

Chartered Accountants

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Date

Ref No:-

To,

The General Manager (Audit & Insp.)

Central Madhyapradesh Gramin Bank

Head Office, Plot no 854, Near Maharishi Vidya Mandir

Nagpur Road, Sarra, Chhindwara, 480001

Dear Sir,

Re: Application for empanelment as concurrent Auditor for 2017-18

We are submitting the application for empanelment of our firm for concurrent audit work at your bank/branch.

We enclose here with firm's profile for your perusal

Thanking You,

Your Faithfully

For Chartered Accountants

NOTE

- 1) No columns of the application be kept blank.
- 2) Incomplete applications and /or applications not in format may be rejected without any further reference.
- 3) Keeping in mind the Limited vacancies and large number of applications, no

communication shall be sent by the Bank and no correspondence will be entertained in respect of firm not being selected.

4) Existing concurrent auditor who has/have been sent letter of reappointment need not to apply.

5) The Existing Concurrent auditors who has/have not been reappointed for Further term need not apply. (There applications shall be liable to be rejected)

6) Submit the Application complete in all respect through email audit@rrbcmpgb.in followed by hard copy on address mentioned at the Forwarding copy on or before 05-06-2017

7) All the application must be sent in a sealed envelope containing all necessary certificates/documents. The sealed envelope must be super scribed as “APPLICATION FOR EMPANELMENT OF CONCURRENT AUDITOR-2017-18”

8) All enclosures must be attested as true copy under seal by at least one partner of the partnership firm.

9) The last date for receipt of application form is 05-06-2017 by the close of office hours i.e. 05.00 pm.

APPLICATION FOR INCLUSION OF NAME IN THE PANEL OF CONCURRENT AUDITOR

SNO	PARTICULAR	DETAILS
1	NAME OF AUDIT FIRM	
2	CONSTITUTION (PROOF OF CONSTITUTION TO BE PROVIDED)	
3	ADDRESS OF HEAD OFFICE	
4	ADDRESS OF BRANCHES OFFICE	
5	Land line no.(With STD Code) & FAX	
6	Email Address	
7	Date of establishment	
8	Registration no. of firm with ICAI	
9	Whether any disciplinary action by ICAI instituted/Pending against any member of the Firm(Give details)	
10	Manpower	<p>A)Qualified Professionals:</p> <p>1)Partners :-</p> <p>2)Others :-</p> <p>B) Articles:</p> <p>C)Details of other Audit Staff(Ex bank officers/Executives) :-</p>

11	Staff available for Concurrent Audit	
12	No. of Audit Staff having CISA/DISA qualification with names(including proprietor/Partner)	
13	PAN No. of the Firm	

13. Particulars of Partner/Proprietor/Individual

S no	Name	Qualification	ICAI Membership no	Date of certificate of Practice	Whether DISA/CISA	Whether FCA*	Mob. no

*Duly attested xerox Copies of relevant documents as proof to be attached.

14. EXPERIENCE

14.1 Experience of Concurrent Audit in public sector Bank(s)/RRB *

Name of Bank	Name of Branch	Period

*Proof of empanelment to be attached

14.2. Details of Current assignment as Concurrent Audit in Public sector

Bank(s)/RRB *

Name of Bank	Name of Branch	Period

*Proof of empanelment to be attached

14.3 Experience of Statutory audit in Public sector Bank /RRB*

Name of Bank	Name of Branch	Period

*Proof of empanelment to be attached

15. ADDITIONAL INFORMATION

16. IF firm or partners/proprietor is/are having any credit facilities/stood as a guarantor or having any account and other dealings with Central Madhyapradesh Gramin Bank, Please furnish necessary details indicating the nature of the dealings and name of the Bank's branch where the account/s is/are maintained

Name of the Partner/Proprietor	Name of Banks Branch	Nature of Dealings/credit facilities/Guarantee	16 digit Account no.

17.If any of your clients is having credit facilities with our Bank, Please furnish the name of the branches and name of account holders.

18. Please furnish the name of Borrowers of our branches where your firm is an Auditor

19. Annual Income (Copy of the Latest Income Tax Return of the Firm to be attached)

20. Whether the Firm or any partner have ever been debarred by ICA/RBI.If yes, Details to be given.

21. Any other details:-

21. Certificates

a) I/We hereby confirm that the firm/any partner is neither Statutory Auditor nor associate concern (as Defined by RBI) of statutory auditors of branches of Central Madhyapradesh Gramin Bank and we are not disqualified under any of the grounds given in Section 226 of The companies Act 1956 or any section under companies acts.

b) I/We declare that neither I nor any of our partners/members of my/their families (family will include besides spouse only children, parents, brothers, sisters or any of them who are wholly or mainly dependent on the Chartered accountants or the Firm/Company in which I am/they are partners/directors) have been declared as willful defaulter by any Bank/Financial Institution.

c) I/We hereby confirm that I/We am /are not disqualified/ineligible for appointment at Concurrent Auditor of any branch/Office of the Bank under sections 139 to 146 or any other sections of the Companies act 2013.

d) I/We confirm that the information furnished here are true or correct to the best of my knowledge.

Declaration:-

We here by confirm that the details/information furnished above are/is true and correct (if any detail furnished is found incorrect later on, the bank has the right to terminate the assignment, if given any 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's.

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.

Signature of all Partners with name &
ICAI membership Nos. Official seal

DATE: