INDIAN INSTITUTE OF TECHNOLOGY TIRUPATI

TECHNICAL EVALUATION REPORT of "Notice Inviting Expression of Interest (EoI) For Providing Taxi Services to IIT Tirupati" (Tender Ref. No. IITT/ADMIN/2023-24/20 dated 13-11-2023)

| Sl. No. | Description | M/s. Master Tours & Travels | M/s. Professional Enterprises |
|---------|---|--|---|
| 1 | Name of registered Firm/Company (with Proof of Registration) | Master Tours & Travels | Professional Enterprises No Proof of Registration |
| 2 | Date of Establishment | 01-04-2021 | 08-12-2023 |
| 3 | Full Postal Address | D.No: 9-1/J, Gopalavanam, Srikalahasti, Tirupati Dist. – 517 644. | D.No: 13-214/4, Ground Floor, Beside DCC Bank, Yerpedu, Tirupati Dist. – 517 619 |
| 4 | Name of the authorized person with Telephone/Fax No., E-mail: | Name : P. Ashraf Ali Khan Designation : Proprietor E-mail : <u>ashrafalikhan1986@gmail.com</u> Mobile No. : 8801122227 | Name : T Kishore Designation : Proprietor E-mail : t.kishore0@gmail.com Mobile No. : 8247742478 |
| 5 | Sole proprietor or Partnership firm or a Company or a Government Department or a Public Sector Organization (Attach proof) | Sole Proprietor | Sole Proprietor |
| 6 | PAN Number Details | BWKPP2667K | BTWPT4324G |
| 7 | GST Number Details | 37BWKPP2667K1ZT | Applied for GST Number under ARN AA371223002639D No GST Number |
| 8 | The Bidder should have its office within the vicinity of 50 KM radius from the Institute for operational conveniences. (Proof of the same is to be submitted.) | Submitted | Submitted |
| 9 | EoI acceptance letter in Annexure I | Submitted | Submitted |
| 10 | The average annual financial turnover of the bidder should be ₹2 lakhs or above for a period of last three financial years. (Documentary evidence Duly certified by the valid Chartered Accountant must be enclosed with the technical bid along with Annexure-II | Submitted | Not Submitted |
| 11 | List of Completed/Ongoing contracts in Annexure-III | Completed : - Ongoing : IIT Tirupati | Completed : - Ongoing : Trips to Tirumala |
| 12 | Number of years of experience in the field of Providing Taxis | Two Years | Less than One Year |
| 13 | Number of vehicles owned and operated by the company with year of manufacture. (separate sheet indicating the registration number, year of manufacturing, Seating capacity only with copies of R. C. books may be enclosed) | Three Vehicles Details Submitted | Three Vehicles. Details Not Submitted |
| 14 | Bank Details of the Agency Bank Name : Name of the Branch : Branch Code : Bank Address Bank : Type of Account : Account Number : NEFT/IFSC Code : RTGS Code : 9 Digit MICR Code : | Submitted | Submitted |
| | RECOMMENDATION | Qualified | Not Qualified |

The committee recommends for further process.