

FORM NO. NDH-2

[Pursuant to sub-rule (3) of rule 5 of
Nidhi Rules, 2014]

**Application for
extension of time**

Form language ☐ English ☐ Hindi

Refer the instruction kit for filing the form

1. (a) * Corporate Identification Number (CIN) of Nidhi

Pre-Fill

(b) Global location number (GLN) of Nidhi

2. (a) Name of the Nidhi

(b) Address of the registered office

(c) E-mail id

(d) Phone

(e) Date of incorporation

3. *Financial year end date

4. *Application filed for : extension of time for complying with rule ☐ 5 (1)(a) ☐ 5 (1)(d) ☐ Both 5 (1)(a) & 5 (1)(d)

5. Position as at the end of the previous financial year (based on audited financial statement)

(a) *Number of members

(b) *Ratio of Net Owned Funds to Deposits

6. *Reasons for not complying with the requirements of Rule 5(1)(a) and/or Rule 5(1)(d)

7. * Details of application (in brief)

Attachments

1. *Board resolution
2. *Detailed application
3. Audited financial statements(last available)
4. *List of all members with PAN and complete residential address
5. *Amount of deposit accepted from each member
6. *Reasons and justification for the application

Attach

Attach

Attach

Attach

Attach

List of attachments

Remove Attachment

Declaration

I am authorized by the Board of Directors of the Company vide resolution number *
Dated * to sign this form and declare that all the requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of this form and matters incidental thereto have been complied with. I also declare that all the information given herein above is true, correct and complete including the attachments to this form and nothing material has been suppressed.

DSC BOX

*To be digitally signed by

*Designation

*DIN of the director; or DIN or PAN of the manager

or CEO or CFO; or Membership number of the company secretary

Certificate by practicing professional

I declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through the provisions of the Companies Act, 2013 (18 of 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 records maintained by the Company (name of Nidhi) 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;

- 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;
- All the required attachments have been completely and legibly attached to this form;
- 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.

*To be digitally signed by

DSC BOX

☐ Chartered accountant (in whole-time practice) or

☐ Cost accountant (in whole-time practice) or

☐ Company secretary (in whole-time practice)

*Whether associate or fellow ☐ Associate ☐ Fellow

*Membership number

Certificate of Practice number

Note: Attention is also drawn to provisions of section 448 which provide for punishment for false statement and certification.

Modify

Check Form

Prescrutiny

Submit

For office use only :

eForm Service request number (SRN)

eForm filing date

Affix filing details

(DD/MM/YYYY)

Digital signature of the authorising officer

This e-Form is hereby approved

This e-Form is hereby rejected

Confirm Submission

Date of signing

(DD/MM/YYYY)