

**TENDER FORM FOR THE APPOINTMENT OF AUDITOR FOR STATUTORY AUDIT ON THE ACCOUNTS OF THE NATIONAL AGRI-FOOD BIOTECHNOLOGY INSTITUTE, MOHALI, (PUNJAB)**

1. Name of the Auditing Firm: .....
2. Address of the Registered Office: .....  
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3. Name of the Chief/proprietor: .....
4. Registration no. with ICAI: .....
5. Registration no. with C&AG of India: .....
6. Experience of similar audit : .....
7. No. of Qualified professionals (CAs): .....
8. Financials:
  - i. Fee per annum ` .....
  - ii. Plus Service Tax (as applicable) ` .....Total Fee: ` .....

9. PAN No. of the Firm: 

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I, ..... hereby declare that the information given above is correct.

Signature with seal

Dated: