

To,
The General Manager,
Baran Nagrik Sahkari Bank Ltd.,
Head Office Near Bus Stand Baran -325205

Dear Sir,

Sub : Concurrent Audit of your _____ Bank

With reference to your letter No.: _____ dated _____ on the subject matter, we do hereby to undertake the audit of your above mentioned branch on the terms and conditions mentioned therein.

Quotation for Monthly Fee of Concurrent Audit Branch is as bellow

1. Main Branch baran	-----
2. Chhabra Branch	-----
3. TFA Branch Baran	-----
4. Head Office Branch Baran	-----
5. Anta Branch	-----
6. Mangrol Branch	-----
7. Atru Branch	-----
8. Chhipabarod Branch	-----
9. Head Office	-----
Total Fess Per Month	-----

As desired by you, we send herewith the following documents:

1(A) CA firms shall enclosures must be self attested as true copy under seal by the partners.

- i) Copy of Registration Certificate issued to the firm by ICAI.
- ii) Copy of Certificate issued by ICAI of having completed "Course on Concurrent Audit of Banks" conducted by ICAI.
- iii) Copy of certificate of CISA / DISA.(Expired CISA certificates, marks list shall not be uploaded)
- iv) Copy of letter from RBI on allotting Unique Code No.
- v) Copy of Firm PAN card
- vi) Copy of GSTN

Yours faithfully,

For and on behalf of,

M/s. _____

Partner

(Name of partner with firm's seal)

EXPERIENCE:

17, Experience of Concurrent Audit of Bank (in applicant firm's name):

Name of the Bank	Name of the Branch	Period

18 , Details of Current Assignment of Concurrent Audits

Name of the Bank	Name of the Branch	Period

19. Experience of any other Audit (In applicant firm's name):

Name of the Bank	Name of the Branch	Period

ADDITIONAL INFORMATION:

20. If Firm or partners are having any Credit Facilities stood as a guarantor with Bank please furnish necessary details indicating nature or the dealings and the name of the Banks branch where the account/s is/are maintained:

Name of the Partner	Name of the Branch	Nature Of Facilities	Account No

21 Whether the Firm or any partner has ever been debarred by ICAI/RBI if yes, details:

Sr. No	Name of the partner	Brief reasons for debarment

22. Whether any partner is relative of existing staff member/Board of Bank :

Name of Staff /Director	Relation

23. Certificate/s

- a) I we hereby 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 Accountant) or the firm/Company in which I am/they are partners/directors have been declared as willful defaulter by any bank financial institution.
- b) I/ We confirm that the information furnished here are true to the best of my knowledge

SIGNATURE

DATE: