[Pursuant to sections 4, 7, 12, 152 and 153 of the	
Companies Act, 2013 read with rules made	SPIC E
thereunder] - FORM NO. INC-32	31 1C C
	(Simplified Proforma for Incorporating Company Electronically
Form language oEnglish o Hindi	
Refer the instruction kit for filing the form.	
(a) *State the type of company	
(b) *State the class of company o Pub	lic o Private o One Person Company

(d) *State the sub-category of company (e) *Company is		(c) *State the	e category of company					
(f) Section 8 license number 2. (a) *Main division of industrial activity of the company Description of the main division (b) Whether Articles of Association is entrenched o Yes o No Number of Articles to which provisions of entrenchment shall be applicable Details of such articles Sr. No.		(d) *State the	e sub-category of compa	ny				
2. (a) *Main division of industrial activity of the company Description of the main division (b) Whether Articles of Association is entrenched o Yes o No Number of Articles to which provisions of entrenchment shall be applicable Details of such articles Sr. No.		(e) *Company	y is 🗆 Having share ca	oital 🗆 N	lot having share cap	ital		
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(b) Whether Articles of Association is entrenched o Yes o No Number of Articles to which provisions of entrenchment shall be applicable Details of such articles Sr. No.	2.	(a) *Main	division of industrial	activity o	f the company [
Number of Articles to which provisions of entrenchment shall be applicable Details of such articles Sr. No.		Description	n of the main divisio	n				
Number of Articles to which provisions of entrenchment shall be applicable Details of such articles Sr. No.								
Details of such articles Sr. No.		(b) Whether A	Articles of Association is	s entrenched	o Y es o No			
3. (i) *Capital structure of the company Total authorized share capital (in Rupees) Authorized share capital Equity Preference Unidentified Number of shares Nominal amount per share (in Rupees) Total amount (in Rupees) Total subscribed share capital (in Rupees) Subscribed share capital Equity Preference Number of shares Nominal amount per share (in Rupees) Total amount (in Rupees) (ii) *Details of number of members (a) Enter the maximum number of members (b) Maximum number of members excluding proposed employees (c) Number of members excluding proposed employee(s) 4. (a) *Correspondence address *Line I Line II Line II **City **State/Union Territory **Pin code **Post Authorized Share capital (in Rupees) Fax	Detail			ions of entre	nchment shall be ap	pplicable		
Total authorized share capital (in Rupees) Authorized share capital E quity Preference Unidentified Number of shares Nominal amount per share (in Rupees) Total amount (in Rupees) Total subscribed share capital (in Rupees) Subscribed share capital E quity Preference Number of shares Nominal amount per share (in Rupees) Total amount (in Rupees) (ii) *Details of number of members (a) Enter the maximum number of members (b) Maximum number of members excluding proposed employees (c) Number of members excluding proposed employee(s) 4. (a) *Correspondence address *Line I Line I Line I *City *Phone (with STD code) *Pistrict *Phone (with STD code) *Fax		Sr. No.	Article Number	Short desc	cription on entrend	hment of th	ne clause	
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(d) Number of members excluding proposed employee(s) 4. (a) *Correspondence address *Line I Line II *City *State/Union Territory *Pin code *District *Phone (with STD code) Fax								
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*Line I	4	L.		rig propose	u emproyee(s)			
*City *State/Union Territory *Pin code *District *Phone (with STD code) Fax			, , , , , , , , , , , , , , , , , , ,					
*State/Union Territory		Line II						
*District		*City						
*Phone (with STD code) Fax		*State/Union	Territory		*	Pin code		
Fax		*District						
Fax		*Phone (with	STD code)					
			· L					
			he company					

