**Annexure-A**

**APLICATION FORM**

|  |  |  |
| --- | --- | --- |
| **01** | **Name of the Cost Accountant Firm (Please mention whether Proprietorship or Partnership Firm? )** |  |
| **02** | **Address of the Registered Office** |  |
| **03** | **Date of registration and Regn. No of the Firm (Copy to be enclosed )** |  |
| **04** | **Name of the Partners in case of Partnership Firm including their Membership No** |  |
|  | **i** |  |
|  | **ii** |  |
|  | **iii** |  |
|  | **iv** |  |
|  | **v** |  |
| **05** | **Mobile Number of the Managing Partner (s) /Proprietor** |  |
| **06** | **Email id of the Firm/Managing Partner(s)/Proprietor** |  |
| **07** | **Has the Firm awarded & executed the Fixed Asset Register Preparation work in any Organization?** | **Yes/No**  **If Yes, Please mention the name of the Organisation (s) along with Copy of the assignment letter.** |

**Name of the Managing Partner/ Proprietor :**

**Membership No:**

**(Signature of the Managing Partner/Proprietor)**

**(Seal of the Firm)**