Annexure-I From- (A) FORMATION AND PUBLIC RELATION

INFORMATION AND PUBLIC RELATIONS DEPARTMENT GOVERNMENT OF BIHAR, PATNA

APPLICATION FORM FOR EMPANELMENT AND FIXATION OF DEPARTMENTAL RATE (For Newspaper only)

	(I of Newspaper offig)
(1)	Name of the Newspaper (in block letters):
(a)	Date of first publication:
(b)	RNI Registration No.:
(2)	Complete Address (In Block Letters):
(a)	Corporate Office Address:
(b)	Local Address:
(3)	Phone:
(4)	Fax:
(5)	Complete E-mail Address:

ANNEXURE-I Form (B)

INFORMATION AND PUBLIC RELATIONS DEPARTMENT GOVERNMENT OF BIHAR, PATNA

APPLICATION FORM FOR EMPANELMENT AND FIXATION OF DEPARTMENTAL RATE (For Newspaper only)

(B) N	Name of Editor Applied For	
(1)	(a) Place of publication:	o) State:
(2)	(a) Language:	b) Periodicity:
(3)	No. of Pages:	ii diii,
(4)	No. of Columns per page:	
(5)	Column width:	
(6)	Size of the paper: Length cms.	Width cms.
(7)	Actual Print Area per page: Length cms.	Width cms.
	Total sq.cm	ıs.
Total	al Print Area of the Newspaper: sq.cm	ns.
(8)	Name of the publisher:	
	Father's/Husband's Name:	
(9)	Name of the Printer:	
	Father's/Husband's Name:	
(10)	Name of the Editor:	
	Father's Husband's Name:	
(11)	Name of owner:	
	Father's/Name (If owned by Company Firm/Trust, not r	required):
(12)	Quality of paper used (Please) : Standard Newsprint/G	lazed/LWC:
(13)	Details of Printing Press:	
	Name of Press:	
	Address:	
	Phone:	

(14) Please tick process of printing: (a) Offset (b) Letter Press
(15) Price of Newspaper Rs. Paise
(16) Minimum current Advt. Card Rate: (a) Sq.cm.(B.W) (b) Full Page (B/W)
(c) Sq.cm (Colour) (d) Full Page(Colour)
(17) Rate of Special Campaign (Jacket/Blancket/Pop-up leaves/Centre spread etc.)
Per Page Per Sq cm.
(18) Last DAVP Rate (if any) Date.
(19) Actual No. of publishing days in the year
(previous financial year from the date of applying for the empanelment)
(20) No. of declared holiday (in the year
(previous financial year) (for dailies)
(21) Weekly holiday, if any (for dailies):
(22) Details of the Patna representative, if any:
Name:
Address:
Phone No.:
Fax:
E-mail Address
(23) Details of Bank Account Payable at
MICR
IFCE Code
Bank Name
Branch Name
Ledger Folio
Account No.
Account Type
(24) PAN Card No. (if allotted)

(25)	Please give details of	other publication	ns of same owner or p	ublisher.					
Title	Language	Periodicity	Place of Publication	DAVP Code					
(if er	mpanelled).								
(1)		(2)		(3)					
(4)		(5)							
(26)	I have submitted the f	ollowing docume	ents:						
	(i) R.N.I. Registration	Certificate:							
	(ii) Average circulation	for the period:							
		Circulation	A	ttached					
(iii)	Average per publishing day circulation for the financial year								
	as per CA Certificate with membership No.								
	(iv) Copy of Annual Re	eturn to RNI atta	ched (Year)						
	(v) Issues to be subm	itted or rate rene	wal of newspaper:						
		I affirm that a	all the information give	en above by me is true and					
	nothing has been con-	cealed.							
Plac	e:		Signature of	Publisher/Auhorised Person					
Date	e : (with date & office s	eal)							
			Full Name of Po	ublisher/Authorised Person					

(In Block Letters)

ANNEXURE-II

Documents required for empanelment with information and Public Relations, Bihar:

- (1) RNI Registration Certificate Number:
- (2) Evidence for Circulation (Chartered Accountant Certificate/Statutory Auditor Certificate/ABC Certificate, as applicable).
- (3) Copy of the annual return submitted to RNI.
- (4) Copy of DAVP rate.
- (5) A daily newspaper should furnish issues of the 12th months of their regular publication. Daily Publications more than one year old and not previously empanelled with infromation and Public Relations, Bihar will furnish the relevant copies starting with the previous one year in the same manner as above.
- (6) Three copies of the rate card.
- (7) Photocopy of the Permanent Account Number (Issued by Department of Income Tax).

