DAMAN AND DIU STATE AIDS CONTROL SOCIETY

CALL FOR EXPRESSIONS ON INTEREST : CHARTERED ACCOUNTANT FIRMS FOR INTERNAL AUDIT OF PERIPHERAL UNITS UNDER DAMAN AND DIU STATE AIDS CONTROL SOCIETY

- 1. The Daman and Diu State AIDS Control Society (SACS) are responsible for implementing the National AIDS Control Programme (NACP) phase III in the UT of Daman & DIU. The Government of India has received a Credit (Credit 4299 IN) from the funds pooled by the International Development Association and DFID in various currencies towards the cost of Third National HIV/AIDS Control Project and it is intended that part of the proceeds of this Credit will be applied to eligible payments under the contracts for which the invitation for Bids is issued. Daman & Diu SACS is a registered organization under the control of the UT Government and it the nodal organisation for all the HIV/AIDS prevention and control work that is taken up in the UT. Daman and Diu SACS release fund to peripheral organizations like NGOs and hospitals under the Government sector. Hence it is essential to assess as to conduct a internal audit to assess as to how the peripheral units have discharged their fiduciary responsibilities.
- 2. Expressions of Interest are Invited from <u>CAG empanelled Chartered Accountant firms</u> to conduct the internal audit of peripheral unit under Daman and Diu SACS for a financial year 2010-2011 onwards.

ELIGIBILITY & ASSESSEMENT CRITERIA;

The Eol and capability will be assessed against evidence of skills and experience in providing accountancy services in the UT.

REQUIREMENTS

The Eol should be sent along with a Capability Statement including a profile of the orgqanisation relevant technical and geographical coverage along with the financial turnover for the last 3 financial years. A format for the capability statement is available on the web site: <u>http://daman.nic.in</u>. Individual CVs are not required at the stage. Any Eol with inadequate information, those which do not meet the above criteria, or those received after the closing date will not be short listed. Eol should be as concise and focused as possible to give evidence of the above requirements including the capability statement and organization profiles. They should be mailed to the Project Director (AIDS), Daman and Diu SACS, 2nd Floor, Community Health Centre Campus, Fort Area, Moti Daman, Daman – 396 220 to arrive no later than 5.00 pm on 23th July 2012. Only organizations, which pass the pre-selection process, will be contacted and invited to submit detailed proposals.

FOR FURTHER INFORMATION

For further information on NACP, interested bidders are requested to contact through the following e mail id: <u>ddsacs@gmail.com</u> or <u>Tel No: 0260-2230192</u>.

(Dr. Devendra K. Makwana) Project Director (AIDS) Daman & Diu, Daman

No.SACS/DD/106/Part-II/2012/104/ Dated : 3 July 2012.

EXPRESSION OF INTEREST FOR SHORT LISTING CHARTERED ACCOUNTANT FIRMS FOR THE INTERNAL AUDIT PERIPHERAL UNITS UNDER DAMAN AND DIU STATE AIDS CONTROL SOCIETY

PA	RT	_	Α

Status	of the Firm Partnership	Sole Proprietorship
1	(a) Name of the firm (in Capital letters)	
	(b) Address of the Head Office (Please also give telephone no. and e-mail address)	
	Telephone No.	
	E-mail	
	(c) PAN No. of the firm	
2	ICAI Registration No.	
	Region Name	
	Region Code	
3	Empanelment number with C&AG	
4	(a) Date of constitution of the firm :	
	(b) Date since when the firm has a full time FCA	
5	Full time Partner / Sole Proprietor of the firm as on 1 st January 2012	

S. No.	Continuous association with the firm	Number of FCA	Number of ACA
(a)	Less than one year		
(b)	1 year or more but less than 5 years		
(c)	5 years or more but less than 10 years		
(d)	10 years or more but less than 15 years		
(e)	15 years or more		

Note : Please attach the copy of firm's Constitution Certificate issued by ICAI as on 1.1.2012.

6	Number of part time partners if any, as on 1 st January 2012	
7	Number of Full time Chartered Accountant as on 1 st January 2012	
8	Number of audit staff employed full-time with the firm	
	(a) Articles / Audit Clerks	
	(b) Other than Audit Staff (with knowledge of book keeping and accountancy)	
	(c) Other Professional Staff (please specify)	

(list to be attached for SI. No. 5 to 8)

9 Number of Branches if any					
	(please mentio	n places and locations)			
10	external audit any Govt. Co operative instit	irm is engaged in any or providing any other ompany / Corporation aution etc. Is may be given on	YES / NO		
11	Whether the firm is implementing quality control policies and procedures designed to ensure that all audits are conducted in accordance with Statements on Standard Auditing Practices. (if YES, a brief note on the procedure adopted is to be enclosed)				
12	against the firm	y Court / arbitration / legal cases m a brief note of the cases indicating		YES / NO	
13	Fees earned b	by the firm for last 5 yea	rs		
Type of Audit		PSU / Autonomous body	Companies in private sector		Bank
Audit audit r	ory / Branch / 6 monthly review				
Audit	al / Concurrent				
Total of	of the above				

PART - B UNDERTAKING

I/We the sole proprietor/partners of M/S------ chartered accountants do hereby jointly and severely verify and declare:-

- (i) that the particulars given are complete and correct and that if any of the statements made or the information so furnished in the application form is later found not correct or false or there had been suppression of material information, the firm would not only stand disqualified from the allotment, but would be liable for disciplinary action under the Chartered Accountants Act, 1949 and the regulations framed thereunder;
- (ii) that the firm proprietor or partners have not been debarred or cautioned by ICAI during the last five years (if cautioned give details);
- (iii) that individually we are not engaged in practice otherwise or in any other activity which would be deemed to be a practice under Section 2(2) of the Chartered Accountants Act, 1949;
- (iv) that the constitution of the firm as on 1st January of the relevant year shown in the Expression of Interest is the same as that in the Constitution Certificate issued by the ICAI.

SI. No.	Name of the Partner / Sole Proprietor	Membership registration number	PAN No.	Dates of payment of fees for the relevant year A/B*	Partner Sole	of /

*A for membership B for issue of Certificate of practice

(seal of the firm)

Place	:	
		Warned to all the set of the set

Date :_____

Encl _____ pages

Signature of Proprietor/Sole Partner

Standard Evaluation Sheet for Evaluation of the Technical Bids of the External Auditors

	Criteria	Remarks	Max. Marks	Marks obtained
1	No. of partners FCA / ACA		10	
2	Years of experience Partner A + Partner B + Partner C + Partner D +		10	
3	Years of Partners association with the firm : Partner A + Partner B + Partner C + Partner D +		10	
4	No. of Staff			
	i. Qualified		10	
	ii. Semi Qualified		5	
	iii. Others		5	
5	Nature of experience (giving turnover / project cost / years of experience of the entities / projects audited			
	i Health Sector Audit		20	
	ii Govt. Social Sector		5	
	iii Other social sector		5	
6	No. of Branches		10	
7	Total turnover of the firm in last three years		10	
	TOTAL		100	

(CA Firms)

Note :

1. In the invitation letter, CA firms will be asked to give details of all these criteria while applying.

2. CA firms will also provide their latest Certification of Firm Constitution as on 1st January 2012 issued by ICAI and their Latest Income Tax Return duly acknowledge by IT Department. Firms not able to provide these two documents will not be considered.

3. Each member of the evaluation committee will fill up this form separately.

4. Total marks given by all the members will be totalled and the Audit work will be awarded to the firm obtaining maximum marks.

Name of the Member

Signature with Date :