BIODATA FORMAT

APPLICATION FOR INCLUSION OF NAME IN THE PANEL OF CHARTERED ACCOUNTANTS FIRMS FOR CONCURRENT AUDIT

1. Name of the Audit firm :

2. Date of Establishment :

3. Address (Head Office) :

4. Phone & mobile number of H.O.

5. Fax No. & E -mail :

6. Registration No. of firm with ICAI :

7. Details of Branch

Name	of	Name	of	Branch	Address	Phone/ Mobile No.
Branch		Head				

8. Constitution (Partnership):

(Copy of Partnership deed & copy of constitution Certificate issued by the ICAI certifying the constitution of the firm & branches as on DATE 01.01.2015 to been closed). If there is any change after 1.1.2015 latest certificate & latest partnership deed may be submitted.

9. Particulars of Partners:

S.No.	Name	Age	ICAI Membership No.	Whether Passed DISA/CISA*/(Xerox copies of the	Whether FCA or ACA
				certificates to been closed)	



- * (Certificate of practical training or Eligibility test are not at all required). If any partner is not full time partner, please mention the same against his name in Bold letters.
- 10. Past Experience of important Bank Assignment (Experience of Firm only to be mentioned. Separate experience of partners with any other firm is not to be mentioned)- Details of the important Bank assignment (s) completed in the last 5 years and those in hand at present.
 - a) Experience of Statutory Audit of Nationalized Bank:

Name of Bank	Name of Branch	Year

(Copy of appointment letter for latest assignment to be enclosed)

b) Experience of Concurrent Audit of Nationalized Bank or RRB:

Name of Bank	Name of Branch	Year

(Copy of appointment letter for latest assignment to be enclosed)

11. If firm or partners having any account, advance and other dealings with Rajasthan Gramin Bank, please furnish necessary details indicating nature of the dealings & name of the Bank's Branch where the account/sis/are maintained.

Name of Partner/proprietor	Name of Bank's Branch	Nature of dealing

12. Annual Income:

(Copy of the latest income tax Return of the Firm to be attached)

- **13.** Whether the firm or any partner have ever been debarred by ICA/RBI. If yes, details to be mentioned:
- **14.** Indicate your preferred RBO(s) <u>or</u> district(s) along with the corresponding Regional Business Offices (RBOs) as listed in Annexure III. If you are a large-scale firm (as defined in Point 5 of Annexure I) and wish to be considered for assignment of the branches within those district(s) with respective RBO(s):



S. No.	District	RBO	No. of Branches
1			
2			
3			

Note: The Bank shall have the right to assign any Concurrent Audit assignment and terminate the arrangement without assigning any reason at its sole discretion.

The Bank reserves its right not to accept any or all the Proposals, or to accept or reject a particular Proposal at its sole discretion, without assigning any reasons whatsoever.

15. Any other details:

We here by confirm that the firm/any partner was not statutory auditor or associate concern (as defined by RBI) of Statutory auditors of branches of Rajasthan Gramin Bank for the previous/current year & we are not disqualified under any of grounds given in Sec. 226 of the Companies Act. 1956.

We here by confirm that the details / information furnished above are/is true and correct (if any detail furnished above is found incorrect later on, the Bank has right to terminate the assignment without giving any notice).

We also hereby declare that if our name is included in the bank's list of approved CAs/Consultants, we will undertake to do the tasks entrusted to us in the best interest of the Bank.

We abide by the rules and regulations of the Bank in force from time to time and will always keep the Bank's interest foremost in mind.

Place:	Signature of all partners with ICAI Membership Nos.
Date:	Name and Office Seal