		ether the address for correspondence is the ne of the office of the Registrar of Compan		_				
Γ̈́	.,			ало р . орозова со			-5.515.	
5. ⁻	*Parti	culars of the proposed or approved i	name					
(5)	/:\	#Whathay name is already approved by F	logistrov of	Commonica o V	aa a Na			
(a)((1)	*W hether name is already approved by F SRN of form INC-1	registrar of t	Lompanies o r	es onc			
						Pre-Fi	II	
(i	ii)	Proposed or approved name						
		Significance of abbreviated or coined word in the proposed name						
		State the name of the vernacular language(s) if used in the proposed name and meaning thereof						
(b)		Whether the promoters are carryi	_		firm,	sole	o Y es	o No
		f yes, whether the business of such ent	'	•			o Yes	o No
	(ii) ⁻	Whether the proposed name including	the phrase	:Electoral trus	st		o Y es	o No
	(iii)	*Whether the proposed name(s) conta			on for v	vhich	o Y es	o No
	(1, 1)	the previous approval of Central Gove		•		-	o V os	o No
		Whether approval from any sectoral re			Foreig			
	(v)	Whether the name is similar to o Exi [Attach the copy of No Objection Certifi						
		that company)] Provide CIN		1	ı			
		Name of the Company		Pre-fill				
		Ivaine of the Company						
(c)	(i) *V	/hether the proposed name is based on a tr	ademark reg	istered or is sub	iect mat	ter of an	applic	ation
. ,		pending for registration under the Trade Ma	_	o Yeso No	•		••	
	(ii) *	Specify the class(s) of trade mark (refer th	e instructior	kit for details)				
	(iii) [·]	*Furnish the particulars of application and	the approva	of the applican	t or own	er of the	trade	mark
6. ((a) *N	umber of first subscriber(s) to MOA	and dire	ctors of the co	ompany	/		
				Having vali DIN		Not ha DIN	ving	valid

Total number of first subscribers	
(non-individual + individual)	
Number of non-individual first subscriber(s)	
Number of individual first subscriber(s) cum	
director(s)	
Total number of directors	
(director(s) who is/are not subscriber(s) +	
subscriber(s) cum director(s) as mentioned in	
above Row no. 3)	
,	
(b) *Particulars of non-individual first subscriber(s	5)
*Category	
*Corporate identity number(CIN) or foreign company	Pre-Fill
registration number(FCRN) or any other registration number	rieriii
*Name of the body corporate	
Registered office address or Principal place of business in India or Principal	place of business outside India
*Line I	
Line II	
*City	
*State /Union Territory	
*ISO Country code	
Country	
*Phone (With ST D/ISD code)	
Fax	
*email id	
Particulars of the authorised person	
*First Name	
Middle Name	
*Surname	
*Father's First Name	
Taulet 31 ii 3t Name	
Father s Middle Name	
*Father's Surname	
* Gender Birth	
□ PAN □ Passport number	Vorify Details
A adhaar number	Verify Details
*Place of Birth (District & State)	
*Occupation type	
*Area of Occupation	
*Educational qualification	
Present Address	
*Line I	
Line II	
*City	
*State /Union Territory	
ISO Country code	
Country	
*Phone (With ST D/ISD code)	

Kind o	f shares subscribed	Number of subscribed shares	A mount of shares subscribed
Equity	shares		
Prefere	ence shares		
(c) *P ז ר	articulars of individual f *Director Identification nun		an subscriber cum director)
1	*Name	TIBEL (DITY)	Pre-Fill
	Kind of shares subscribed	Number of subscribed shares	A mount of shares subscribed
	E quity shares	Trainibel of Sabseribed Shares	711104111 01 31141 03 343301 1304
	Preference shares		
I	*First Name		
	Middle Name		
	*Surname *Father s first name		
	Father's middle name		
	*Father s surname	*Date of Birth	*Notionality
	*Place of Birth	"Date of Biltif	*Nationality
		mplayed a Drafassianal a Ham	emaker o Student o Serviceman
	*Area of Occupation	nproyed o Professional o Hom	ernaker o student o servicernan
	If :Others selected, pleases	specify	
	*Educational Qualification	зреспу <u> </u>	
	* - PAN - Passport number	ner [Varific Datatla
	A adhaar number		Verify Details
	*email ID		
	Permanent A ddress		
	*Line I		
	Line II		
	*City		
	* State/ Union Territory		*Pin code
	*ISO Country code	Country	
	*Phone (with STD/ISD cod	e)	

	Line II		
	*City		
	*State/ Union Territory	7	*Pin code
	*ISO Country code	Country	
	*Phone (with STD/ISD cod	de T	
	*Duration of stay at present addre	ss Mont	
	If Duration of stay at present addr	ess is less than one year then address of previou	ıs residence
	*Proof of identity	dential Proof	
	-	ity and proof of address under attac	hments.
	Kind of shares subscribed	Number of subscribed shares	A mount of shares subscribed
	E quity shares		
	Preference shares		
(d) *F	Particulars of individual first s	ubscriber(s) cum directors	
I	*Director Identification nur		
1			Pre-Fill Pre-Fill
	*Name		
	*Gender	*Date of Birth	*Nationality
	*Designation		ategory
	Whether - Chairman - E	xecutive director $\ \square$ Non-executive di	irector
	*Name of the company or i	nstitution whose nominee the appoint	eeis
	*email ID		
	Kind of shares subscribed	Number of subscribed shares	A mount of shares subscribed
	E quity shares		
	Preference shares		
	Number of entities in which	h director have interest (Need not	
	Trainible of charges in which		I
		having CIN/FCRN/LLPIN)	
		having CIN/FCRN/LLPIN)]
	to mention if such entity is	having CIN/FCRN/LLPIN)]
	to mention if such entity is *Registration number *Name	having CIN/FCRN/LLPIN)	
	to mention if such entity is *Registration number	having CIN/FCRN/LLPIN)	
	to mention if such entity is *Registration number *Name	having CIN/FCRN/LLPIN)	
	to mention if such entity is *Registration number *Name		
	to mention if such entity is *Registration number *Name *Address Nature of *Designat	ion	unt
	to mention if such entity is *Registration number *Name *Address Nature of *Designat	ion and an analysis and a mo	unt

I *First Name	
Middle Name	
*Surname	
*Father s first name	
Father's middle name	
*Father s surname	
*Gender *Date of Birth *Natio	nality
*Place of Birth	
*Whether citizen of India o Yes o No *Whether resident in India o Yes	s o No
*Occupation type o Self Employed o Professional o Homemaker o Student o Se	rviceman
*A rea of Occupation	
If : Others `selected, please specify	
*Educational Qualification	
* \square PA N \square Passport number Verify Details	
*Designation *Category	
Whether □ Chairman □ Executive director □ Non-executive director	_
*Name of the company or institution whose nominee the appointee is	
*email ID	
Permanent A ddress	
*Line I	
Line II	
*City	
* State/ Union Territory *Pin code	
*ISO Country Code Country	
*Phone (with STD/ISD code)	
*Whether present residential address same as permanent residential address o Y es	ONO
Present address *Line I	
Line II	
*City	
*State/ Union Territory *Pin code	
*ISO Country code Country	
*Phone (with ST D/ISD code	
*Duration of stay at present address Mont	
If Duration of stay at present address is less than one year then address of previous residence	

Driving licen				
Aadhaar Nun				
Submit the p	roof of identit	ty and proof of ac	ldress under att	achments.
Kind of shares	subscribed	Number of subsc	ribed shares	A mount of shares sub
E quity shares				
Preference shar				
		director have inte	rest	
*Registration	n number			
*Name				
*A ddress				
Nature of	*D			1
	*Designation			
interest		of Shareholding	An	nount
	Others (spe	_		
articulars of	directors (o	ther than first s	ubscri bers)	
*Director Ide	ntification nun	nber (DIN)		Pre-Fill
*Name [
*Name [*Gender [*Date of E	Birth	*Nationali
*Gender [*Date of E		*Nationali
*Gender [*Designation		*Date of E	*	Category
*Gender [*Designation Whether \Box C	hairman 🗆 Ex	ecutive director	*\ \tau \text{Non-executive}	Category director
*Gender [*Designation Whether \Box C	hairman 🗆 Ex		*\ \tau \text{Non-executive}	Category director
*Gender [*Designation Whether \Box C	hairman 🗆 Ex	ecutive director	*\ \tau \text{Non-executive}	Category director
*Gender [*Designation Whether □ C *Name of the *email ID [hairman 🗆 Ex	ecutive director	* Non-executive ominee the appoi	Category director
*Gender [*Designation Whether □ C *Name of the *email ID [Number of er	hairman □ Ex company or in	ecutive director	* Non-executive ominee the appoi	Category director
*Gender [*Designation Whether □ C *Name of the *email ID [Number of er	hairman	director have inte	* Non-executive ominee the appoi	Category director
*Gender [*Designation Whether □ C *Name of the *email ID [Number of er to mention if	hairman	director have inte	* Non-executive ominee the appoi	Category director
*Gender [*Designation Whether □ C *Name of the *email ID [Number of er to mention if *Registration	hairman	director have inte	* Non-executive ominee the appoi	Category director
*Gender [*Designation Whether □ C *Name of the *email ID [Number of er to mention if	hairman	director have inte	* Non-executive ominee the appoi	Category director
*Gender [*Designation Whether □ C *Name of the *email ID [Number of er to mention if *Registration	hairman	director have inte	* Non-executive ominee the appoi	Category director
*Gender [*Designation Whether □ C *Name of the *email ID [Number of er to mention if *Registration	hairman	ecutive director estitution whose no director have inte	* Non-executive ominee the appoi	Category director
*Gender [*Designation Whether □ C *Name of the *email ID [Number of er to mention if *Registratio *Name *A ddress	hairman = Execompany or in titities in which such entity is her number = *Designation*	ecutive director estitution whose no director have inte	Non-executive ominee the appoint rest (Need not [/LLPIN)	Category director

I *First Name
Middle Name
*Surname
*Father s first name
Father s middle name
*Father`s surname
*Gender *Date of Birth *Nationality
*Place of Birth
*Whether citizen of India o Yeso No *Whether resident in India o Yeso No
*Occupation type o Self Employed o Professional o Homemaker o Student o Serviceman
*A rea of Occupation
If : Others `selected, please specify
*Educational Qualification
* \square PA N \square Passport number Verify Details
*Designation *Category
Whether Chairman Executive director Non-executive director
*Name of the company or institution whose nominee the appointee is
*email ID
Permanent A ddress
*Line I
Line II
*City
* State/ Union Territory
*ISO Country code Country
*Phone (with STD/ISD code) -
*Whether present residential address same as permanent residential address o Y es oNo
Present address
*Line I
Line II
*City
*State/ Union Territory *Pin code
*ISO Country code Country
*Phone (with STD/ISD code) -
*Duration of stay at present address Y ears Months
If Duration of stay at present address is less than one year then address of previous residence
*Proof of identity *Residential Proof

	V oter's identity	y card number	
	Driving license	e number	
	A adhaar Numl	ber	
	Submit the pr	roof of identity and proof of address under attachments.	
	Number of ent	tities in which director have interest	
	*Registration	n number	
	*Name		
	*A ddress		
	Nature of	*Designation	
	interest	Percentage of Shareholding A mount	
		Others (specify)	
7. (a) * ľ	Vomination		
I *		,	
the su	bscriber to the m	nemorandum of association of	
do her	eby nominate *		
who s	hall become the	member of the company in the event of my death or incapacity to contract. I declare that the nomination within the meaning of Rule 3 of the Companies (Incorporation) Rules, 2014.	e
	•		
	articulars of the or Identification number		
		Der(DIN) Pre-Fill	
*First N			
Middle *Surna			
	rĭs First Name		
	š Middle Name		
	r s Surname		
*Gende		*Date of Birth Nationality	
*Incom	e- tax PAN	V erify Details	
	ar number		
	وا of Birth (District &	State)	
	oation type		
	of Occupation		
	tional qualification "		
	nent A ddress		
*Line I			
Line II			
*City	/Union Territory	*Pin code	
	ountry code		
Countr			
Count	,		

