

Multipurpose Empanelment Form 2021-22

Application MEF54747

FRN/MRN.: **025913N**

Type: PARTNER

Logout

Application No.: MEF54747								
# Final Submission at the end of the page								
■ Drafts				Printed On: 16/11/2021 13:42:01				
1. Details of the Applicant								
Name of the Firm		J MADAN & ASSOCIATES						
Firm Registration No.	(FRN)	025913N						
Date of Establishment		10/12/2012						
Unique Code No. (UCN	N)	950168						
Address of Head	d Office							
Address	SHOP NO. 25 LSC	DDA MARKET						
	BLOCK M1 VIKASI	PURI						
City:	NEW DELHI							
State/Union Territory	NCT OF DELHI							
District*	WEST DELHI							
Pin Code:	110018							
Landline/ Mobile	9811785935							
Email Id	cajatinmadan@y	ahoo.com						
PAN*	AAKFJ3945R							
GSTIN (H.O)	07AAKFJ3945R1	ZK						
Please provide	name of the Part	ner to be contacted for any	clarification/informa	tion				
Name of the Partner	* Mobile No.*	E-mail Id*	Alternate Mobile No.	Alternate E-mail Id				
MADAN JATIN	9811785935	cajatinmadan@yahoo.com	9871121489	jmadanassociates@gmail.com				

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2	Particulare	of Partners	ac on	0101	2021 an	d continuina	in the firm
<u>_</u> .		OI I allicio	as un	01.01	U_ I all	u continuina	

	Exclusively Associated [#]	Non-Exclusively Associated	Total
(a) No. of FCAs	2	0	2
(b) No. of ACAs	1	0	1
(c) Total [(a) + (b)]	3	0	3

- # A Member is not treated as "Exclusively Associated", if
 - a. He/She is not holding full time Certificate of Practice (CoP)
 - b. He/She is Partner/Proprietor in any other Firm(s)
 - c. He/She is Employed full time/part time elsewhere
 - d. He/She is a full time/part time Paid Employee/Paid Assistant elsewhere
 - e. He / She is practicing in his Individual Name i.e Sole practice in the Institute's records.

Details of the Partner 1		
I. Name	MADAN JATIN	
II. MRN	500510	
III. Whether Main Occupation is Practice (Y/N)	Υ	
IV. Date of joining in the Firm(DD/MM/YYYY)	10/ 12/ 2012	
V. Whether DISA qualified (Y/N)	Υ	
VI. CISA Certificate No., if qualified		
CISA Expiration Date		
VII. Whether Exclusively Associated (Yes/No)	Yes	
VIII. PAN *	AFCPM1433N	
IX. Email-ID	cajatinmadan@yahoo.com	
X. Mobile No.	9811785935	
XI. CPE hours obtained in Calendar Year 2020 extended till 31st January, 2021	61	
Details of the Partner 2		
I. Name	AMREEK SINGH	
II. MRN	509584	
III. Whether Main Occupation is Practice (Y/N)	Υ	
IV. Date of joining in the Firm(DD/MM/YYYY)	30/ 12/ 2014	

VI. CISA Certificate No., if qualified	
CISA Expiration Date	
VII. Whether Exclusively Associated (Yes/No)	Yes
VIII. PAN *	FZTPS3044D
IX. Email-ID	caamreeksingh@gmail.com
X. Mobile No.	9718975929
XI. CPE hours obtained in Calendar Year 2020 extended till 31st January, 2021	25
Details of the Partner 3	
I. Name	NAVEEN KUMAR
II. MRN	536759
III. Whether Main Occupation is Practice (Y/N)	Υ
IV. Date of joining in the Firm(DD/MM/YYYY)	01/ 10/ 2017
V. Whether DISA qualified (Y/N)	N
VI. CISA Certificate No., if qualified	
CISA Expiration Date	
VII. Whether Exclusively Associated (Yes/No)	Yes
VIII. PAN *	CVHPK7415H
IX. Email-ID	naveen.kr.varshney@gmail.com
X. Mobile No.	9871121489
XI. CPE hours obtained in Calendar Year 2020 extended till 31st January, 2021	35
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3. Number of Paid Chartered Accountant Enfirm	nployee(s) in the Firm as on 01.01.2021 and continuing in the
Exclusively Associated [#]	0
Non-Exclusively Associated	0
Total	0
# A Member is not treated as full time Paid	Chartered Accountant Employee with the Firm if

- He/She is Partner/Proprietor in any other Firm(s)
- He/She is Practicing in Individual name
- He/She is Employed full time/part time elsewhere
- He/She is a full time/part time Paid Chartered Accountant Employee in any other Firm.

