F. No. 20 (42)-AGRI/SARS/NFSM & NMOOP/2018-19/727-28 Govt. of Tripura

Department of Agriculture & Farmers Welfare State Agriculture Research Station

Dated, A.D.Nagar, the/2020.

SHORT NOTICE INVITING QUOTATION FOR CONDUCTING AUDIT OF ACCOUNTS OF RICE, PULSE, COARSE CEREALS, NUTRI CEREALS, COMMERCIAL CROPS, OIL SEEDS, TREE BORN OILSEEDS UNDER NATIONAL FOOD SECURITY MISSION PROGRAMME (NFSM) FOR THE YEAR 2019-20

On behalf of the Governor of Tripura, fresh sealed quotations are invited in the prescribed format from CAG empanelled Chartered Accountant firms having ICAI registration for carrying out the audit of the annual accounts of Rice, Pulses, Coarse Cereals, Nutri Cereals, Commercial Crops, Oilseeds & Tree Born Oilseeds of National Food Security Mission (NFSM) separately under the jurisdiction of Department of Agriculture, Tripura for the financial year 2019-20.

The format of quotation documents and other information including activities and guidelines of the NFSM are available in the Office of the Joint Director of Agriculture (Res.), A.D.Nagar, Agartala & Departmental Website - www.agri.tripura.gov.in

This is in cancellation of the earlier letter vide No.F.20(42)-AGRI/SARS/NFSM & NMOOP/2018-19/223-24, dated:04/05/2020.

(Darpan Kr. Biswas)

Joint Director of Agriculture (Res.) State Agriculture Research Station Arundhatinagar, Agartala

To:

1) The Director of Agriculture, Department of Agriculture & Farmers Welfare, Agartala, for favour of kind information please.

2) The Assistant Director (IT), Department of Agriculture & Farmers Welfare, Agartala, for information. He is requested to upload the NIT in the Departmental Website - www.agri.tripura.gov.in

(Darpan Kr. Biswas)

Trans. 14.01.7020

Joint Director of Agriculture (Res.) State Agriculture Research Station Arundhatinagar, Agartala.

TERMS AND CONDITIONS:

- 1. Quotations for audit fees will be received on 22nd May,2020 up to 3.00 PM and will be opened on the same day at 4.00 PM, if possible.
- **2.** The CA firm will require providing their latest certificates of firm constitution as on $\mathbf{1}^{\text{st}}$ January of the current year issued by ICAI and their latest income Tax return duly acknowledged by IT Department.
- **3.** The CA firms are required to furnish the total turnover of the firm in last three years.
- **4.** Audit Report of Rice, Pulse, Coarse Cereals, Nutri Cereals, Commercial Crops, Oilseeds & Tree Born Oilseeds of National Food Security Mission Programme (NFSM) for the year 2018-19 shall include audit of all the transactions at the State level and District level and Audit Report of NFSM for the year 2019-20 in reference to the last audit report of 2018-19. The auditor appointed shall be required to issue separate Mini Mission wise Consolidated Audit Report for the State and District comprising all programmes under the aforesaid scheme.
- **5.** The final Audit Report separately for Rice, Pulse, Coarse Cereals, Nutri Cereals, Commercial Crops, Oilseeds & Tree Born Oilseeds should be submitted within 45 (Forty Five days) from the date of issuance of appointment letter by the Joint Director of Agriculture (Res), SARS, A.D.Nagar, Agartala.
- **6.** Auditor shall certify all the Utilization Certificates in the prescribed format (Form 12C of GFR, 2017) of GOI separately for all Mission comes under the scheme NFSM.
- **7.** Estimated minimum audit fees for the aforesaid assignment is Rs. 25,000/- (Rupees Twenty Five Thousand) only.
- 8. Agencies are required to submit the quotation of audit fees as per format F-₁ along with the duly filled in formats T-₁ & T-₂.
- **9.** Audit fees quoted by the firm will remain valid for 1 (One) year from the date of submission of the quotation by the firm. Each page, Form, Annexure and Appendices of the quotation must be signed by the Authorised signatory of the firm.
- **10.** Firm shall have to depute appropriate no. of teams for timely submission of Audit Report and to attain quality of audit. Each team shall have to be headed by a qualified chartered accountant.
- 11. The Auditing firm should have their Office/Branch Office in Agartala, Tripura.
- **12.**The undersigned reserves the right to accept or reject any quotation without giving any explanation and can change the evaluation criteria as per its requirements in the interest of the Department.
- **13.** The EMD has to be deposited for an amount of Rs.1,000/- in the form of Demand Draft/Deposit at Call of any Nationalized or Commercial Bank.

