

FORM NO. CRA-2

[Pursuant to section 148(3) of Companies Act, 2013 and rule 6(2) & 6(3A) of the Companies (cost records and audit) Rules, 2014]



Form of intimation of appointment of cost auditor by the company to Central Government

Form language ☒ English ☐ Hindi

Note: Refer the instruction kit for filing the form.

IN CASE OF REVISED CRA-2, ALL THE DETAILS MUST BE FILLED AFRESH.

1. (a) * Corporate identity number (CIN) or foreign company registration number (FCRN) of the company
- (b) Global location number (GLN) of company

2. (a) Name of the company

(b) Address of the registered office or of the principal place of business in India of the company

(c) * e-mail ID of the company

(d) * Phone (with STD code) -

(e) * Nature of intimation of appointment of cost auditor(s)

3. * Product(s)/ Service(s) to which Cost Audit relates

(a) Number of Industries/Sectors/Products/Services (CETA Heading Level, wherever applicable as per rules) covered under regulated sectors

Details of such industries/sectors/products/services

Industries/sectors/products/services	CETA heading (wherever Applicable)	No. of tariff items/Products/ services
<input type="text"/>	<input type="text"/>	<input type="text"/>

(b) Number of Industries/Sectors/Products/Services (CETA Heading Level, wherever applicable as per rules) covered under non-regulated sectors

Details of such industries/sectors/products/services

Industries/sectors/products/services	CETA heading (wherever Applicable)	No. of tariff items/Products/ services
<input type="text"/>	<input type="text"/>	<input type="text"/>

4. * Details of all the cost auditor(s) appointed

* Number of cost auditor(s)

1

(a) * Category of the auditor ☐ Individual ☐ Partnership firm ☐ Limited liability partnership (LLP)

(b) (i) * Membership number of the Cost Auditor/ member representing the Cost Auditor's Firm/LLP

(ii) * Name of the Cost Auditor/ member representing the Cost Auditor's firm/LLP

(iii) * Firm Registration Number(FRN) of the Cost Auditor/Cost Auditor's firm/LLP

(iv) * Name of the Cost Auditor's firm/LLP

(c) (i) Address * Line I

Line II

(ii) * City

(iii) * State

(iv) * Country

(v) * Pin Code

(vi) * e-mail ID of the firm or member

(d) * Date of the board meeting in which cost auditor was appointed

(DD/MM/YYYY)

(e) * Type of appointment

☐ Original ☐ Appointment due to casual vacancy ☐ Appointment for new products/ services/locations

(f) * Scope of audit of the cost auditor/firm/LLP

5. * Financial year to be covered under the cost audit

From

(DD/MM/YYYY)

To

(DD/MM/YYYY)

6. (a) * Is there any change in cost auditor(s) appointed, from the previous financial year ☐ Yes ☐ No ☐ Not Applicable**Attachments**

List of attachments

(1) * Copy of Board resolution of the company

Attach

(2) Optional attachment, if any.

Attach

Remove Attachment

Declaration

I am authorized by the Board of Directors of the Company vide resolution number *
dated * to sign this form and declare that all the requirements of Companies Act, 2013 and the
rules made thereunder in respect of the subject matter of this form and matters incidental thereto have been complied
with. I also declare that all the information given herein above is true, correct and complete including the attachments
to this form and nothing material has been suppressed.

* To be digitally signed by

* Designation

* Director identification number of the director; or PAN of the
Manager or CEO or CFO or authorized representative;
or Membership number of the Company Secretary

Note: Attention is drawn to provisions of Section 448 and 449 which provide for punishment for false statement / certificate and punishment for false evidence respectively.

Modify

Check Form

Prescrutiny

Submit

**This eForm has been taken on file maintained by the Central Government through electronic mode
and on the basis of statement of correctness given by the company**