

**A:-Form to be filled up for Empanelment/Appointment of Internal Auditor  
Form-A**

<b>Sl. No.</b>	<b>Particulars</b>	<b>Supporting Documents required to be submitted along with this form</b>	
1	<b>Name of the Firm</b>		
2	<b>Address of the Firm with Tel no. Mobile No., Fax.No.,email address.</b>		
	Head Office		
	Branch Office	Phone No.	
	1	Fax No.	
	2	Mobile of each Branch Office In-charge:	
	(particulars of each branch to be given)	email ID	
3	<b>Firm Income Tax PAN No.</b>	Attach copy of PAN card	
4	<b>Firm's Service Tax Registration No.</b>	Attach copy of Registration	
5	<b>Firm's Registration No. with ICAI</b>	Attach copy of Registration Certificate	
6	<b>Eligibility Criteria</b>		
a	<b>No. of Years of Firm Existence (Date of establishment of Firm)</b>		
b	<b>Turnover of the Firm in last three years</b>	2014-15	
		2015-16	
		2016-17	
c	<b>Work as Internal Auditor</b>		
	<b>Name of the NBFC- ND-SI</b>		
		Turnover	
		Assets Size	
d	<b>Work As Branch Auditor for Major Public Sector Bank(s)</b>	<b>No. of years' experience</b>	
e	<b>Name of 3 Govt. Companies &amp; 1 NBFC</b>	1	
		2	
		3	
		4	
f	<b>Details of Total No. of staff</b>		
	i) Number of Full Time Partners		

	associated with the firm,	
	ii) Name of principal partners	
	iii) Membership No.	
	iv) Qualification	
	v) Experience	
	vi) Total No. of FCA	
	vii) CISA/DISA qualified partner/staff	
g.	CAG Empaneled (Yes/No)	
h.	RBI Empaneled (Yes/No)	
9	Whether Firm or its partner is not disqualified for being appointed as internal Auditor as per ICAI guidelines.	

## FORM B

<b>Experience of audit</b>			
<b>Sl. No.</b>	<b>Name of the Auditee</b>	<b>Type/Nature of Assignment</b>	<b>Duration of Assignment</b>

Copy of proof of various empanelments and proof of allocation/allotment of audit assignments mentioned above must be annexed with the application.

**Declaration:**

**1. We confirm that the information furnished herein is correct and fair in all respects and we have the necessary documentary proof to substantiate the same. It is further confirmed that in case any of the contents contained herein are found to be incorrect, IFCI Factors Ltd. is free to initiate any appropriate action against us.**

**2. We further declare that there have been no adverse comments/qualification on our performance from the Management / Audit Committee of the Company.**

**Partner**

**(Name)**

**Date**