

6. (a) Address(es) of the branch office(s) of the firm / Chartered Accountant in practice, if any

(i)

City State Code

Pin Phone No. with STD Code /

Country:

Email id

Mobile No.

(ii)

City State Code

Pin Phone No. with STD Code /

Country:

Email id

Mobile No.

(iii)



City State Code

Pin Phone No. with STD Code /

Country:

Email id

Mobile No.

(b) Date on which each branch office was opened

Place of the branch:

Date:

- -

- -

- -

- -

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7. Name of the member with membership number who is incharge of each of the offices , i.e. head office and branch offices.

Head Office

Name of the member in-charge

Membership No



Branch Office(s)	Name(s) of member(s) in-charge	Membership No
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

8. Whether the proprietor / any partner stated in serial number 2 above is / are partner or proprietor or paid assistant with any other firm(s) of chartered accountants in practice any where in India and whether any of them are engaged in a full time or part-time occupation elsewhere?

Yes No

9. If yes, give details in each case

(i) .Name of the partner / Proprietor / Paid Assistant

Name(s) of the firm(s) of Chartered accountants with which connected

Capacity in which connected Proprietor Partner Paid Assistant

Particulars of full-time of part-time occupation elsewhere if any.

(ii).Name of the partner / Proprietor / Paid Assistant

[Grid for name entry]

Name(s) of the firm(s) of Chartered accountants with which connected

[Grid for firm name entry]

Capacity in which connected Proprietor Partner Paid Assistant

Particulars of full-time or part-time occupation elsewhere if any.

[Grid for occupation details]

(iii).Name of the partner / Proprietor / Paid Assistant

[Grid for name entry]

Name(s) of the firm(s) or Chartered accountants with which connected

[Grid for firm name entry]

Capacity in which connected Proprietor Partner Paid Assistant

Particulars of full-time or part-time occupation elsewhere if any.

[Grid for occupation details]

(iv).Name of the partner / Proprietor / Paid Assistant

[Grid for name entry]

Name(s) of the firm(s) of Chartered accountants with which connected

[Grid for firm name entry]

Capacity in which connected Proprietor Partner Paid Assistant

Particulars of full-time or part-time occupation elsewhere if any.

[Grid for occupation details]

10 . In case of a firm, whether any partner is also practising in his individual name? Yes No

11. If yes, give name(s) and membership number(s) of the member(s)

(i) Name [Grid]

Membership No. [Grid]

(ii) Name [Grid]

Membership No. [Grid]

(iii) Name [Grid]

Membership No. [Grid]

(iv) Name [Grid]

Membership No. [Grid]



(v) Name [Grid]

Membership No. [Grid]

12. Name(s) of the member(s) of the institute with membership number(s) holding full time employment in the firm /under chartered accountant in practice and date of joining of each such member.

(i) Name

Membership No. Date of joining

(ii) Name

Membership No. Date of joining

(iii) Name

Membership No. Date of joining

(iv) Name

Membership No. Date of joining

13. Whether any paid assistant stated at serial number 12 above is partner or proprietor or paid assistant with any other firm(s) or chartered accountant in practice any where in India?

Yes No

14. If yes, give details:

(i) Name of the paid assistant

Name(s) and place(s) of Firm(s) in which engaged as partner / proprietor / paid assistant

Capacity in which connected with the firm, i.e., as partner / proprietor / paid assistant

Proprietor Partner Paid Assistant

(ii) Name of the paid assistant

Name(s) and place(s) of Firm(s) in which engaged as partner / proprietor / paid assistant

Capacity in which connected with the firm, i.e., as partner / proprietor / paid assistant

Proprietor Partner Paid Assistant



(iii) Name of the paid assistant

Name(s) and place(s) of Firm(s) in which engaged as partner / proprietor / paid assistant

Capacity in which connected with the firm, i.e., as partner / proprietor / paid assistant

Proprietor Partner Paid Assistant

15. Whether any paid assistant stated at serial number 12 above is practising in his individual name?

Yes No

16. If yes, give name(s) and membership number(s) of the paid assistant(s).

(i) Name

Membership No.

(ii) Name

Membership No.

(iii) Name

Membership No.

(iv) Name

Membership No.

Date :

Place :

Signature(s) of the proprietor / all partner(s) of the firm with their Membership number(s)

(Within the frame only)

Signature

Membership number

(Within the frame only)

Signature

Membership number

(Within the frame only)

Signature

Membership number

(Within the frame only)

Signature

Membership number

(Within the frame only)

Signature

Membership number

(Within the frame only)

Signature

Membership number



Note: Particulars in Form 18 should be submitted for the constitution/reconstitution of the firm within one month from the date of constitution or change in constitution.
 In case of delay in filling the form beyond the stipulated period as stated above, it has to be accompanied by a request for condonation and appropriate condonation fee as per the following schedule:

Regulation	Period of Delay / Corresponding fee to be charged		
	30 days	31-180 days	Beyond 181 days
	Rs.	Rs.	Rs.
190 (4) – Condonation of delay in filing Form 18, for registration of firm name	100	300	1000
190 (7) – Condonation of delay in filing Form 18 notifying change in particulars of office / firms	100	300	1000

The levy of fee would come into effect in respect of requests for condonation received on or after 1st April, 2002. It may be clarified that each case of condonation received alongwith the fee, will be considered on its merits.

Regulation 190 (4) / 190 (7) – Condonation of delay in filing Form 18, for registration / re-constitution/ closure of the firm: The following supporting documents should accompany along with the request for confection

1. Certified true copy of the partnership deed
2. Copies of income Tax Returns of the firm and partners / proprietor, as the case may be.
 In case where the income of the firm is not taxable, certified copy of the accounts of the firm / member(s).
3. Certified true copy of the dissolution deed.