*Phone (With STD/ISD code)				
Mobile				
Fax				
*email id				
*W hether present address is same as the pe	ermanent address	□ No		
Present Address *Line I				
Line II				
*City				
				
*State/Union Territory				
*ISO Country code				
Country				
Phone (With STD/ISD code)				
Mobile				
Fax				
*Duration of stay at present address	Y ears	Months		
*Duration of stay at present address If Duration of stay at present address is less				
		ss of previous residence]	7
If Duration of stay at present address is less	s than one year then addres	ss of previous residence		
If Duration of stay at present address is less	s than one year then addres	ss of previous residence		
If Duration of stay at present address is less	s than one year then addres	ss of previous residence]
If Duration of stay at present address is less	s than one year then addres	ss of previous residence]
If Duration of stay at present address is less	s than one year then addres	ss of previous residence]
If Duration of stay at present address is less	s than one year then addres	ss of previous residence]
If Duration of stay at present address is less *Proof of identity	*Residential Prod	ss of previous residence]
If Duration of stay at present address is less *Proof of identity *Proof of identity	*Residential Prod	ss of previous residence		
If Duration of stay at present address is less *Proof of identity *Pro	*Residential Prod	ss of previous residence		Pre-Fill
*Proof of identity Particulars of payment of s (a) State or Union territory in respect of which duty is paid or to be paid	*Residential Prod	ss of previous residence		AND AND THE STREET
*Proof of identity Particulars of payment of s (a) State or Union territory in respect of which duty is paid or to be paid (b) *Whether stamp duty is to be paid electrons.	*Residential Prod	os of previous residence	No Not	Pre-Fill applicable
*Proof of identity Particulars of payment of s (a) State or Union territory in respect of which duty is paid or to be paid (b) *Whether stamp duty to be paid	*Residential Prod *tamp duty th stamp chically through MCA21 sy	os of previous residence	: (=0000	applicable
*Proof of identity Particulars of payment of s (a) State or Union territory in respect of which duty is paid or to be paid (b) *Whether stamp duty is to be paid electrons.	*Residential Prod	os of previous residence	No Not	applicable

Type of document/ Particulars	Form	0.000.700.000	andum of ociation	Articles of association	Oth	ers
Total amount of stamp		10	- 1	;		
duty paid (in Rs.)						
Mode of payment of stamp duty						
Name of vendor or Treasury or Authority orany other competent agency authorised to collect stamp duty or to sell stamp papers or to emboss the documents or to dispense stamp wouchers on behalf of the Government						
Serial number of embossing or stamps or stamp paper or treasury challan number			<i>*</i>		10	
Registration number of vendor		50.5				
Date of purchase of		- 1	-		-	
stamps or stamp paper or payment of stamp duty (DD/MMYYYYY)	2.5		1.00			
Place of purchase of stamps or stamp paper or payment of stamp duty		28			16	
stamps or stamp paper or payment of stamp duty 9. Additional Information Information specific to PA	AN				·	1)**
Area code	AO t	/pe	Range code	e AO	No.	
Information and Section 5	AN	818		3		
Information specific to TA		- STE	and a consequence of the consequence of	Easter or Towns	1	
Area code	AO t	ype	Range cod	e AC	O No.	
8 8						
Source of Income						