(Darpan Kr. Biswas)

Joint Director of Agriculture (Res.) State Agriculture Research Station Arundhatinagar, Agartala

Letter of Transmittal

To,
The Joint Director of Agriculture (Research.),
State Agriculture Research Station,
Department of Agriculture & Farmers Welfare,
Govt. of Tripura,
Arundhatinagar, Agartala.

Dear Sir,

We, the undersigned, offer to provide the audit services for the Department of Agriculture, Tripura in accordance with your Notice Inviting Quotation. We are hereby submitting our quotation having details about the firm and proposed audit fees.

We hereby declare that all the information and statements made in this proposal of quotation are true and accept that any misinterpretation contained in it may lead to our disqualification.

The Fees quoted by us is valid till 1 (One) year from the date of submission of the quotation. We confirm that this quotation will remain binding upon us and may be accepted by you at any time before the expiry date.

Prices have been arrived independently without consultation, communication, agreement or understanding (for the purpose of restricting competition) with any competitor.

We agree to bear all costs incurred by us in connection with the preparation and submission of the audit report including utilisation certificates and to bear any further pre-contract costs.

We understand that the Department of Agriculture, Tripura is not bound to accept the lowest or any proposal or to give any reason for award, or for the rejection of any proposal.

Yours faithfully,

(Authorised signatory of the firm with Seal)

Particulars/Details of the Firm

| SI. No. | Particulars | Supporting Documents Required to be Submitted along with this Form |
|------------|--|---|
| 1. | Name of the Firm:- | |
| 2. | Addresses of the Firm:- | |
| 3. | Head Office:- | Phone No: Fax No: Mobile No. of Head Office In-charge: |
| 4. | Date of establishment of the firm:- | |
| 5. | Date since when is H.O. at the existing Station | |
| 6. | Branch Office 1,2,3(Particulars of each branch to be given) | Phone No: Fax No: Mobile of each Branch Office In-charge: |
| 7. | Mention the date of each branch offices since when existed at the existing place | 1 |
| 8. | Firm Income Tax PAN No. | Attach copy of PAN card |
| 9. | Firm Service Tax Registration No. | Attach copy of Registration |
| 10. | Firm's Registration No. with ICAI | Attach a copy of certificate downloaded from ICAI Website showing the name & address of H.O., B.O. and partners etc. |
| 11. | Empanelment No. with C & A G | Attach proof of empanelment with C &AG for the year under Audit (2019-20) confirming that the firm is eligible for major PSU audits. |
| 12. | No. of Years of Firm Existence & Date of establishment of Firm | Attach copy of Partnership Deed |
| 13. | | Attach a copy of Balance Sheet and P & L Account of the last three years or a C.A. Certificate give Break-up of Audit Fee and Other Fees Received. |

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| 14. | 2. Number of Assignments of Externally Aided Projects/ Social Sector Project (excluding audit of Charitable Institutions & NGOs) | |
|-----|--|---|
| 15. | Details of Partners: Provide following details: Number of Full Time Fellow Partners associated with the firm. Name of each partner, Date of becoming ACA and FCA Date of joining the firm, Membership No., Qualification Experience Whether the partners is engaged full time or part time with the firm. Their Contact Mobile No., email and full Address | Attested copy of valid Certificate of ICAI. |

Note: The firm shall give an undertaking that the team members are proficient in the State's official language (both oral and written).

Signature of the authorised person of the firm with Seal

FORMAT FOR QUOTATION OF AUDIT FEES (Please provide the break-up of Firm's quoted fees for each work and unit)

Total Amount Item or Activity (Both in Numeric and in Words) **AUDIT FEE** A. For NFSM Scheme i. Audit fess for 2019-20 Rs..... (Including cost of TA/DA) ii. GST & Other Tax if any Rs..... iii. Total GST Fees if any Rs..... **Grand Total** Note: Percentage of funds involved shall not be a basis of quoting the Audit

Fee.

Signature of the authorised person of the firm.