

Annexure A

Application for empanelment of Chartered Accountants Firms for Employees'
Provident Fund Organisation

Sl No.	Particulars	Remarks
1	Name of the Chartered Accountants Firm	
2	Registration No. (ICAI) of the Firm	
3	Date of constitution of the Firm and Constitution Certificate of the Firm issued by the ICAI	Copy to be enclosed
4	Proof of empanelment of C&AG	
5	Name of the Partners with status (FCA or ACA)	
6	Membership No. of the Partners & Certificate of Practice	Copy to be enclosed
7	Complete full Address of the Head Office and the Branch with Telephone/ Mobile/Fax with e mail Address	
8	Income Tax PAN of the Firm	Copy to be enclosed
9	No of full time professionals with the Firms	
	a Full time FCA Partners	
	b Full time ACA pathers	
	c Full time CA employees	
10	Whether there are any Court /Arbitration or any other Legal case/ Proceedings pending against the Firm/Partner	
11	Average annual turnover of the Firm for last 3 years	
12	Proof of payment of Membership fee and certificate of practice from ICAI for the year 2024-2025	Copy to be enclosed
13	Indicate the Tax/Audit work experience in the following sectors	
	a PSU	
	b Government (Central/State)	
	c Private	