SPICe + Part B

Simplified Proforma for Incorporating Company Electronically

[Purusant to sections 4, 7, 8(1) 12, 152 and 153 of the Companies Act, 2013 read with rules made there under] - Form No. INC-32



Form L	anguage
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	ion kit for filling the form ked in * are mandatory.				
Structure of t	the Company				
1(a) *Whether	AOA is entrenched?			○ Yes	No
(b) Number o	(b) Number of Articles to which provisions of enternchment				
Details of suc	ch articles				
Sr. No	Article Number	Short descr	ription on entrer	nchment of the clause	
1					
2 *Company is	5				
Having Sha	are Capital				
O Not having	ı share capital				
Total authoriz	Total authorized share capital (in INR) 100000				
Total classifie	Total classified authorized share capital (in INR)				
Total subscribed share capital (in INR)					
*Total unclass	*Total unclassified authorized share capital (in INR)				
3A(i)*Equity	share capital				
Number of classes 1					
Description of Equity share capital					
3A *Capital st	tructure of the company				
а	ass of shares	Authorized capital		Subscribed capital	
	Equity	Authorized capital		Subscribed Capital	
Number of eq	uity shares	100000		100000	
Nominal amou	unt per share (in INR)	1		1	

100000

3A(ii) *Preference share capital

Number of classes

Total amount (in INR)

0

100000

Class of shares	Authorized capital	Subscribed capital
umber of preference shares		
ominal amount per share (in INR)		
tal amount (in INR)		
*Details of number of members	,	
(a) Enter the maximum number of n	nembers	
(b) Maximum number of members of	excluding proposed employees	
(c) Number of members		
(d) number of members excluding p	proposed employee(s)	
4 Address of the Company		
4A *Correspondance Address		
Line 1		
ine 2		
Pin code		
Contact Details : Mobile No.		
Contact Details: Phone No. (with STE) code)	
State/UT		
District		
City		
Area/Locality		
- ax		
email ID of the company		

4B *Whether the address for correspondence is the address of registered office of the company	Yes	○ No
(In case Yes is selected, please provide Longitude and Latitude details) Longitude		
Latitude		
Attachments:		
1. Proof of Office address along with NOC, if applicable (Conveyance/ Lease deed /Rent Agreement along with rent receipts);		
2. Copy of the utility bills (not older than two months);		
4C*Name of the office of the Registrar of Companies in which the proposed company is to be registered		

	Having valid DIN	Not having valid DIN
(a) Total number of first subscribers (non-individual + individual)	0	2
(b) Number of non -individual first subscriber(s)		0
(c) Number of individual first subscriber(s) cum director(s)	0	2
(d) Total number of directors (director(s) who Is/are not subscriber(s) + subscriber(s) cumdirector(s) as mentioned in above Row no. 3)	0	2

6 Particulars of Non-Individual Subscribers / Individual Subscribe	ers other than Subscriber(s) cum Directors
6A *Particulars of non-individual first 6A(i) Particulars of entity	
*Category	
Company/Foreign company/ Company incorporated outside India Body Corporate/Others)	
*Corporate identity number (CIN) or foreign company registration number (FRCN) or any othr registration number	
*Name of the body corporate	
Registered office address or Principal place of business in India or Principal place of business outside India	
*Line 1	
Line 2	
*Country	
*Pin code	
Area/Locality	
*City	
District	
*State/UT	
*Phone (with STD/ISD code)	
Fax	
*email ID of the company	
6A(ii) Particular of the person authorized by the	
Director Identification number (DIN)	
*First Name	
Middle Name	
*Surname	
*Father's First Name	
Father's Middle Name	
*Father's Surname	
*Gender	
(Male/Female/Transgender)	

*Date of Birth (DD/MM/YYYY)	
*Nationality	
Income tax-PAN	
*Place of Birth (District & State)	
*Occupation type	
(Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others)	
*Area of Occupation	
*If 'Others' selected, please specify	
*Educational Qualification	
Primary education/Secondary education/Vocational qualification Bachelor's degree/Master's degree/Doctorate or higher/Professional Diploma/Others)	
If 'Others' selected, please specify	
Present Address	
*Line 1	
Line 2	
*Country	
*Pin code	
*Area/Locality	
*City	
District	
*State/UT	
*Phone (with STD/ISD code)	
Fax	
email ID of the company	
*Identity Proof	
*Identity Proof No.	
*Residential Proof	

(Voter Identity Card/Passport/Driving License/Aac	dhaar)	
*Residential Proof No.		
Submit the proof of identity and pro	of of	
address		
(a) *Proof of identity		
(b) *Residential Proof		
Description of Share capital		
Total subscribed share capital (in INR)		
Description of equity share capital		
*Number of classes		
Class of shares		Subscribed capital
Number of equity shares		
Nominal amount per share (in INR)		
Total amount (in INR)		
Total amount (in intro		
Description of preference share capi	tal	
*Number of classes		
Class of shares		
Glass of Gridines		Subscribed capital
Number of preference shares		
inumber of preference shares		
Nominal amount per share (in INR)		
Nominal amount per share (in INR)		
Nominal amount per share (in INR)		
Nominal amount per share (in INR)		
Nominal amount per share (in INR)		
Nominal amount per share (in INR)		
Nominal amount per share (in INR)		
Nominal amount per share (in INR)		
Nominal amount per share (in INR)		
Nominal amount per share (in INR)		
Nominal amount per share (in INR)		
Nominal amount per share (in INR)		

6B Particulars of individual first sub	oscriber(s) other than subscriber cum director (having valid DIN)
*Director Idetification Number (DIN)	
*Name	
Description of Share capital	
Total subscribed share capital (in INR)	
Description of equity share capital	
*Number of classes	
Class of shares	Subscribed capital
Number of equity shares	
Nominal amount per share (in INR)	
Total amount (in INR)	
Description of preference share cap	ital
*Number of classes	
Class of shares	Subscribed capital
Number of preference shares	
Nominal amount per share (in INR)	
Total amount (in INR)	

6C*Particulars of individual first subscriber(s) other than subscrib	ber cum director (Not having valid
*First Name	
Middle Name	
*Surname	
*Father's First Name	
Father's Middle Name	
*Father's Surname	
*Gender (Male/Female/Transgender)	
*Date of Birth (DD/MM/YYYY)	
*Nationality	
*Place of Birth (District & State)	
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others)	
Area of Occupation	
If 'Others' selected, please specify	
*Educational Qualification	
Primary education/Secondary education/Vocational qualification Bachelor's degree/Master's degree/Doctorate or higher/Professional Diploma/Others)	
If 'Others' selected, please specify	
PAN	
*email ID	
emanio	

Permanent	
*Line 1	
Line 2	
*Country	
*Pin code	
*Area/Locality	
*City	
District	
State/UT	
*Phone (with STD/ISD code)	
*Whether present residential address same as permanent residential address	○ Yes ○ No
*Present	
*Line 1	
Line 2	
*Country	
*Pin code	
Area/Locality	
*City	
District	
*State/UT	
*Phone (with STD/ISD code)	
Duration of stay at present address (Years/Month)	
(Years -> 0 to 99 Month -> 0 to 11)	
*If Duration of stay at present address is less than a one year then address of $\ensuremath{\rho}$ residence	previous
*Identity Proof	
(Voter Identity Card/Passport/Driving License/Aadhaar)	
*Residential Proof	
(Voter Identity Card/Passport/Driving License/Aadhaar)	
*Identity Proof No.	

*Residential Proof No.	
*Submit the proof of identity and proof	of of
address (a) *Proof of identity	
(b) *Residential Proof	
Description of Share capital	
Total subscribed share capital (in INR)	
Description of equity share capital	
*Number of classes	
Class of shares	
	Subscribed capital
Number of equity shares	
Nominal amount per share (in INR)	
Total amount (in INR)	
Total amount (in invit)	
Description of preference share capital	ıl .
*Number of classes	
Class of shares	Subscribed capital
	Subscribed Capital
Number of preference shares	
Number of preference shares Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	

7 Particulars of Subscriber(s) cum Director	s/Director of the Comp	any
7A Particulars of Subscriber(s) cum Directo	ors (having valid DIN)	
7A(i) Basic detail of Subscriber(s) cum Dire	ectors	
Director Idetification Number (DIN)		
*Name		
*Designation		
(Director/Managing Director/Whole time director/Nominee d	ctor)	,
*Category		
(Promoter/Professional/Independent/Nominee)		
Whether		
Chairman		
Executive DirectorNon-executive Director		
Non-executive Director		
*Name of the company or institution whose nom	inee the apointee is	
*email ID		
D : (: (0) : (1)		
Description of Share capital		
Total subscribed share capital (in INR)		
Description of equity share capital		
*Number of classes		
Class of shares		Subscribed capital
Number of equity shares		
Nominal amount per share (in INR)		
Total amount (in INR)		
Description of preference share capital		
*Number of classes		

Class	ss of shares		Subscribed capital	
Number of prefer	ence shares			
Nominal amount	per share (in INR)			
Total amount (in	INR)			
7A(ii) Declarati	on of entities in whic	h Subscribers cum directors h	nave interest	
Number of entitie	es in which director has i	nterest		
*CIN/LLPIN/FCRN	I/Registration Number			
*Name				
*Address				
*Nature Of interest	*Designation		Other(specify)	
	Percentage of Shareh	olding 0	Amount (in INR)	

7B Particulars of Subscriber(s) cum Directors (Not having valid		
7B(i) Basic detail of Subscriber(s) cum Directors		
*First Name		
Middle Name		
*Surname		
*Father's First Name		
Father's Middle Name		
*Father's Surname		
*Gender		
*Date of Birth (DD/MM/YYYY)		
*Nationality		
*Place of Birth (District & State)		
Whether citizen of India	Yes	○ No
Whether resident in India	Yes	○ No
Whether resident in India *Occupation type	Yes	○ No
	• Yes	○ No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife	• Yes	○ No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others)		○ No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others) *Area of Occupation	• Yes	○ No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others) *Area of Occupation If 'Others' selected, please specify	• Yes	○ No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others) *Area of Occupation If 'Others' selected, please specify *Educational Qualification	• Yes	○ No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others) *Area of Occupation If 'Others' selected, please specify *Educational Qualification If 'Others' selected, please specify Primary education/Secondary education/Vocational qualification Bachelor's degree/ Master's degree/ Doctorate or higher/Professional	• Yes	○ No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others) *Area of Occupation If 'Others' selected, please specify *Educational Qualification If 'Others' selected, please specify Primary education/Secondary education/Vocational qualification Bachelor's degree/Master's degree/Doctorate or higher/Professional Diploma/Others)	• Yes	○ No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others) *Area of Occupation If 'Others' selected, please specify *Educational Qualification If 'Others' selected, please specify Primary education/Secondary education/Vocational qualification Bachelor's degree/Master's degree/Doctorate or higher/Professional Diploma/Others) PAN	• Yes	○ No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others) *Area of Occupation If 'Others' selected, please specify *Educational Qualification If 'Others' selected, please specify Primary education/Secondary education/Vocational qualification Bachelor's degree/Master's degree/Doctorate or higher/Professional Diploma/Others) PAN *Designation	• Yes	○ No

(Promoter/Professional/Independent/Nominee)	
Whether ☐ Chairman ☑ Executive Director ☐ Non-executive Director	
*Name of the company or institution whose nominee the apointee is	
*Mobile No	
*email ID Permanent	
*Line 1	
Line 2	
*Country	
*Pin code	
*Area/Locality	
*City	
District	
*State/UT	
Phone (with STD/ISD code)	
*Whether present residential address same as permanent residential address *Present	• Yes No
*Line 1	
Line 2	
*Country	
*Pin code	
*Area/Locality	
*City	
District	
State/UT	
Phone (with STD/ISD code)	

Duration of stay at present address (Years/	Month)	
(Years -> 0 to 99 Month -> 0 to 11)		
*If Duration of stay at present addressis les residence	s than a one year then address of p	previous
*Identity Proof		
(Voter Identity Card/Passport/Driving License/Aad	lhaar)	
*Residential Proof		
(Voter Identity Card/Passport/Driving License/Aad	lhaar)	Į.
*Identity Proof No.		
Residential Proof No.		
*Submit the proof of identity and pro address (a) *Proof of identity	oof of	
(b) *Residential Proof		
Description of Share capital		
Total subscribed share capital (in INR)		50000
Description of equity share capital		
*Number of classes		1
Class of shares		Subscribed capital
Equity		·
Number of equity shares		50000
Nominal amount per share (in INR)		1
Total amount (in INR)		50000
Description of preference share capit	tal	
*Number of classes		
Class of shares		Subscribed capital
Number of preference shares		
Nominal amount per share (in INR)		
Total amount (in INR)		

	ntities in which director has interest	0
*CIN/LLPIN/FC	RN/Registration Number	
*Name		
*Address		
*Nature Of interest	*Designation	Other(specify)
	Percentage of Shareholding	Amount (in INR)
7B Particulaı	rs of Subscriber(s) cum Directors (Not having valid	
	rs of Subscriber(s) cum Directors (Not having valid etail of Subscriber(s) cum Directors	
7B(i) Basic de		
7B(i) Basic do *First Name		
7B(i) Basic do *First Name Middle Name		
	etail of Subscriber(s) cum Directors	
7B(i) Basic do *First Name Middle Name *Surname	etail of Subscriber(s) cum Directors	
7B(i) Basic do *First Name Middle Name *Surname *Father's First	etail of Subscriber(s) cum Directors Name e Name	
7B(i) Basic do *First Name Middle Name *Surname *Father's First Father's Middl	etail of Subscriber(s) cum Directors Name e Name	
7B(i) Basic do *First Name Middle Name *Surname *Father's First Father's Middl *Father's Surname	etail of Subscriber(s) cum Directors Name e Name	
7B(i) Basic do *First Name Middle Name *Surname *Father's First Father's Middl *Father's Surname *Gender *Date of Birth	etail of Subscriber(s) cum Directors Name e Name ame	
7B(i) Basic do *First Name Middle Name *Surname *Father's First Father's Middl *Father's Surna *Gender *Date of Birth *Nationality	etail of Subscriber(s) cum Directors Name e Name ame	

Whether resident in India	Yes	○ No
*Occupation type		
(Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others)		
*Area of Occupation		
If 'Others' selected, please specify		
*Educational Qualification		
If 'Others' selected, please specify		
Primary education/Secondary education/Vocational qualification Bachelor's degree/Master's degree/Doctorate or higher/Professional Diploma/Others)		
PAN		
*Designation		
(Director/Managing Director/Whole time director/Nominee director)		
*Category (Promoter/Professional/Independent/Nominee)		
Whether		
Chairman		
✓ Executive Director		
Non-executive Director		
*Name of the company or institution whose nominee the apointee is		
*Mobile No		
*email ID		