ANNEXURE-III

(Form-A)

INFORMATION AND PUBLIC RELATIONS DEPARTMENT GOVERNMENT OF BIHAR, PATNA

APPLICATION FORM FOR EMPANELMENT AND FIXATION OF DEPARTMENTAL RATE

	(For Magazine only)
(1)	Name of the Magazine (in block letters):
(a)	Date of first publication:
(b)	RNI Registration No.:
(2)	Complete Address (In Block Letters):
(3)	Phone:
(4)	Fax:
(5)	Complete E-mail Address:

ANNEXURE-III

(Form-B) INFORMATION AND PUBLIC RELATIONS DEPARTMENT **GOVERNMENT OF BIHAR, PATNA**

APPLICATION FORM FOR EMPANELMENT AND FIXATION OF DEPARTMENTAL RATE (For Magazine only)

(1)	(a) Place of Publication:	(b) State:				
(2)	(a) Language:	(b) Periodicity (if any):				
(3)	No. of Pages:					
(4)	No. of Columns per page:					
(5)	Column width:					
(6)	Size of the Magazine: Length	cms. Width cms.				
(7)	Actual Print Area per page: Length cr	ns. Width cms.				
	Total	sq.cms.				
Tota	I Print Area of the Magazine:	sq.cms.				
(8)	Name of the publisher:					
	Father's/Husband's Name:					
(9)	Name of the Printer:					
	Father's/Husband's Name:					
(10)	Name of the Editor:					
	Father's Husband's Name:					
(11)	Name owner:					
	Father's Name (If owned by Company:					
	(Firm's/Trust, not required):					
(12)	Quality of paper used (✓) : Standard Newsprint/0	Glazed/LWC:				
(13)	Details of Printing Press:					
	Name of Press:					
	Address:					
	Phone:					
(14)	Please tick process of printing: (a) Offset	(b) Letter Press				

(15) Price of Magazine Rs.						Paise		
(16)	Minimum cu	rrent Advt.	Card Rate:	(a)	;	Sq.cm.(B.W)	(b)	Full Page (B/W)
(c) S	Sq.cm	(Colour) ((d)	Full P	Page(Co	lour)		
(17)	Last DAVP F	Rate (if any	·)					Date.
(18)	Actual No. o	f publishin	g days in th	e yeaı	ır			
	(previous fin	ancial year	r from the d	ate of	fapplyin	g for the emp	aneln	nent)
(19)	No. of decla	red holiday	γ (in the year	ır				
	(previous fin	ancial yeaı	r) (for Maga	zine)				
(20)	Weekly holid	lay, if any (for dailies):					
(21)	Details of the	e Patna rep	oresentative	e, if an	ny:			
	Name:							
	Address:							
	Phone No.:							
	Fax:							
	E-mail Addre	ess:						
(22)	Details of Ba	ank Accour	nt Payable a	at:				
MIC	R:							
IFCE	E Code:							
Banl	k Name:							
Bran	nch Name:							
Led	ger Folio:							
Acco	ount No.							
Acco	ount Type:							
(23)	PAN Card N	o. (if allotte	ed):					
(24)	Please give	details of c	ther publication	ations	of same	e owner or pu	ıblishe	er.
Title	Langu	age	Periodicity if any		Place o	f Publication		DAVP Code
(if er	mpanelled).		ii airy					
(1)			(2)			(3)	
(4)			(5)					

(25)	(25) I have submitted the following documents:									
	i) R.N.I. Registration Certificate:									
	(ii) Average circulation for the period:									
	Circulation Attached									
(iii)	Average per publishing day circulation for the financial year									
	as per CA Certificate with membership No.									
	(iv) Copy of Annual Return to RNI attached (Year)									
	(v) Issues to be submitted or rate renewal:									
	Weeklies/Fortnightilies - Latest issues									
	Monthlies & others - Latest issues									
	I affirm that all the information given above by me is true and									
	nothing has been concealed.									
Plac	e: Signature of Publisher/Auhorised Person									
Date	Date : (with date & office seal)									
	Full Name of Publisher/Authorised Person									
	(In Block Letters)									

ANNEXURE-IV

Documents required for empanelment with information and Public Relations, Bihar:

- (1) RNI Registration Certificate Number:
- (2) Evidence for Circulation (Chartered Accountant Certificate/Statutory Auditor Certificate/ABC Certificate, as applicable).
- (3) Copy of the annual return submitted to RNI.
- (4) Copy of DAVP rate.
- (5) A daily newspaper should furnish issues of the 12th months of their regular publication. Daily Publications more than one year old and not previously empanelled with infromation and Public Relations, Bihar will furnish the relevant copies starting with the previous one year in the same manner as above.
- (6) Three copies of the rate card.
- (7) Photocopy of the Permanent Account Number (Issued by Department of Income Tax).



IPRD Electronic Media Empanelment and fixation of Departmental Rate Application Format

(One application for each channel/medium/agency)

					Αį	plicatio	n No _	
								(For office use only)
1.	Name of Firm							
2.	Date of incorporation							
3.	Date of Application							
4.	Information of Work							
5.	Media Applied		[1] [2]	[3]	Tick Ap	pplicable	(Only C	ne)
		[1]	TV Chann	el / Ra	adio Cha	annel /Di	gital Cir	nema/ Cable TV
		[2]	Airport / I	Railwa	y Static	n Electr	onic Dis	play
7. 8. 9.	Name of the Channel/ Area of operation: (Give name of the city/ Language : Periodicity : Locations of Studio :							
	Address :							
	I. Head Office							
	Address :							

	Fax No. :	E-mail :	_
	Mobile No. :		
II.	Branch Office		
	Address :		_
			-
	Fax No. :	E-mail :	-
	Mobile No. :		
III.	Patna Office (if any)		
	Address :		-
	 Fax No. :	E-mail :	-
	Mobile No. :		-
	lease give details of all	fors/MD/ Head of Company fineeded use separate sheets)	
			_
	Fax No. : Mob. No	E-mail :	
13. Licen	sing Authority Details		
Name	of the Authority which	ranted License to Media:	
(Attac	h license)		
Period	d of License:	From:Till:	
adver	ne authority granting Li tisement rates. If yes g ntioned in Para 16 (a) 8	e details of the rates fixed :	

14.	Media	Details:									
	a.	Number of d	aily viewer	s (Avera	ge of last S	Six Months)					
		(Documental Proof of Viewers to be attach)									
	b.	Enclosed Cer	tificate for	up linki	ng and do	wnlinking (if	applical	ble)			
	c.	Category of T	Telecast	(i) Re	gional	(ii) National	(iii) La	inguage			
	d.	Category of C	Channel ;	News;	Cultural ; S	Socio econom	ic or ot	her type m	ention		
	e.	No. of daily V	/iewers in E	Bihar Sta	te (Attach	documents) :					
	f.	Copy of Gran	t of Permis	ssion Agr	eement(G	OPA) signed v	with Mi	nistry Of I 8	& В		
		(Only for CRS	& Radio C	hannel)							
	g.	Copy of valid	Wireless C	Operating	g License (WOL) issued b	y WPC				
		(Only for CRS	& Radio C	hannel)							
	h.	Total No. of [Digital Cine	ma Thea	ntres/Elect	ronics Display	boards	i			
	i.	No. of Digital	l Cinema Th	neatres/	Display bo	ards in Bihar					
15.	Media	chanism of log a empanelled nation and Bro	by Directo	rate of A	dvertising	& Visual Pub					
		[]	Yes	[] N	lo	Tick Ap	plicable	(Only One)		
	а.	If empanelle mentioned b	-	, Mentic	on the Rat	e Approved w	ith det	ails in the f	ormat		
		Sr No.	Display Si telecast /Per 10 so		Details of format	of Approve Rate	ed	Total	Validity Period		
						Grand 1	Fotal :				

b. For other advertising formats which do not have DAVP approved rates, give information below, including rates approved by licensing authority, if any as per para 14: S.No. **Display Format** Location Offered Latest Rate given by Remarks (City/State) any Govt./PSU as per Rate work order * 1. L Band (TV) Scroll (TV) 2. 3. Aston (TV) 4. Scroll (Cinema/Display Board etc.) 5. Others * Please submit latest work order along with rate approved by any Govt./PSU. (Attach supportive documents viz. self attested copy of agreement of Sole right indicating location, receipt of amount paid, validity etc.) c. Service Tax Registration No: TIN / TAN / GST No.: d. Any other information by the Agency : _____ e. Submit a self declaration stating on oath that the details submitted by you on Performa are true and correct. (Attach extra sheet for the item 4, 5 & 6 or for other para if required. Attached: [] Yes [] No 16. Special Rate or Discount offered by the Firm for a Campaign (a) For 7 Days (b) For 15 Days (c) For 1 month (d) More than 1 month 17. NEFT Detail (attach copy of PAN No and authorization of Bank for NEFT payment as following): Agency Name: PAN No.: Bank Name: Branch: IFSC Code: Account No.:

	(PI.	attach autr	nority letter of the board)							
19	9. Documents to be attached as per Annexure 1 & as per format.									
20). An	y other rele	vant information:							
	SI.	Para	Information							
	Atta	ch extra she	eets, if needed							
	Date	e:	Signature of Authorised Signatory							
			Name of the authorized signatory:							
			Seal of Agency							

18. Name of authorized signatory/ person alongwith photograph, who is authorized to deal with

IPRD, Bihar, Patna.

21. List of Documents Submitted (with Page No):

SI. No	Name of Document	Page No

ANNEXURE 1

Checklist of documents to be attached:

- 1. Copy of Registration Certificate, if applicable.
- 2. Memorandum of articles/Byelaws of the company or as required.
- 3. Documental proof as mentioned in the format.
- 4. Photographs of Displayed Medium (Separate photo for each property), if applicable.
- 5. CA certified balance sheet for past three years.
- 6. Certificate of the firm designating authorized signatory along with attested photographs.
- 7. To be signed by authorized signatory on each page.
- 8. The agency may submit details in typed sheets in the prescribed format. There shall be no space bar.
- 9. For details and rates offered for different advertising formats separate sheets can be attached.

Note: Incomplete form / without required documents will be summarily rejected.

- a. All application should addressed to: Director, Information and Public Relations

 Department, Government of Bihar, 3rd Floor, Soochna Bhavan, Patna (Application hardcopy with documents should be submitted at the facilitation centre, IPRD, Soochna Bhawan and obtain receipt.)
- b. All interested Sole Right Agencies may apply in the 1st week of every month. Hardcopy of the Application along with documents should be submitted by the end of the month.

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