crores	Rs.5.00 Lakhs
	1000ml./500ml/300ml/250ml. (Must confirm to IS 14543:2004 standards)	'B'(Static Catering Units)	Rs.02.00 Crores	Rs.02.00 Crores	Rs.3.00 Lakhs

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Sr. No.	Segment	Category	Turn Over per annum from sale of F &B items	Turnover from the sale of the specific Brand	EMD to be submitted as per application
3					
a	CAKES Must comply with FSSAI standards	'A'(Mobile & Static Catering Units)	Rs.05.00 Crores	Rs.02.00 Crores	Rs.5.00 Lakhs
b	NAMKEENS Must comply with FSSAI standards				
c	CHIPS Must comply with FSSAI standards				
d	TEA-BULK PACK IN PACKETS & TEA BAGS Must comply with FSSAI standards				
e	COFFEE POWDER – BULK PACK IN PACKETS & SACHETS Must comply with FSSAI standards	'B'(Static Catering Units)	Rs.01.25 Crores	Rs.00.50 Crores	Rs.3.00 Lakhs
f	TOMATOKETCHUPBOTTLE/ SACHETS1KG PACK& 12-15GM SACHETS Must comply with FSSAI standards				
g	BREAD & BAKERY PRODUCTS EXCEPT CAKE Must comply with FSSAI standards				
4					
a	BUTTER IN FOIL/BLISTER PACK (8-10 GMS) Must comply with FSSAI standards	'A'(Mobile & Static Catering Units)	Rs.02.00 Crores	Rs.00.50 Crores	Rs.5.00 Lakhs
b	BLISTER PACK PICKLE/JAM Must comply with FSSAI standards	'B'(Static Catering Units)	Rs.00.50 Crores	Rs.00.50 Crores	Rs.3.00 Lakhs
c	SACHET – DAIRY CREAMER Must comply with FSSAI standards				

Stamp & Signature of Applicant

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Sr. No.	Segment	Category	Turn Over per annum from sale of F &B items	Turnover from the sale of the specific Brand	EMD to be submitted as per application
d	SACHET – SUGAR Must comply with FSSAI standards	'A'(Mobile & Static Catering Units)	Rs.02.00 Crores	Rs.00.50 Crores	Rs.5.00 Lakhs
e	SACHET – SALT Must comply with FSSAI standards	'B'(Static Catering Units)	Rs.00.50 Crores	Rs.00.50 Crores	Rs.3.00 Lakhs
f	SACHET – PEPPER Must comply with FSSAI standards				
5	PACKED COCONUT WATER IN TETRA PACK Must comply with FSSAI standards	'A'(Mobile & Static Catering Units)	Rs.01.00 Crore	Rs.01.00 Crore	Rs.5.00 Lakhs
		'B'(Static Catering Units)	Rs.50.00 LAKH	Rs.50.00 LAKH	Rs.3.00 Lakhs

- i The company/firm should be registered for manufacturing and selling similar products in India.
- ii The company/firm should possess at least 2 years experience of manufacturing the product in India.
- iii The company/firm should possess valid health License issued by competent Government Authority.
- iv The Brand for which shortlisting is sought should be registered.
- v The Applicant should enclose copy of all relevant documents with sign and seal in support of requisite information in SRF, along with Balance Sheet and P&L account of last two completed financial years 20_____ & 20_____.

Send your application on the following address:

**Chief Claims Officer
3rd Floor, Commercial Department,
Station Building, Head Quarter Office,
Churchgate, Mumbai – 400 020.
Telephone no.: 022 676 22592
Email: shortlistingwr@gmail.com**

WESTERN RAILWAY**Suppliers' Registration Form - 2022****Annexure II****Specifications:-**

The "Packaged Drinking Water" shall confirm to the following fifty one (51) specifications:

Sr. No.	Characteristics	Sr. No.	Characteristics
1	Colour	27	Alkalinity (as HCO ₃)
2	Odour	28	Arsenic (as As)
3	Taste	29	Cadmium (as Cd)
4	Turbidity	30	Cyanide (as CN)
5	Total Dissolved Solids	31	Chromium (as Cr)
6	PH	32	Mercury (as Hg)
7	Nitrates(as No ₃)	33	Lead (as Pb)
8	Nitrites(as No ₂)	34	Selenium (as Se)
9	Sulphide (as H ₂ S)	35	Iron (as Fe)
10	Mineral Oil	36	Poly nucleeromeric hydrocarbons
11	Phenolic Compounds(asC ₆ H ₅ OH)	37	Polychlorinated biphenyle (PCB)
12	Manganese (as Mn)	38	Aluminium (as Al)
13	Copper(as Cu)	39	Residual free chlorine
14	Zinc(as Zn)	40	Pesticide Residues
15	Fluoride(as F)	41	'Alpha" activity
16	Barium (as Ba)	42	"Beta" activity
17	Antimony (as Sb)	43	Yeast andmould counts 1 x 250 ml.
18	Nickle (as Ni)	44	Salmonella and Shigella 1x 250 ml.
19	Borate (as B)	45	E.Coli or thermotolerant bacteria 1 x 250 ml.
20	Anionic surface active agents (as MBAS)	46	Coliforma bacteria 1 x 250 ml.
21	Silver (as Ag)	47	Faecal streptococci and staphylococcus aureus 1 x 250 ml.
22	Chlorides (as Cl)	48	Pseudomonas aeruginosa 1 x 250 ml.
23	Sulphate (as SO ₄)	49	Sulphite-reducing anaerobes 1x 50 ml.
24	Magnesium (as Mg)	50	Vibro cholera and V. Parahaemolyticus 1x 250 ml.
25	Calcium (as Ca)	51	Aerobic Microbial Count 1 x 250 ml.
26	Sodium (as Na)		

Stamp & Signature of Applicant

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Annexure II**

It is mandatory to have the following six water purification process or similar nature and type viz.