ı

Business/Profession code					
40.4-1	district Information for Freedom was intensitive and or Freedom Chate Inc	(FSIG)			
	ditional Information for Employer registration under Employee State Ins of Unit	sur ance Corporation (ESIC)			
	Type of Unit Factory Establishment				
	Traines and seemed and traines	,			
Λ tta	chments	L ist of attachme	ntc		
1.	*Memorandum of association;				
2.	*A rticles of A ssociation;	Attach			
3.	*A ffidavit and declaration by first subscriber(s)	Attach			
٠,	and director(s);	Attach			
4.	Proof of Office address (Conveyance/ Lease	Attack			
	deed/Rent Agreement etc. along with rent	Attach			
	receipts);				
5.	Copy of the utility bills (not older than two	Attach			
_	months);				
6.	Copy of approval in case the proposed name	Attach			
	contains any word(s) or expression(s) which				
7.	requires approval from central government; Approval of the owner of the trademark or the				
7.	applicant of such application for registration of	Attach			
	Trademark;	Attach			
8.	NOC from the sole proprietor/partners/other				
	associates/ existing company;	Attach			
9.	In principle approval from the concerned				
	regulator;	Attach			
10.	Copy of certificate of incorporation of the				
11	foreign body corporate and resolution passed;	Attach			
	Resolution passed by promoter company;	Attacii			
12.	NOC from existing Indian company or foreign company;	Attach			
13	Interest of first director(s) in other entities;				
	Consent of Nominee;	Attach			
	Proof of identity & residential address of	Attach			
	subscribers;	Attach			
16.	Proof of identity & residential address of				
17	nominee;	Attach			
	Proof of identity and address of Applicant I; Proof of identity and address of Applicant II;	Attach			
	Proof of identity and address of Applicant III;				
	NOC in case there is change in the promoters	Attach Attach			
_3.	(first subscribers to Memorandum of	R emove attachm	nent		
	A ssociation)	remove attachin			
21.	Optional attachment(s), (if any)				

Declaration

I have gone through the provisions of the Companies Act, 2013, the rules thereunder and prescribed guidelines framed thereunder in respect of reservation of name, understood the meaning thereof and the proposed name is in conformity thereof.

I have used the search facilities available on the portal of the Ministry of Corporate Affairs (MCA) for checking the resemblance of the proposed name with the companies and Limited Liability partnerships (LLPs) respectively already registered or the names already approved. I have also used the search facility for checking the resemblances of the proposed name with registered trademarks and trade mark subject of an application under the Trade Marks Act, 1999 and other relevant search for checking the resemblance of the proposed name to satisfy myself with the compliance of the provisions of the Act for resemblance of name and Rules thereof.

The proposed name is not in violation of the provisions of Emblems and Names (Prevention of Improper Use) Act, 1950 as amended from time to time.

The proposed name is not offensive to any section of people, e.g. proposed name does not contain profanity or words or phrases that are generally considered a slur against an ethnic group, religion, gender or heredity.

The proposed name is not such that its use by the company will constitute an offence under any law for the time being in force.

I undertake to be fully responsible for the consequences in case the name is subsequently found to be in contravention of the provisions of section 4(2) and section 4(4) of the Companies Act, 2013 and rules thereto and I have also gone through and understood the provisions of section 4(5) (ii) (a) and (b) of the Companies Act, 2013 and rules thereunder and fully declare myself responsible for the consequences thereof.

*]

, a person named in the articles as a director of the company has been duly authorized by the promoters of the company to sign this form and declare that all the requirements of the Companies Act, 2013 and the rules made thereunder in respect of Director Identification Number (DIN), registration of the company and matters precedent or incidental thereto have been complied with.

