

FORM 'DIR-10'**FORM OF APPLICATION FOR REMOVAL OF DISQUALIFICATION OF DIRECTORS**

[Pursuant to Section 164(2) read with rule 14(5) of Companies (Appointment and Qualification of Directors) Rules, 2014]

Registration No. of Company _____

Nominal Capital Rs. _____

Paid-up Capital Rs. _____

Name of Company _____

Address of its Registered Office _____

Grounds under which director(s) are disqualified _____

Date of disqualification _____

Details of the application _____

Signature

Designation*

Dated this _____ day of _____

*State whether Director, Managing Director, Manager or Secretary