

**FORM NO. CHG.6**

[Pursuant to section 84(1) and pursuant to Section 384 of the Companies Act, 2013 and Rule 9 of the Companies(Registration of charges) Rules 2014]



## Notice of appointment or cessation of receiver or manager

Form Language o English o Hindi

Refer the instruction kit for filing the form.

1(a). \*Corporate identity number (CIN) or foreign company registration number of the company

Pre-Fill

(b). Global location number (GLN) of company

2(a). Name of the company

(b) Address of the registered office or of the principal place of business in India of the company

3. (a) \*This notice is being filed by O Person appointing receiver or manager O Person appointed as receiver or manager

(b) \*Type of Notice O Appointment O Cessation

### 4. Particulars of receiver or manager

(a). \*Income-tax permanent account number (PAN)

(b). \*Name

(c). \*Address Line I

Line II

(d). \*City

(e). \*State

(f). \*Country

(g). \*Pin code

5. \*Date of appointment

(DD/MM/YYYY)

6. \*Date of Cessation

(DD/MM/YYYY)

7. \* Whether the appointment or cessation is O Pursuance to an order of court O Pursuance to any instrument

8. (a) Number of charges

(b) Pursuance to an order of court

Court reference	Date of Court order (DD/MM/YYYY)	Charge ID	Appointment relating to whole of the property of the company	Appointment relating to income arising from whole of the property of the company
			O Yes O No	O Yes O No

## (c) Pursuance to any instrument

Description of instrument	Date of instrument (DD/MM/YYYY)	Charge ID	Appointment relating to whole of the property of the company	Appointment relating to income arising from whole of the property of the company
			O Yes    O No	O Yes    O No

**Attachments**

1. \*Copy of instrument appointing receiver/ manager;
2. \*Copy of court order;
3. List of specified property of the company in case the appointment relates to specified property of the company;
4. List of specified property of the company in case the appointment relates to income arising from specified property of the company;
5. Optional attachment(s), if any

Attachment

Attachment

Attachment

Attachment

Attachment

**Declaration**

I declare that whatever stated above is true correct and complete and nothing material has been suppressed including the attachments to this form. I am duly authorised to sign this form.

**To be digitally signed by****DSC Box**

Person appointing receiver or manager

**PAN****To be digitally signed by****DSC Box**

Receiver or manager

**PAN**

**Note: Attention is also drawn to provisions of Section 447, section 448 and 449 of the Companies Act, 2013 which provide for punishment for fraud, punishment for false statement and punishment for false evidence respectively**

Modify

Check Form

Prescrutiny

Submit

For office use only:

Affix filing details

eForm Service request number (SRN)

eForm filing date

(DD/MM/YYYY)

This e-Form is hereby registered

**Digital signature of the authorising officer**

Confirm submission

Date of signing

(DD/MM/YYYY)