

Name of Technical Reviewer (TR), ICAI M. No. & TR No.:

Name & FRN of AFUR:

Quality Review (QR) of Statutory Audit of ..... (Name of Entity) for the year ended on.....

**Overview and information on planning and performing the review**

<b>Information on Planning the review</b>	<p>The following steps were taken in planning the whole review:-</p> <ul style="list-style-type: none"> <li>-</li> <li>-</li> <li>-</li> </ul>												
<b>Information on Performing the review</b>	<p>a) Quality review program General Questionnaire was sent to the Audit firm on _____.</p> <p>b) Reply of the Audit firm o Questionnaire was received on _____.</p> <p>c) On-site review of the Audit firm was conducted as:</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 10%;">S. No.</th> <th style="width: 35%;">Names</th> <th style="width: 25%;">Dates of on-site visit</th> <th style="width: 30%;">Place of visit</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1.</td> <td>Name of TR</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">2.</td> <td>Names of Assistant/s, if any</td> <td></td> <td></td> </tr> </tbody> </table>	S. No.	Names	Dates of on-site visit	Place of visit	1.	Name of TR			2.	Names of Assistant/s, if any		
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	<p>d) Whether the certificate from AFUR for conducting on site review in prescribed format was obtained? ____ (Yes/No).</p> <p>e) Preliminary report was issued to Audit firm on ____.</p> <p>f) Reply of Audit firm to Preliminary report was received on ____.</p> <p>g) Final report sent to QRB and Audit firm on ____.</p>
<b>Any other information, as may be considered relevant</b>	