



INSTITUTE OF HUMAN RESOURCES DEVELOPMENT
PRAJEO TOWERS, VAZHUTHACADU, THIRUVANANTHAPURAM-14

No. FinC2/13663/2017/HRD

Dated: 29.08.2019

NOTIFICATION

Ref: - IHRD notification no. FinC2/13663/2017/HRD dtd. 07.08.2019

As per the reference cited above, competitive bids were invited from registered Chartered Accountants/ Accounting firms to audit the Gratuity accounts maintained by IHRD Gratuity Trust for the financial year 2010-2011 to 2018-2019. The last date for the receipt of competitive bids as per the notification dated 07.08.2019 is extended to **20.09.2019, 4 PM** and date of opening of bids will be 24.09.2019, 12PM. All the other conditions will remain the same.

Sd/-

CHAIRMAN & MANAGING TRUSTEE
IHRD Employees Gratuity Trust

NOTIFICATION

APPOINTMENT OF AUDITORS FOR GRATUITY TRUST

UNDER IHRD

IHRD is an autonomous Educational Institution established by the Government of Kerala during 1987, registered under the Travancore- Cochin Literary, Scientific and Charitable Societies Registration Act 12 of 1955. It is a group of 86 institutions. As per G.O.(MS). No. 52/10/H.Edn dated 20.03.2010, Government have accorded sanction for the implementation of gratuity scheme to IHRD employees with effect from 01/04/1997. The Gratuity of the employees is maintained by a trust constituted by IHRD, with separate bank account. Competitive bids are invited from registered Chartered Accountants/ Accounting firms who satisfy the following conditions, to audit the Gratuity accounts maintained by IHRD Gratuity Trust for the financial year 2010-2011 to 2018-2019.

CONDITIONS FOR THE APPOINTMENT OF AUDITORS FOR IHRD GRATUITY TRUST

1. Applicants should have 3 years experience in certification of accounts of Government owned charitable societies/ autonomous bodies etc.
2. Applicants should attach proof of experience and qualification.
3. The audit of Gratuity accounts of IHRD for the period from the financial year 2010-2011 to 2018- 2019 should be conducted within 3 months and submit 5 hardcopies of signed Audit report before the management. Soft copy of Audit report should also be shared.

4. The auditors have to take necessary steps to submit audited statements to Income Tax Department and obtain exemption of TDS from the interest earned on the fixed deposits.
5. The minimum audit fee for the proposed audit is fixed at Rs. 60,000/- (inclusive of TA/ DA/ Taxes etc). The fee includes audit fee for dealing with the income tax offices in connection with filing of income tax return for enabling IHRD Gratuity Trust to avail of Tax exemptions.
6. The appointment is for the specific period and purpose. It will not be extended or changed under any circumstances.
7. Applicants have to submit their bids in the prescribed format in sealed envelope addressed to “The Chairman & Managing Trustee, IHRD Employees Gratuity Trust, Prajoe Towers, Vazhuthacaud, Thiruvananthapuram” superscripted “Bid for the Appointment of Auditors for GRATUITY TRUST” on or before **24.08.2019, 4 PM**
8. The sealed bids will be opened on 26.08.2019, 12.00PM

Sd/-

CHAIRMAN & MANAGING TRUSTEE
IHRD Employees Gratuity Trust

APPLICATION FORM

1.	Name of the Firm & Registration Number	
2.	Address of the firm	
3.	Phone number Office no Mobile no.	
4.	Email	
5.	Branch Office (if any) 1. 2. 3.	
6.	Number of years of firm's existence & Date of establishment of firm	
7.	Registration with ICAI	
8.	Details of partners along with Educational Qualification & Experience	
9.	Number of Qualified auditors	
10.	Number of Audit Staff in the firm	
11.	Audit experience of the firm during last three financial year (No. of audit assignments of Internal/ Statutory Audit of Corporate/PSUs /Autonomous Institution)	
12.	Details of Internal/Statutory Audits of Corporate/PSUs/ Autonomous Institution	
	Financial Year	Name of the Corporate/PSUs/ Autonomous Institution
	2017-18	Type of Audit (Statutory/ Internal)
	2016-17	
	2015-16	

13.	Audit fee quote (Inclusive of TA/DA, GST) for the entire work	Rs (Rupees.....) <i>Both in numeric and words</i>
-----	---	---

I/We _____ on behalf of M/s _____
_____ (Name of Firm) having Registered Office at
_____(Address) bearing Registration
No._____(Firm Reg. No.) do hereby solemnly state that all the
details mentioned herein above are true and correct.

Signature along with Seal of CA/ICWA Firm

Name _____

Designation _____

Membership No. _____

Date:

Place: