OFFICE OF THE REGISTRAR COOPERATIVE SOCIETIES GNCT OF DELHI, OLDCOURT, BUILDING PARLIAMENTSTREET NEW DELHI-110001

No.F.A.R. (Audit) /RCS/2021/ 364

Dated: - 23-09-302/

To,

The Director,
Dte. of Information & Publicity,
Govt. of NCT of Delhi,
Old Sectt. Delhi.

Sub.: Public Notice for Empanelment of Chartered Accountants.

Sir,

I am directed to forward herewith a copy of notice in English and in Hindi for publishing the same in the newspapers for inviting applications from CA/CA firms regarding empanelment of their names in the department for preparation of panel. The notice may be published in 2 Newspapers (One in English namely The Hindustan Times & one in Hindi namely The Navbharat Times) on **26.09.2021**.

It is requested that the concerned newspapers may be directed to publish the notice on 26.09.2021 positively. The bill of notice duly verified by DIP may be forwarded to this office for payment.

(A. L. MADAN) Assistant Registrar (Audit)

No.F.A.R. (Audit) /RCS/2021/ 364

Dated: - 23-09-2021

Copy to:

1. The Chairman, Northern Regional Council of the Institute Accountant of India, ICAI Bhawan, 5th Floor, Annexe, Indraprastha Marg, New Delhi with the request to place the notice on the notice board of the institute and to publish the same in the news letter for giving it publicity to all intending CA/CA firms.

7. The Asstt. Director, Computer Cell, O/o RCS, parliament Street, New Delhi, with the direction to place the same on the site of RCS, Under IMPORTANT NOTICE/CIRCULAR.

- 3. Accounts Officer, Accounts Branch, O/o RCS, Parliament Street, New Delhi
- Guard File.
- 5. Notice Board.

(A. L. MADAN) Assistant Registrar (Audit)

सहायक **पंजीयक** (लखा परीक्षा) कार्यालय पंजीयक महस्रामे मान्तिया राष्ट्रगण क्षेत्र, दिल्ली सरकार संयद कार्य, गई दिल्ली 110001

OFFICE OF THE REGISTRAR COOPERATIVE SOCIETIES

Government of National Capital Territory of Delhi Parliament Street, New Delhi

AUDIT BRANCH

NOTICE

Inviting Application From CA/CA firms for Empanelment of their Names as Auditor in the Office of RCS, for Conducting the Audit of the Societies Registered with the Department.

Applications in the prescribed format are invited from eligible CA/CA firms having Head Office/Principal Office in Delhi/New Delhi, for preparation of a fresh panel of the auditors likely to be authorised to conduct the audit of the cooperative societies registered with the office of Registrar Cooperative Societies, Government of NCT of Delhi. The panel has to be prepared for a period of 3 years i.e. for the financial year 2022-23 to 2024-25. The basis of norms available on the web site of the department.

Prescribed application forms may be downloaded from the website of the department i.e. http://rcs.delhigovt.nic.in

Application form complete in all respect should reach the office of the Assistant Registrar (Audit), Audit Branch, Room No.15, Parliament Street, New Delhi-110001 latest by 31.10.2021 (6.00 P.M.) along with following documents and application fee receipt of Rs.100/-.

- 1. Certificate of registration of firms as Chartered Accountant from the office of the Institute of Chartered Accountant of India, New Delhi issued on or after 01.01.2021 along with a certificate of no change in the constitution till date.
- 2. Constitution certificate of the firm with full details of all the partners, if any including partnership details with any other CA firms.

3. There should not be any common partner/CA in the firms which intend to apply for empanelment.

(DR. T. PHILIP THANGLIENMANG) SPECIAL REGISTRAR COOPERATIVE SOCIETIES

Special Registrar

O/o Registrar Cooperative Societies

Govt. of N.C.T. of Delhi.

Parliament Street,

New Delhi-110001

रजिस्ट्रार् सहकारी समितियाँ का कार्यालय

राष्ट्रीय राजधानी क्षेत्र दिल्ली सरकार पार्लियामेंट स्ट्रीट, नई दिल्ली ऑडिट शाखा

सूचना

विभाग से पंजीकृत समितियों के ऑडिट संचालन के लिए आरसीएस कार्यालय में ऑडिटर के रूप में उनके नामों के मनोनयन हेतु सीए/सीए फर्मों से आवेदन आमंत्रित हैं।

रिजिस्ट्रार सहकारी समितियों का कार्यालय, राष्ट्रीय राजधानी क्षेत्र दिल्ली सरकार से पंजीकृत सहकारी समितियों के ऑडिट के संचालन के लिए अधिकृत किये जाने के संभावित नये पैनल की तैयारी हेतु दिल्ली/नई दिल्ली में प्रधान कार्यालय/मुख्य कार्यालय रखने वाले योग्य सीए/सीए फर्मों से निर्धारित प्रारूप में आवेदन आमंत्रित हैं। पैनल की तैयारी 3 वर्षों की अवधि के लिए अर्थात वित्तीय वर्ष 2022—23 से 2024—25 तक के लिए किया जाना है। सीए/सीए फर्मों का वर्गीकरण विभाग की वेबसाइट पर उपलब्ध मानदंडों के आधार पर किया जाएगा।

निर्धारित आवेदन प्रपत्र विभाग की वेबसाइट http://rcs.delhigovt.nic.in से डाउनलोड किया जा सकता है। निम्नलिखित दस्तावेजों और रू 100/— का आवेदन शुल्क रसीद के साथ सभी तरह से पूर्ण आवेदन सहायक रिजस्ट्रार (ऑडिट), ऑडिट शाखा, रूम नं. 15, पार्लियामेंट स्ट्रीट, नई दिल्ली—110001 के कार्यालय में 31/10/2021 (अपरान्ह 6.00 बजे) तक पहुंच जाना चाहिए।