Permanent	
*Line 1	
Line 2	
*Country	
*Pin code	
*Area/Locality	
*City	
District	
*State/UT	
Phone (with STD/ISD code)	
*Whether present residential address same as permanent residential address *Present	● Yes
*Line 1	
Line 2	
*Country	
*Pin code	
*Area/Locality	
*City	
District	
State/UT	
State/ 01	
Phone (with STD/ISD code)	
Duration of stay at present address (Years/Month)	
(Years -> 0 to 99 Month -> 0 to 11)	
*If Duration of stay at present address is less than a one year then address of $\ensuremath{\text{p}}$ residence	previous
*Identity Proof	
(Voter Identity Card/Passport/Driving License/Aadhaar)	
*Residential Proof	

(Voter Identity Card/Passport/Driving License/Aad	dhaar)	
*Identity Proof No.		
Residential Proof No.		
*Submit the proof of identity and pr address	oof of	
(a) *Proof of identity		
(b) *Residential Proof		
Description of Share capital		
Total subscribed share capital (in INR)		50000
Description of equity share capital		
*Number of classes		1
Class of shares		Published conital
Equity		Subscribed capital
Number of equity shares		50000
Nominal amount per share (in INR)		1
Total amount (in INR)		50000
Description of preference share capi	tal	
*Number of classes		
Class of shares	\$	Subscribed capital
Number of preference shares		
Nominal amount per share (in INR)		
Total amount (in INR)		
7B(ii) Declaration of entities in which	n Subscribers cum directors ha	ave interest
*Number of entities in which director has i	interest	0
*CIN/LLPIN/FCRN/Registration Number		
*Name		
*Address		,
Mailess		

Nature Of terest	*Designation Percentage of Shareholding	Other(specify) Amount (in INR)	
	r creentage of shareholding	/ induit (in livi)	

7CParticulars	of Directors (having valid DIN)	
7C(i) Basic Det	ails of Directors	
*Director Idetific	cation Number (DIN)	
*Name		
*Designation (Director/Managing D	Director/Whole time director/Nominee director)	
*Category (Promoter/Profession	al/Independent/Nominee)	
Whether Chairman Executive Din Non-executive		
Name of the cor	npany or institution whose nominee the apointee is	
	ion of entities in which Subscribers cum directors have ies in which director has interest	einterest
*CIN/LLPIN/FCRI	N/Registration Number	
*Address		
*Nature Of interest	*Designation Percentage of Shareholding 0	Other(specify) Amount (in INR)

7D Particulas of Directors (Not having DIN)			
7D(i) Basic detail of Directors			
*First Name			
Middle Name			
*Surname			
*Father's First Name			
Father's Middle Name			
*Father's Surname			
*Gender			
*Date of Birth (DD/MM/YYYY)			
*Nationality			
*Dl			
*Place of Birth (District & State)			
Whether citizen of India	0)	Yes (No
Whether resident in India	O)	Yes (No
Whether resident in India *Occupation type	0)	Yes (○No
	0)	Yes (○No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife	0	Yes (○ No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others)	CY	Yes (O No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others) *Area of Occupation		Yes (O No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others) *Area of Occupation If 'Others' selected, please specify		Yes (O No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others) *Area of Occupation If 'Others' selected, please specify *Educational Qualification		Yes (No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others) *Area of Occupation If 'Others' selected, please specify *Educational Qualification If 'Others' selected, please specify Primary education/Secondary education/Vocational qualification Bachelor's degree/Master's degree/Doctorate or higher/Professional		Yes (No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others) *Area of Occupation If 'Others' selected, please specify *Educational Qualification If 'Others' selected, please specify Primary education/Secondary education/Vocational qualification Bachelor's degree/Master's degree/Doctorate or higher/Professional Diploma/Others)		Yes (No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others) *Area of Occupation If 'Others' selected, please specify *Educational Qualification If 'Others' selected, please specify Primary education/Secondary education/Vocational qualification Bachelor's degree/Master's degree/Doctorate or higher/Professional Diploma/Others) Income tax-PAN		Yes (No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others) *Area of Occupation If 'Others' selected, please specify *Educational Qualification If 'Others' selected, please specify Primary education/Secondary education/Vocational qualification Bachelor's degree/Master's degree/Doctorate or higher/Professional Diploma/Others) Income tax-PAN *Designation		Yes (No