I am authorized by the promoter subscribing to the Memorandum of Association and Articles of Association and the first director(s) to give this declaration and to sign and submit this Form. *I am authorised by each subscriber to declare that company shall not commence its business, unless each subscriber has paid the value of the shares agreed to be taken by him at the time of subscribing to the Memorandum of Association;

I further declare that, company shall not commence its business, unless all the required approval from the sectoral Regulators such as RBI, SEBI etc. have been obtained;

I on behalf of the promoters and the first directors, hereby declare that the registered office is capable of receiving and acknowledging all communications and notices addressed to the proposed company on incorporation, shall be maintained at the given address at item 4 of this form; *I, on behalf of all the first director(s) named in the Articles of Association of the proposed company, solemnly declare, that the declaration given herein as stated above are true to the best of my knowledge and belief, the information given in this integrated application form for incorporation and attachments thereto are correct and complete, and nothing relevant to this form has been suppressed. All the required attachments have been completely, correctly and legibly

	ed to this form and are as per the original records maintained by the promoters subscribing			
	Memorandum of Association and Articles of Association.			
I, on behalf of the proposed Directors whose particulars for allotment of DIN are filled as above, hereby confirm and declare that they are not restrained, disqualified, removed for being				
	appointed as Director of a company under the provisions of the Companies Act, 2013 including			
sections 164 and 169, and have not been declared as proclaimed offender by any Economic				
Offence Court or Judicial Magistrate Court or High Court or any other Court, and not been				
already allotted a Director Identification Number (DIN) under section 154 of the Companies Act,				
2013, and I further declare that I have read and understood the provisions of Sections 154, 155,				
447 and 448 read with Sections 449, 450 and 451 of the Companies Act, 2013.				
*				
having	Membership number of practice number			
	n engaged to give declaration under section 7(1) (b) and such declaration is attached.			
rias bee	Trengaged to give decidiation under section 7(1) (b) and such decidiation is attached.			
NI-t At	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Note: Attention is drawn to the provisions of sections 7(5) and 7(6) which, inter-alia, provides that furnishing of any false or incorrect particulars of any information or suppression of any material information shall attract				
punishment for fraud under section 447. Attention is also drawn to provisions of section 448 and 449 which				
	for punishment for false statement and punishment for false evidence respectively.			
*T o be o	ligitally signed by director			
	DSC BOX			
*DIN / P	AN			
	Declaration and Certification by Professional			
1	,			
member				
having of	mice at *			
Who is 6	engaged in the formation of the company declare that I have been duly engaged for the			
	of certification of this form. It is hereby also certified that I have gone through the			
	ns of the Companies Act, 2013 and rules thereunder for the subject matter of this form and			
matters i	ncidental thereto and I have verified the above particulars (including attachment(s)) from			
	nal/certified records maintained by the applicant which is subject matter of this form and			
	em to be true, correct and complete and no information material to this form has been			
suppresse	ed. I further certify that;			
(i)	the draft memorandum and articles of association have been drawn up in conformity with			
	the provisions of sections 4 and 5 and rules made thereunder; and			
(ii)	all the requirements of Companies Act, 2013 and the rules made thereunder relating to			
	registration of the company under section 7 of the Act and matters precedent or incidental			
	thereto have been complied with. The said records have been properly prepared, signed			
	by the required officers of the Company and maintained as per the relevant provisions of			
	the Companies Act, 2013 and were found to be in order;			
(iii)	I have opened all the attachments to this form and have verified these to be as per			

(iv)	requirements, complete and legible; I further declare that I have personally visited the proposed registered office given in the form at the address mentioned herein above and verified that the said proposed registered office of the company is functioning for the business purposes of the company (wherever		
(v)	applicable in respect of the proposed registered office has been given). It is understood that I shall be liable for action under Section 448 of the Companies Act, 2013 for wrong certification, if any found at any stage.		
* Chartered accountant (in whole-time practice) or Cost accountant (in whole-time practice) or			
Company secretary (in whole-time practice) Advocate			
*Whether associate or fellow Associate Fellow *Membership number			
Certificate of practice number			
*Income-tax PAN			
Mo	Check Form Prescrutiny Submit		
For office use only: Affix eStamp and filing details			
eForm Service request number (SRN)			
This e-Form is hereby registered Digital signature of the authorising officer Confirm submission			
Date of signing (DD/MM/YYYY)			