



DISTRICT MINERAL FOUNDATION, JAJPUR

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Letter No.: DMF/ 469 /2020

Date: 10.07.2020

EXPRESSION OF INTEREST FOR ENGAGEMENT OF STATUTORY AUDITOR FOR THE AUDIT OF DISTRICT MINERAL FOUNDATION TRUST, JAJPUR FOR THE FINANCIAL YEAR 2019-20.

Expression of Interest are invited from CAG empanelled Chartered Accountant firm for engagement of statutory auditor for the financial year 2019-20. The audit fees is stipulated to Rs. 30,000/- (Rupees thirty thousand) only. The scope of audit includes all the implementing agencies having DMF fund and also PMU of DMF cell. The audit report to be submitted within 30 days after receipt of engagement order.

The expression of interest in the prescribed format will be received in the office of the Project Director, District Mineral Foundation, 2nd Floor, District Rural Development Agency (DRDA) Office Near Gandhi Chhak, Jajpur Town - 755001 Dist.-Jajpur, Ph: 06728-222227 up to 5.00 PM on or before 20-07-2020 through speed post and registered post only and will be opened by the undersigned on the 21-07-2020 at 11.00 AM. No EOI shall be entertained after the specified date and time.

The undersigned reserves the right to reject any or all EOI without assigning any reason thereof.


Collector & Managing Trustee
DMF Trust, Jajpur

Memo No- 470

Date:- 10.07.2020

Copy to the OSD to Collector, Jajpur / ADM (General), Jajpur/ADM (Revenue), Jajpur/ Tahasildar, Jajpur for information and requested to place the EOI notice in the office notice board and copy to DIO, NIC, Jajpur for publication in the district web portal for wider publication.


Collector & Managing Trustee
DMF Trust, Jajpur

FORM FOR TECHNICAL PROPOSAL

SL NO.	PARTICULARS	Supporting Documents (self attested) required to be submitted along with this form
1	Details of the CA firm	
1.1	Name of the Firm	
1.2	Contract Details of the Firm	
1.3	Address of the Head office	
1.4	Phone No. Mobile No. of Contract person	
1.5	Fax No.	
1.6	Branch Offices: 1. 2. 3. (Attach separate sheet if necessary. Particulars of each branch including contract details to be given)	(Attach copy of ICAI certification)
2	i. Date of establishment of the firm ii. Date since H.O. & B.O. are functioning at the existing station.	(Attach copy of ICAI certification)
3	Firm's Income Tax PAN No.	(Attach copy of PAN card)
4	Firm's GST Registration No.	(Attach copy of registration)
5	Firm's Registration No. with ICAI	(Attach copy of ICAI certification)
6	C & AG empanelment No.	(Attach proof of empanelment with C&AG for the year 2019-20)
7	No. of years of Firms existence & Date of establishment	(Attach copy of certificate issued by ICAI)
8	Turnover of the firm for the last three years (in Rs.) 2017-18 2018-19 2019-20	(Attach copy of balance sheet, Profit & Loss account duly audited for the three years)
9	Audit experience of the firm	
9.1	Number of assignments in commercial/statutory audits.	i. Attach copy of the offer letter for each assignment.
9.2	Number of assignments of auditing PSUs Govt. Undertaking, Govt. Managed schemes/Projects, externally aided projects	ii. Relevant evidence to be given of the turnover and fees.)

10	Profile of persons to be engaged in the work, both professional and support staff.	CVs of the professional staff to be engaged in this assignment to be enclosed, duly signed by the authorised person of the firm.)
11	Details of Partners:	
11.1	Number of full time fellow partners associated with the firm.	
11.2	<ul style="list-style-type: none"> • Name of each partner • Date of joining the firm • Membership number • Status-FCA/ACA • Date of becoming FCA/ACA • Highest qualification. • Experience (in years) • Type of engagement (Part time/Full time) • Contract details (correspondence address, e-mail, mobile No- 	Attach self attested copy of Certificate issued by ICAI
12	Details of Audit staff:	
12.1	No. of audit staff engaged by the firm	
12.2	<ul style="list-style-type: none"> • Name of Audit Managers • Name of each audit staff • Date of Joining the firm • Highest qualification • Experience (in years) • Contract Details 	Attach self attested copy to the effect.

**Seal & Signature of Partner
Membership No.**