



CITY OF NEW YORK
OFFICE OF THE COMPTROLLER

TECHNICAL & PROFESSIONAL
STANDARDS UNIT

**ANNUAL AFFIRMATION FORM FOR THE ACCOUNTING FIRM
QUESTIONNAIRE FOR THE COMPTROLLER'S
PRE-QUALIFIED LIST OF AUDITORS**

One of the requirements for remaining on the Comptroller's Pre-Qualified List of Auditors (CPA List) is to affirm annually the accuracy of the information previously submitted on the Accounting Firm Questionnaire, or to submit updated information, by providing an Annual Affirmation Form.

The Annual Affirmation Form on the following page is to be provided by firms if no changes to the information in the Accounting Firm Questionnaire have occurred since the Questionnaire was last submitted. The Annual Affirmation Form on page three of this document is to be provided by firms if changes to information in the Accounting Firm Questionnaire have occurred since the Questionnaire was last submitted.

The completed, signed, Annual Affirmation Form, including any updated information (System Peer Review, AICPA Acceptance Letter, etc.), should be submitted by June 30th each year to:

Via e-mail¹ to: cpalist@comptroller.nyc.gov

¹Please be advised that the size of e-mail submissions must be less than 10MB.



**ANNUAL AFFIRMATION FORM FOR THE ACCOUNTING FIRM
QUESTIONNAIRE FOR THE COMPTROLLER'S
PRE-QUALIFIED LIST OF AUDITORS– NO CHANGES**

This Affirmation is to be provided if no changes to the information in Accounting Firm Questionnaire have occurred since the Questionnaire was last submitted.

Note: In addition to the submission of the Annual Affirmation Form for the Accounting Firm Questionnaire, firms are responsible for prompt notification to the Comptroller's Office of any changes in the information provided in these documents which could result in a reconsideration of the firm's qualifications to perform City audit engagements. Notification of all changes of address should be made immediately, as well as any significant change (10%) to the number of professionals in the firm. A change in the firm's name requires reapplication. Failure to comply with these requirements may result in revocation of pre-qualification status in accordance with Section 3-10 (l) of the Procurement Policy Board Rules.

I, _____ Authorized to Represent _____
Print Name and Title Print Name of Firm

Certify that the information contained in the Accounting Firm Questionnaire, dated _____, to the best of my knowledge, information, and belief, is accurate and complete and does not require any updates. I also certify that I have read the above Note.

Signature of Firm Representative Date

