

IMMEDIATE
OUT-TO-DAY.



RVPN

RAJASTHAN RAJYA VIDYUT PRASARAN NIGAM LTD
[Corporate Identity No. (CIN) : U40109RJ2000SG016485]
Office of Chief Controller of Accounts,
Vidyut Bhawan, Jyoti Nagar, Jaipur 302005
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No. RVPN/CCOA/Sr.AO(B&R)/W&M)/F. /2016-17/D. 298 Date : 14/6/16

CIRCULAR


1. Consequent upon Order No. 129 dated 25.05.2016 issued by the Chief Controller of Accounts, RVPN, Jaipur vide which Drawing & Disbursing Power of Cost Centres have been entrusted to Circle AOs of Profit Centres, a need to open new bank accounts for day to day functioning of the Circles have been felt. Hence, it is advised to all circle AOs to send their details in the annexed format – A, duly verified by the Circle head (CE/SE as the case may be), so that bank account opening process may be initiated.
2. Further, nomenclature of existing circle AOs has also been changed, therefore existing Circle AOs are advised to send their bank account details in the annexed format – B, so that bank accounts may be renamed.
3. In case existing bank accounts are to be transferred with change of name due to shifting/transfer of office to another city, then details may be provided in annexed format – C.
4. All the concerned officers are advised to send the desired information at the earliest.


Chief Accounts Officer (A/cs-W&M)

Copy submitted/forwarded to the following for information and necessary action :-

1. The Zonal Chief Engineer/Chief Engineer (_____), RVPN, _____
2. The Regional CAO/CAO (_____), RVPN, _____
3. The Superintending Engineer (_____), RVPN, _____ to forward the same to the offices falling under your jurisdiction. .
4. The S.E. (MIS), RVPN, Jaipur for uploading the same on the website of RVPN.
5. The Sr. AO/AO/AAO (_____), RVPN, _____.

Encl : Format – A, B & C


10.6.2016
Sr. Accounts Officer (B&R and W&M)

DETAILS REQUIRED FOR OPENING OF BANK ACCOUNT FOR NEWLY CREATED

DD OFFICES.

1. Name of Bank : State Bank of Bikaner & Jaipur.
2. Name of Main Branch of Bank : _____
3. Address of Branch : _____

4. Branch Code : _____
5. Authorised Accounts Officer/s Name : _____
6. Authorised Accounts Officer/s Design. : _____
7. Three Specimen signatures of
Authorised Officer/s with Seal
1. _____
2. _____
3. _____

Countersignature

Verified by Circle Head (CE/SE)

Chief Controller of Accounts
RVPNL, Jaipur.

(Signature with seal)
Name & Desination

FORMAT - B

**DETAILS REQUIRED FOR CHANGE IN THE NAME OF EXISTING BANK ACCOUNT
FOR EXISTING DD OFFICES.**

1. Name of Bank : State Bank of Bikaner & Jaipur.

2. Name of Main Branch of Bank : _____

3. Address of Branch : _____

4. Branch Code : _____

5. Old Nomenclature of Circle : _____

6. New Nomenclature of Circle : _____

7. Existing Bank Account Name & Account
Nos., which are to be renamed.

1. _____

2. _____

3. _____

4. _____

5. _____

Countersignature

Verified by Circle Head (CE/SE)

Chief Controller of Accounts
RVPNL, Jaipur.

(Signature with seal)
Name & Desination

FORMAT - C

DETAILS REQUIRED FOR TRANSFER OF EXISTING BANK ACCOUNT TO NEW
DD OFFICES.

1. Name of Bank : State Bank of Bikaner & Jaipur.
2. Name of Main Branch of Bank : _____
(New District)
3. Address of Branch : _____

4. Branch Code : _____
5. Old Nomenclature of Circle with District: _____
6. New Nomenclature of Circle with District: _____
7. Existing Bank Account Name, with Branch address, Branch Code & Account
Nos. which are to be transferred.
1. _____
2. _____
3. _____
4. _____
5. _____

Countersignature

Verified by Circle Head (CE/SE)

Chief Controller of Accounts
RVPNL, Jaipur.

(Signature with seal)
Name & Desination