- i. Chlorination of raw water.
- ii. Activated carbon filters.
- iii. Micron filters.
- iv. Reverse Osmosis unit (RO).
- v. Ultra Violet sterilizer unit.
- vi. Ozonising unit.

Further purification by process of (i) Auto softener unit (ASP) (ii) Ultra filtration unit are also desired

******* END OF DOCUMENT *******

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FORMAT FOR APPLICATION FOR RATE CONTRACT

(To be submitted on letter head of Firm/Company)

To,
Chief Commercial Manager
(Claims & Catering)
Western Railway
Churchgate

Sub: Application for Rate Contract for supply of _____ (Product name) to
Departmental Catering Unit at Churchgate.

~~~~~  
With reference to the above, our product has been shortlisted over Western Railway  
for a period from \_\_\_\_\_ to \_\_\_\_\_ (Copy of shortlisting letter attached).

Following shortlisted products are offered for supply to Departmental Catering  
Units at Churchgate on Rate Contract:

| Sr. No. | Item | Weight (per unit) | MRP (per unit) inclusive of all taxes (in Rs.) | %age commission offered to Railway all inclusive | Net offered rate (inclusive of all in Rs) |
|---------|------|-------------------|------------------------------------------------|--------------------------------------------------|-------------------------------------------|
|         |      |                   |                                                |                                                  |                                           |
|         |      |                   |                                                |                                                  |                                           |
|         |      |                   |                                                |                                                  |                                           |

It is mentioned that despite change in size/MRP, the rate of commission offered will remain unchanged during the period of rate contract.

Detail of our authorized distributor supplying products to Departmental units:

1. Name of the Firm:
2. Name of Contact person:
3. Bank's name & branch:
4. Type of Account:
5. Account Number:
6. MICR Code of Bank:
7. IFSC of Bank:
8. Pan Number:
9. GSTIN Number:

Copies of cancelled cheque, Pan Card & GST certificate are attached.

It is requested to permit our product for supply to departmental catering unit at Churchgate on rate contract.

Encl.: As above

**(Signature of Authorized person)**  
**Stamp & seal of firm/company**

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| Version 1.4.2 dated 30/06/2017                                                |                                                                                                      |       |                                    |
|-------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|-------|------------------------------------|
| <b>FORM FOR ENTRY FOR GST MANUAL TRANSACTIONS OF RECEIPT</b>                  |                                                                                                      |       |                                    |
| <b>Part A to be filled by Representative of Vendor/Contractor (Recipient)</b> |                                                                                                      |       |                                    |
| 1.                                                                            | Transaction Type                                                                                     |       |                                    |
| 2.                                                                            | Old Invoice No.                                                                                      |       |                                    |
| 3.                                                                            | Station/Office: CCG – FA&CAO                                                                         | 5.    | Zone: Western                      |
| 4.                                                                            | Division: HQ/CCG                                                                                     |       |                                    |
| 6.                                                                            | Railway Department: Accounts                                                                         | 7.    | State: Maharashtra                 |
| 8.                                                                            | Goods and Services Transaction Description: CATERING<br>(e.g. Parcel, EFT, Sale of Scrap & Loco etc) |       |                                    |
| 9. Recipient Details                                                          |                                                                                                      |       |                                    |
| 9.1                                                                           | Name:                                                                                                |       |                                    |
| 9.2                                                                           | Registered with GSTIN (Y/N) :                                                                        | 9.3   | GSTIN:                             |
| 9.4                                                                           | Is Tax Payable on Reverse Charge Basis (Y/N) :                                                       | 9.5   | State:                             |
| 9.6                                                                           | Registered Address                                                                                   |       |                                    |
| 9.7                                                                           | Email ID:                                                                                            | 9.8   | Phone:                             |
| 9.9                                                                           | Place of Supply /Service Address:                                                                    |       |                                    |
| 9.10                                                                          | Place of Delivery /Service Address:                                                                  |       |                                    |
| 9.11                                                                          | Signature/Name of Representative/Vendor                                                              |       |                                    |
| <b>PART B – To be filled by Railway Official (Supplier)</b>                   |                                                                                                      |       |                                    |
| <b>Imp: Invoice Number must be printed on the MR/Parcel Way Bill etc.</b>     |                                                                                                      |       |                                    |
| 1.                                                                            | Invoice No.:                                                                                         | 2.    | Invoice Issue Date:                |
| 3.                                                                            | MR No.                                                                                               | 4.    | Station/Cash Office Code: CCG – 20 |
| 5.                                                                            | GSTIN (State – Rly): MAH – WR                                                                        | 6.    | State Code: 27                     |
| 7.                                                                            | Accounts Allocation Code:                                                                            | 8.    | Department Code: 20                |
| 9.                                                                            | Railway's GSTIN Registered Address:                                                                  |       |                                    |
| 10.                                                                           | Service Accounting/HSN Code:                                                                         |       |                                    |
| <b>11. Invoice and Tax Charged Details</b>                                    |                                                                                                      |       |                                    |
| 11.1                                                                          | Total Value of Supply:                                                                               | 11.2  | Total Taxable Value: N.A           |
| 11.3                                                                          | IGST Rate: N.A                                                                                       | 11.4  | IGST Amount: N.A                   |
| 11.5                                                                          | CGST Rate: N.A                                                                                       | 11.6  | CGST Amount: N.A                   |
| 11.7                                                                          | SGCT/UGTS Rate: N.A                                                                                  | 11.8  | SGST/UGST Amount: N.A              |
| 11.9                                                                          | Cess Rate: N.A                                                                                       | 11.10 | Cess Amount: N.A                   |

**(Signature of Railway Official)****(Stamp)**