Whether ☐ Chairman ☐ Executive Director ☐ Non-executive Director	
*Name of the company or institution whose nominee the apointee is	
*Mobile No	
*email ID Permanent	
*Line 1	
Line 2	
*Country	
*Pin code	
Area/Locality	
*City	
District	
*State/UT	
Phone (with STD/ISD code)	
*Whether present residential address same as permanent residential address *Present	○ Yes ○ No
*Line 1	
Line 2	
*Country	
*Pin code	
*Area/Locality	
*City	
District	
*State/UT	
Phone (with STD/ISD code) Duration of stay at present address (Years/Month)	

(Years -> 0 to 9 ^o Month -> 0 to 1		
If Duration of s address of prev	tay at present addressis less than a one year then rious residence	
*Identity Proof		
(Voter Identity Ca	rd/Passport/Driving License/Aadhaar)	
*Residential Pr	roof	
(Voter Identity Ca	rd/Passport/Driving License/Aadhaar)	
*Identity Proof	f No.	
Residential Pro	pof No.	
*Submit the paddress	proof of identity and proof of	
(a) *Proof of ide	entity	
(b) *Residentia	l Proof	
7D(ii) Declara	ation of entities in which directors have interest	
Number of ent	ities in which director has interest	
*CIN/LLPIN/FC	RN/Registration Number	
*Name		
*Address		
	*Designation	Other(specify)
*Nature Of interest	*Designation	Other(specify)
	Percentage of Shareholding 0	Amount (in INR)

OPC Nomination A *Nomination			
*	the subscribertothe memorandum of	association of	
lo hereby nominate *		*	
who shall become the member of the co eligible	mpany in the event of my death or incap	pacity to contract. I decl	are that the nominee is
	ıle 3 of the Companies (Incorporation) R	ules, 2014.	
B*Particulars of the Nominee			
Director Identification number (DIN)			
First Name			
Middle Name			
Surname			
Father's First Name			
Father's Middle Name			
Father's Surname			
Gender			
Date of Birth (DD/MM/YYYY)			
Nationality			
Income tax-PAN			
Place of Birth (District & State)			
Occupation type			
usiness/Professional/Government/Employment/Privudent/Others	vate Employment /Housewife		
Area of Occupation			

If 'Others' selected, please specify	
*Educational Qualification	
(Primary education/Secondary education/Vocational qualification Bachelor's degree/master's degree/Doctorate or higher/Professional Diploma/Others)	
If 'Others' selected, please specify	
*Mobile No	
*Email Id	
Permanent address	
*Line 1	
Line 2	
*Country	
*Area/ Locality	
*Pin code / Zip Code	
*State/UT	
*City	
District	
Phone (with STD/ISD code)	
Fax	
Whether present residential address same as permanent residential address	○ Yes ○ No
*Present Address	

*Line 1	
Line 2	
*Area/Locality	
*Pin code	
*Country	
*City	
State / UT	
District	
Phone(with STD/ISD code)	
Fax	
Duration of stay at present address (Years/Month)	
(Year -> 0 to 99) (Month -> 0 to 11)	
*If Duration of stay at present address is less than one year then address of previous residence	
*Identity Proof	
(Voters Identity Card/ Passport/Driving License/Aadhaar)	
*Residential Proof	
(Voters Identity Card/ Passport/Driving License/Aadhaar)	

*Residential Proof No. *Residential Proof of identity and proof of address (a) *Proof of identity (b) *Residential proof MAX 2MB Dedaration by Nominee I do solemnly declare that I am an Indian citizen and resident in India and I have not been convicted of any offence in connection with the promotion, formation or management of any company or LLP and have not been found guilty of any fraud or misfeasance or of any breach of duty to any company under this Act or any previous company law or LLP Act in the last five years. I further declare that I am not a nominee in any other One Person Company and I shall comply with the eligibility criteria specified in Rule 3(3) within the prescribed period. I understand that the person nominating me may withdraw my nomination without my consent. To be digitally signed by Nominee 9 Particulars of payment of stamp duty 9A State or union territory in respect of which stamp duty is paid or to be paid 9B *Whether stamp duty is to be paid electronically through MCA 21 system (a) Yes No Not applicable 9B(I) Details of stamp duty to be paid Type of document/ Particulars Form Memorandum of association Anount of stampduty to be paid (in Rs.)				
*Submit the proof of identity	*Identity Proof No.			
(a) *Proof of identity (b) *Residential proof MAX 2MB Declaration by Nominee I do solemnly declare that I am an Indian citizen and resident in India and I have not been convicted of any offence in connection with the promotion, formation or management of any company or LLP and have not been found guilty of any fraud or misfeasance or of any breach of duty to any company under this Act or any previous company law or LLP Act in the last five years. I further declare that I am not a nominee in any other One Person Company and I shall comply with the eligibility criteria specified in Rule 3(3) within the prescribed period. I understand that the person nominating me may withdraw my nomination without my consent. To be digitally signed by Nominee 9 Particulars of payment of stamp duty 9A State or union territory in respect of which stamp duty is paid or to be paid 9B "Whether stamp duty is to be paid electronically through MCA 21 system © Yes	*Residential Proof No.			
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Type of document/ Particulars Form Memorandum of association Amount of stampduty to be paid (in		○ Not applicable		
Amount of stamp duty to be paid (in	9B(i) Details of stamp duty to be paid			
	Type of document/ Particulars	Form		Articles of association
		20	1000	100

Type of document/ Particulars	Form	Memorandum of association	Articles of association	Others
Fotal amount of stamp duty paid (in Rs.)				
Mode of payment of stamp duty				
Name of vendor or reasury or Authority or any other competent agency authorized to collect stamp duty or to ell stamp papers or to emboss the document or o dispense stamp rouchers on behalf of the government				
Serial number of embossingor stampsor stamppaper or treasury challannumber				
Registration number of rendor				
Date of purchase of stamps or stamp paper or payment of stamp duty DD/MM/YYYY)				
Place of purchase of tamps or stamp paper or payment of stamp duty				
*Additional Information AN) formation specific to PAN Area Code	for applying Permane AO ty		(PAN) and Tax Deduc	AO No.
Information specific to	TAN			
Area Code	AOty	/pe R	ange Code	AO No.
urce of Income				
urce of Income Income from Business/pro	ofession	Capital	Gains 🔲 Incon	ne from house property

*Business/Profession code	
Attachments	
(a) Memorandum of association	MAX 2MB
(b) Articles of association	MAX 2MB
(c) Declaration by first subscriber(s) and director(s);(Affidavit is not required to be attached);	MAX 2MB
(d) Copy of certificate of incorporation of the foreign body corporate and resolution passed by foreign company or authority given through constitutional document;	MAX 2MB
(e) Resolution passed by promoter company;	MAX 2MB
(f) Interest of first director(s) in other entities	MAX 2MB
(g) Optional attachment(s) (if any)	
Declaration	
✓ I have gone through the provisions of the Companies Act, 2013, the rule thereunder in respect of reservation of name, understood the meaning the	
I have used the search facilities available on the portal of the Ministry of resemblance of the proposed name with the companies and Limited Liabili or the names already approved. I have also used the search facility for check registered trademarks and trade mark subject of an application under the T checking the resemblance of the proposed name to satisfy myself with the resemblance of name and Rules thereof.	ty partnerships (LLPs) respectively already registered king the resemblances of the proposed name with trade Marks Act, 1999 and other relevant search for
$\slash\hspace{-0.4cm}\overline{\hspace{-0.4cm}\mathcal{J}}$ The proposed name is not in violation of the provisions of Emblems and amended from time to time.	Names (Prevention of Improper Use) Act, 1950 as
The proposed name is not offensive to any section of people, e.g. propophrases that are generally considered a slur against an ethnic group, religio	
$\overline{m{arphi}}$ The proposed name is not such that its use by the company will constit	ute an offence under any law for the time being in
force. I undertake to be fully responsible for the consequences in case the nar provisions of section 4(2) and section 4(4) of the Companies Act, 2013 and r understood the provisions of section 4(5) (ii) (a) and (b) of the Companies A responsible for the consequences thereof.	ules thereto and I have also gone through and
*	, a person
named in the articles as a director of the company has been duly authorized declare that all the requirements of the Companies Act, 2013 and the rules Number (DIN), registration of the company and matters precedent or incide	made thereunder in respect of Director Identification
$\slash\hspace{-0.4cm}\overline{\hspace{-0.4cm}\mathcal{I}}$ I am authorized by the promoter subscribing to the Memorandum of A director(s) to give this declaration and to sign and submit this Form.	ssociation and Articles of Association and the first
I further declare that, company shall not commence its business, unles such as RBI, SEBI etc. have been obtained.	s all the required approval from the sectoral Regulators
I further declare that the company shall not commence the business of I declaration be issued under section 406 of the Act have been obtained from	

✓ 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 (a)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 attached to this form and are as per the original records maintained by the promoters subscribing to the 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.
I, on behalf of the proposed directors, hereby declare that person seeking appointment is a national of a country which shares a land border with India, necessary security clearance from Ministry of Home Affairs, Government of India shall be attached with the consent.
☐ The MoA and AoA attached to the form in hard copy is exactly similar to e-MoA and e-AOA to be attached with the form.
☐ I hereby declare as per Rule 5(iv) of Companies (Authorised to Register) Rules that the said LLP applying for conversion in this Part of the Act has filed all documents which are required to be filed under the LLP Act, 2008 with the Registrar LLP.
having Membership number
and/or certificate of practice number
has been engaged to give declaration under section 7(1) (b) and such declaration is provided below. *To be digitally signed by director
*DIN/PAN
11 Declaration and Certification by Professional
I member of
having office at*
Who is engaged in the formation of the company
declare that I have been duly engaged for the purpose of certification of this form. It is hereby also certified that I have gone through the provisions of the Companies Act, 2013 and rules thereunder for the subject matter of this form and matters incidental thereto and I have verified the above particulars (including attachment(s)) from the original/certified records maintained by the applicant which is subject matter of this form and found them to be true, correct and complete and no information material to this form has been suppressed. 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.
iii 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;

iv I have opened all the attachments to this form and have verified these t	o be as per requirements, complete and legible;
 V I further declare that I have personally visited the premises of the propose mentioned herein above and verified that the said proposed registered purposes of the company (wherever applicable in respect of the propose it is understood that I shall be liable for action under Section 448 of the found at any stage. Viii The draft memorandum and articles of association have been drawn up made thereunder; and Viiii All the requirements of Companies Act, 2013 and the rules made there section 8 of the Act and matters precedent or incidental thereto have been decided. 	office of the company will be functioning for the businessed registered office has been given). Companies Act, 2013 for wrong certification, if any in conformity with the provisions of section 8 and rules under relating to registration of the company under
To be digitally signed by	
Chartered accountant (in whole-time practice) or	
Company secretary (in whole-time practice)	
Cost accountant (in whole-time practice) or	
○ Advocate	
Whether associate or fellow:	
○ Associate○ Fellow	
Membership number	
Certificate of practice number	
Income-tax PAN	
For office use only:	
eForm Service request number (SRN)	
eForm filing date (DD/MM/YYYY)	
Digital signature of the authorizing officer	
This eForm is hereby registered	
Date of signing (DD/MM/YYYY)	

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 provide for punishment for false statement and punishment for false evidence respectively