FORM 1

APPLICATION CUM QUESTIONNAIRE TO BE SUBMITTED BY PRACTICE UNIT

[*As per Clause 6(1) & 6 (2) of the Peer Review Guidelines 2022*]

The Secretary, Peer Review Board,

The Institute of Chartered Accountants of India,

ICAI Bhawan,

Post Box No. 7100,

Indraprastha Marg, New Delhi – 110002

APPLICATION

Dear Sir,

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1. Our Firm fgsgs ....
   (Name of practice unit as per ICAI Records) ; FRN/ M. No sgsg......... (Firm Registration Number/ Mem. No. as per ICAI records) would like to apply for Peer Review for the period from 8/5/2025 to 10/5/2025 (three preceding financial years from the date of application). We have gone through the Peer Review Guidelines 2022 hosted at https://resource.cdn.icai.org/72010prb57960-peer-review-guidelines2022.pdf and undertake to abide by the same.
2. I/We hereby declare that my/our firm is applying for Peer Review (Tick the applicable clause):
   i. ☑ As it is Mandatory by: ICAI ☐ Any other Regulator (please specify)
3. ✓ Voluntarily:
4. ☐ As a special case Review initiated by the Board:
5. ☐ New Unit:
6. ☐ As per decision of the Board:

- I/We hereby declare that my/our firm has signed reports

pertaining to the following assurance services during the period under review:

S. No.	Type of Assurance service rendered	Major type of Client (please specify) (e.g.: Banks; Insurance Company; Manufacturing; Individuals; Trading ; any other)
1	Central Statutory Audit	g
2	Statutory Audit	zv
3	Internal Audit	vcc
4	Tax Audit	zv
5	Concurrent Audit	bxgfg
6	Certification work	cvzv
7	Any other, please specify	zvfgsd

4. I / We hereby declare that my/ our firm ☐ has conducted ✓ has not conducted Statutory Audit of enterprises Listed in India or abroad as defined under SEBI LODR, 2015 during the Review Period.
5. Option for appointment of Reviewer: (Tick appropriate option)
    i. ☐ Same City
    ii. ✓ From outside City
    iii. ☐ Either option (i) or (ii)
    iv. ☐ Preferred City in case of option (ii) dfgd
6. Mail Id for communication with the Practice unit
    hghdhd@gmailcom
7. Address for sending the Peer Review Certificate
    zxvgfgsf

Further Information to be submitted by New Unit