

वेस्टर्न कोलफील्ड्स लिमिटेड

Western Coalfields Limited (मिनीरत्न कंपनी)(A Miniratna Company) (कोल इंडिया लि. की अनुषंगी कंपनी) (A Subsidiary of Coal India Limited)



विपणन एवं विक्रय विभाग

email – gmsales.wcl@coalindia.in
CIN - U10100MH1975GOI018626

Deptt. of Marketing & Sales

2 FAX: 0712 −2511061/2512977

www.westerncoal.in

पंजीकृत कार्यालयः कोयला विहार,सिविल लाईस, नागपुर (महाराष्ट्र)-440001

Regd.Off.: Coal Estate, Civil Lines, Nagpur (MS) - 440001

सन्दर्भ संख्याः वेकोलि/विप एवं वि/2022/comm\. / 🖟 🗓 🐧

दिनांक: 23.11.2022

NOTICE

Undertaking in the form of Affidavit to be submitted by Non-Power/ Non-Regulated Sector FSA holders

This has reference to WCL's Notice No. NGP/WCL/M&S/Comml/439 dated 07.11.2022 on modalities for banning/ blacklisting of NRS Consumers for mis-utilisation/ mis-direction of coal, enclosing CIL's Notice No. CIL/M&S/Linkage Auction/28 dated 01.11.2022. As per CIL's notice dated 01.11.2022, all the bidders/ FSA holders are required to submit an Undertaking in the form of Affidavit sworn before appropriate Authority about factual status of investigations, if any and its current status against them by investigating agency or Court of law, regularly once a year.

In view of the above, all the Linkage Auction FSA holders are requested to submit an Undertaking in the form of Affidavit sworn before appropriate Authority, as per the enclosed format, till 31st December'2022 for the year 2022-2023. Similar Undertaking in the form of Affidavit shall also be required to be submitted annually during the entire tenure of the FSA, in the month of April of each year. Further, any change in status subsequent to submission of the Affidavit shall also need to be intimated to WCL through fresh Undertaking in the attached format.

Encl: As above

General Manager (M&S)

Copy to:

- 1. GM(System), WCL: with a request to host the notice on WCL website
- 2. GM(M&S-Comml), CIL, Kolkata
- 3. HOD(Legal)
- 4. All Sectional Heads, M&S Deptt., WCL HQ
- 5. Notice Board

ON NON-JUDICIAL STAMP PAPER OF Rs. 500/-

Undertaking in reference to WCL Notice No. NGP/WCL/M&S/Comml/439 dated 07.11.2022

| reg offi | , S/o resident of, the authorised signatory of M/s, pistered under the Act,, having its registered ice at, do hereby solemnly undertake and affirm on oath under that, : | | | | | | | | |
|-------------|---|--|--|--|--|--|--|--|--|
| | I am the (designation)of the Purchaser and duly authorised to affirm and sign this Undertaking on behalf of M/s | | | | | | | | |
| | It is hereby affirmed that there are no pending investigations or communication from Statutory Authorities like CBI, Police, Court of Law or Subsidiary Coal Company of Coal India Limited containing allegations/findings/ establishing charge(s) of misutilization of coal in respect of coal supplied to any unit covered under the Fuel Supply Agreement (FSA) Nodated _, or any other FSA executed with WCL or any other Subsidiary Coal Company of Coal India Ltd. | | | | | | | | |
| | Or · | | | | | | | | |
| | (i)Current status of pending investigations/ communication from Statutory Authorities (CBI/ Police/Court of Law) or Subsidiary Coal Company of Coal India Limited namely, containing allegations/ findings/ establishing charge(s) of misutilization of coal in respect of coal supplied to any unit covered under the Fuel Supply Agreement (FSA) Nodated or any other FSA executed with WCL or any other Subsidiary Coal Company of Coal India Ltd.is given vide 3(ii). | | | | | | | | |
| | (ii)Current Status. (Detail of each case to be given) | | | | | | | | |
| | (iii) Suspension of supply due to above detailed case vide 3(ii) was made applicable by(name of subsidiary Coal Company) with effect from | | | | | | | | |
| | (iv)Blacklisting/banning from FSA/ participation in Linkage Auction was made applicable by (name of subsidiary Coal Company) with effect from | | | | | | | | |

(delete 2 or 3 whichever is not applicable).

| | M/s anything contrary to the | fully abov | ้ เ ve | undertakes is observed | to d by | indemnit WCL. | fy WCL, in o | case | |
|---|------------------------------|---------------|-----------|---------------------------|------------|------------------|--------------|------|--|
| | | | | | | | DEPONENT | | |
| VERIFICATION | | | | | | | | | |
| I, , do herby verify that the contents of the above affidavit are true and correct and nothing material has been concealed therefrom. | | | | | | | | | |
| ٠, | Verified at on the day of | | | · | | | | | |
| | | | | | | | DEPONENT | | |

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