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4. Professional	Staff (including at B	ranches) as on 01.6	01.2021	
rticled Assistants				1
udit Assistants				5
ther Professional S	taff ^{**}			3
Total				9
	lge of book keeping and a			nt and Paid Chartered Accountant as mentioned in poundit but excludes typists, stenographers/computer
5. Bank Audit E	experience (in years))		
00 Crore of the Bank		of a Branch) is to be me		of a Private Sector Bank with deposit of not less than experience of Statutory Central Audit of J & K Bank
a). Does the Firm ha	ve experience of Audit	referred to above?(Yes	s/No)	No
If yes, please fill t	the no. of years of expe	rience		0
nentioned in the colum	audited both Public Sectornn of Public Sector Bank	S.		he same year, then experience for 1 year is to be
i. Public Secto	or Banks			0
ii. Private Sec	tor Banks			0
c) Does the Partners a Partner will be con	tor Banks s of the Firm have expensidered to have such enducted the Audit) (Yes/	experience only if he/sh		Yes
c) Does the Partners a Partner will be con he Audit Report/con f yes, please indicate	s of the Firm have expensions	experience only if he/sh No) ave this experience,in	he signed the appropria	Yes ate box.
c) Does the Partners a Partner will be con ne Audit Report/con f yes, please indicate	s of the Firm have expensidered to have such enducted the Audit) (Yes/	experience only if he/sh No) ave this experience,in	he signed the appropria 3 in the first bo	Yes Interpolate box. Dox)
c) Does the Partners a Partner will be con the Audit Report/con	s of the Firm have expensidered to have such enducted the Audit) (Yes/	experience only if he/sh No) ave this experience,in	he signed the appropria	Yes Interpolate box. Dox)
c) Does the Partners a Partner will be con he Audit Report/con f yes, please indicate e.g. if 3 Partners hav	s of the Firm have expensidered to have such enducted the Audit) (Yes/e how many Partners have experience of more to	experience only if he/sh No) ave this experience,in than 8 years, indicate 3	the appropria in the first bo	Yes Interpolate box. Dox)
c) Does the Partners a Partner will be con he Audit Report/con f yes, please indicate e.g. if 3 Partners hav 8 years or more 1	s of the Firm have expensidered to have such enducted the Audit) (Yes/e how many Partners have experience of more to	experience only if he/sh No) ave this experience,in than 8 years, indicate 3	the appropria in the first bo	Yes Interpolate box. Dox)
c) Does the Partners a Partner will be con he Audit Report/con f yes, please indicate e.g. if 3 Partners hav 8 years or more 1	s of the Firm have expensidered to have such enducted the Audit) (Yes/e how many Partners have experience of more to the following the followi	experience only if he/sh No) ave this experience,in than 8 years, indicate 3 3 to 4 years 1	the appropria in the first bo Less than 3 years 0	Yes Interpolate box. Dox)