- 1. अब तक संविधान में परिवर्तन नहीं होने के एक प्रमाण पत्र के साथ 01.01.2021 को या उसके बाद इंस्टीटयूट ऑफ चार्टर्ड अकाउंटेंट ऑफ इंडिया, नई दिल्ली के कार्यालय से चार्टर्ड अकाउंटेंट के रूप में फर्म के पंजीकरण का प्रमाण पत्र।
- 2. किसी अन्य सीए फर्म के साथ पार्टनरिशप विवरण सिहत सभी पार्टनरों, यदि कोई हो, के पूर्ण विवरण के साथ फर्म के संविधान का प्रमाणपत्र।
- 3. जो फर्म पैनल में आने की इच्छुक हैं, उनमें कोई कोमन पार्टनर/सीए/नहीं होना चाहिए।

(डॉ. टी. फिलिप थांगलिंमांग) विशेष पंजीयक सहकारी समितियों

Special Registrar
Olo Registrar Cooperative Societies
Govt. of N.C.T. of Delhi.
Parliament Street,
New Delhi-110001

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OFFICE OF THE REGISTRAR COOPERATIVE SOCIETIES, GOVERNMENT OF N.C.T. OF DELHI, OLD COURT'S BUILDING,
PARLIAMENT STREET, NEW DELHI-110001

FORM OF APPLICATION FOR EMPANEMENT OF AUDIT FIRMS INFORMATION AS ON (DATE)

(Firms having Head office or Principal office in the NCT of Delhi only, are eligible to apply for Empanelment)

9 00 5

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In the case of a member practicising in individual name, please mention "N.A."

Details of Service Tax Registration No. are required to be fill up for Head Office as well as for Branch Office (S) also. If full address, name of town, pin code, and district is not filled in property, the application is liable to rejection. Members/Firm are required to fill-up their name, Address and Town in CAPITAL LETTERS ONLY. ist of tirin published by the Institute.

11. Experience in Audit of Co-operative Sector in Delhi (a) Co-op Societies (b) Co-op Bank (c) Other (Experience of Last three years needs to be mentioned) 12. Disciplinary proceedings pending against any partner/Proprietor (Yes/No), if yes Name of Proprietors/ Partners Membership No. Brief Descriptions	11. Experience in Audit of Co-operative Sector in Delhi (a) Co-op Societies (b) Co-op Bank	10. Number of unqualified audit staff in the concern: (a) Audit clerks (b) Articled clerks (c) Other audit staff (Excluding administrative staff)	(Please mention the year in which the firm was established. In case of individuals, the year of obtaining Certificate of Practice should be mentioned.) 8. Particulars of Partners/Sole Proprietor (Please fill up Annexure A) 9. Number of paid chartered accountant employees in the concern Full Name Part Time Total (Please fill up Annexure B)
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not correct, I/We would be liable for disciplinary action under the Chartered Accountants Act, 1949, and Regulations framed there under:	knowledge and belief. I/we further recognize that if any of the statements and the information of the best of my/our	I/We, the undersigned, as Proprietor //Partners of M/s
and Regulations framed there under:-	in all respect to the best of my/our	or as individual do hereby

accepted and carried out if the firm in whose name the application is made is not in existence at the time of allotment.. I/We hereby declare that audit/other assignment allotment on the basis of information furnished in the application form will not be

separate note.	construction certificate issued by the ICAl as on	20
	(date) in Case of any change, the details are given below with a	(date) shown in the application is the same as that in the

	5			S. No.
			Partner/Proprietor/Individual	Name of
				Membership No.
				PAN No.
				Signature

Place

Date

Change in Status of the firm

^{*1.} The declaration should be signed by the individual, or by the proprietor in the case of a sole proprietary concern, and by all the partners in the case of a partnership firm.

^{2.} The signatures should correspond to those in the Institute's records.

ANNEXURE A

Details of Partners/Sole Proprietor of the Concern (In case a member practicing in individual name, particulars of such member to be given)

Membership PAN /GIR Whether No.								
₹ Wheti		ACA	 					
		FCA						
Whether Main Occupations	is pract	YES						
1		NO						
Whether partner/p/paid emp	any othe	YES						
Whether partner/proprietor/paid employee in	r concern	NO	 _					
	Yes		 					
nploye	Z							
ner was pre	If Yes, Ple	Date Of Joining						
Whether partner was previously full time employee of the applicant frem	If Yes, Please Provide	Date ()f Leaving			-			
	·l	DD	 					
Date of joining the firm as a partner/ proprietor	priemi	MM MM	 	1				
ning the utner/		MM YYYY	 					
Whether association the firm i	occupation	YES NO						
Whether association with the firm is only	etion	NO						

TICK THE APPROPRIATE BOX

Please give member number only, and not the region code (such as 100/200/300/400/500)

ANNEXURE- B

Details of Paid Chartered Accountant Employees in the Concern

TOTAL								Z
								Name
								Membership Number
							ממ	Date o
	_					_	MM	Date of Joining the Firm
			 				үүүү	g the
							ACA	W _h
							FCA	Whether
							Full Time Basis	ARE SER
							Part Time Basis	ARE THEY IN SERVICE ON
							YES	WHETHER PARTNER PROPRIETOR/PART-TIME EMPLOYER IN OTHER CONCERN.
							NO	AKTNERO UPART-TIME N OTHER
								SIGNATURE ²

* TICK THE APPRORIATE BOX

Please give membership number only and not the region code (such as 100/200/300/400/500). The signatures should correspond to those in the institute's records