

Annexure - A

Application/Profile to be submitted by Auditor/Audit Firm for Empanelment

1. Name of the Auditor/Audit Firm : _____

2. Constitution:

Proprietor	Partnership	Limited liability Partnership

(Enclose a copy of the latest constitution certificate, memorandum of association and article of association and partnership deed as per applicability).

3. a) Firm Registration Number (FRN) : _____

b) Date of Membership Registration of the Firm: _____

4. Membership Registration no. Allotted by ICAI / ICMAI: _____

5. Registration no. with RBI : _____

(Enclose proof)

6. Registration no. with C&AG: _____

(Enclose proof)

7. Annual income of the firm : _____

(Enclose proof i.e., Copy of the latest Income Tax Return)

8. Details of Head Office of the firm: _____

a) Name of the Principal Person: _____

b) Address : _____

c) Telephone no's : _____

d) Fax no's : _____

e) Mobile no's : _____

f) Email address : _____

g) PAN Number : _____

g) GST Number (if applicable) : _____

9. Details of Registered Branch, if any:

Branch	Name of the In-charge	Address (along with Phone / fax / mobile/ e-mail)	State/UT	Whether establishment brought to the notice of ICAI (yes / no)
A				
B				
C				

10. Particulars of Proprietor / Partners/Directors etc., as per constitution:

S.no	Name	Age	Regd No. with ICAI / ICMAI	Date of COP	Qualifications (FCA / ACA/ACMA/FCMA)	Specialized Degree / Diploma	Annual Income (with Proof)
1							
2							
3							

11. Staff Employed

S.no	Particulars	Number	Date since Employed
1	Qualified Assistants		
	FCA/FCMA		
	ACA/ACMA		
2	Semi-qualified Assistants		
3	Unqualified Assistants		
4	Computer Operators		

5	Others (Specify)		
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12. Experience (Enclose Details / documentary Evidences)

S.no	Nature of Audit	Name of Banks/ Companies	No. of Branches	Period
1	Statutory Audit a) As banks Central Statutory Auditors b) As banks Branch Auditors c) Audit of other Companies			
2	Concurrent / Revenue Audit / Inspection			
3	I.S. Audit			
4	Stock Audit			
5	Risk Based Audit			
6	Other (Specify)			

Details of any Bank Staff including Top Executives and Directors of Bank who might be related to your respective firm/any partner of the firm or in case of company (the beneficiary owners).

Name of the Staff/Executive/Board of Director related (A)	Code Number if applicable (B)	Current posting of the Official (C)	Current Designation (D)	Relationship of key person of company/firm with Staff, Executives and Directors of the Bank (E)	Name of person related to (F)	Status of the Person in the company (G)	Name of all Partners/Directors of the Firm (H)

Signature / Seal of

Firm

P.S: A hardcopy of this form along with all the necessary proofs and a copy of LOU (Letter of Undertaking) is to be sent to S, C & Audit Department, J&K Bank, M A Road Srinagar 190001, without which the application shall not be accepted.