7. E	xperiend	ce of S	Statutory Au	ıdit of Regional Rı	ural Ban	ks(RRBs)			
(a) Does	s the Firm	have e	experience of	Audit referred to ab	ove?(Yes/	/No)	No		
If yes, please fill the no. of years of experience						0			
B Draft	ts						🔒 Pri	nted On:	16/11/2021 13:42:0
8. F	inancial	Detail	s of Partne	rs of the firm for th	ne Finan	icial Year 2	019-20 (Rs. in Lakh	ıs)	
a) Gros	ss Receip	ts of th	e Applicant f	or the Financial Year	2019-20			18.08	(Rs. in Lakhs)
o) Inco	me tax pa	aid by t	he Firm for F	inancial Year 2019-20)			0.30	(Rs. in Lakhs)
c) Gros	ss GST of	the Fir	m for the Fin	ancial Year 2019-20				3.25	(Rs. in Lakhs)
9. F	inancial	Detail	s of Partne	rs of the firm for th	ne financ	cial vear (20	019-20) (Rs. in Lakh		
MRN	Name of Partner	Share in Profit	Amount of share in Profit (Rs. in Lakhs)	Salary/Remuneration (Rs. in Lakhs)	Interest on Capital (Rs. in	Receipts from the Firm 4+5+6 (Rs. in	Other business / professional income received (other than the firm) (Rs. in Lakhs)	Income under C	permitted by ICAI A Act and Regulations come covered under 8 n Lakhs)
				_	Lakhs)	Lakhs)			
500510	CA. MADAN JATIN	84	0.79	0	0	0.79	9.52	9	9.5
509584		8	0.07	0	0	0.07	5.72	2	5.7
536759		8	0.07	3.48	0	3.55	3.97	,	3.9
*Click	here to vie	ew Inco	me permitted	by ICAI under CA Act	I and Regul	lation.		1	
10.	Disciplin	ary Pr	roceedings						
	er any Di Yes/No	sciplir	nary Procee	ding is pending ag	ainst Paı	rtner(s) / an	y Paid Chartered Acc	countan	t of the No
Membe e, and	ers who ha	have be	een communic			-	ittee / Board of Discipline , should mention "Yes" a		•
	•			ority/any Court, the de	tails shoul	d be reported	in the box below.		
Stay is									
	ts						₽ Prii	nted On:	16/11/2021 13:42:0
) Draft		of Au	dits underta	aken in PSBs durir	ng last 3	years endi	₽ Pri iing on 31st March, 2		16/11/2021 13:42:0
) Draft	Number	of Aud		aken in PSBs durir	ng last 3	years endi			16/11/2021 13:42:0
Draft	Number (a). S	tock Au		aken in PSBs durir	ng last 3	years endi		2021	16/11/2021 13:42:0

12. Total No. of year	s of experience of firm as Statutory Cen	tral Au	ıditors			
(a). Public Secto	or Banks		0			
(b). Foreign Ban	ks		0			
(c). Private Sect	or Banks		0			
(d). Regional Ru	(d). Regional Rural Banks/Cooperative Banks					
13. Statutory Branch	Audit Details					
Whether the Applicant or year 2020-21 (Yes/No)?	onducted Statutory Branch Audit of Publ	ic Secto	or Bank for the No			
When did the Applicant	conduct last Statutory Branch Audit of Pu	ıblic Se	ector Bank(s)?			
Name of the Bank		Financ	cial Year			
□ Drafts			₽ Printed On: 16/11/2021 13:42:01			
14. Other association	n					
Auditor or Specialized Audit) with any of the P	or any of its Partner(s) has been ass Monitoring of borrowers Account (Other ublic Sector Banks as on date of submis gnment is beyond 31st March, 2022 (Yes/N	than S sion of	Statutory Branch N			
Name of the Bank	Concurrent Audit/Internal Audit (Y/N)		Agency for Specialized Monitoring			
**Note : This information will	be shared with respective Public Sector Banks by	'ICAI se _l	eparately			
15. Indebtedness De	etails or any of its Partner(s) was Indebted or	has niv	ven quarantee in N			
respect of any loan for a	amounts exceeding Rs.1,00,000 to any Pu g as on 31st March, 2022 ? (Yes/No)**	_	•			
(if yes, please fill up the follo	wing)					
Name of the Member/firm	(indebted/Guarantor)		Name of the Bank			
**Note : This information will	be shared with respective Public Sector Banks by	'ICAI se _l	eparately			
B Drafts			₽ Printed On: 16/11/2021 13:42:01			
16. Experience of the	e applicant other than bank audit (option	nal)				
Experience Type			Yes/No			
Indirect Tax			✓ Yes			
Forensic Audit & Accounting			✓ Yes			
Ind AS			✓ Yes			
Internal Audit			/ Van			
			✓ Yes			

Experience Type		Yes/No
Cooperative Sector		✓ Yes
Direct Taxation		✓ Yes
Commercial & Economic Laws		✓ Yes
International Consultancy Services		✓ Yes
International Taxation		✓ Yes
	Print	
You will not be able to re	esubmit or make any changes after fina	l submission
	Final Submit	