

**SCHEDULE****FORM A****Application for Certificate of Registration**

(Under Regulation 4 of the Insolvency and Bankruptcy Board of India (Insolvency Professional Agencies) Regulations, 2016)

To

*The Chairperson*

*The Insolvency and Bankruptcy Board of India*

*[Insert address]*

From

*[Name and address]*

Subject: Application for grant or renewal of certificate of registration as insolvency professional agency

Madam/Sir,

1. I, being duly authorized for the purpose, hereby apply on behalf of *[name and address of the applicant]* for
  - (a) grant of certificate of registration as insolvency professional agency, or
  - (b) renewal of certificate of registration as insolvency professional agency,
 and enclose a copy of the board resolution authorizing me to make this application and correspond with the Board in this respect.
2. Copies of the memorandum of association, articles of association and the bye-laws, as applicable, of the applicant are enclosed.
3. I, on behalf of *[insert name]*, affirm that the applicant is eligible to be registered as an insolvency professional agency.
4. I, on behalf of *[insert name]*, hereby affirm that –
  - (a) all information contained in this application is true and correct in all material respects,
  - (b) no material information relevant for the purpose of this application has been suppressed, and
  - (c) registration granted or renewed in pursuance of this application may be cancelled summarily if any information submitted is found to be false or misleading in material respects at any stage.
5. If granted registration, I, on behalf of *[insert name]*, undertake to comply with the requirements of the Code, the rules, regulations or guidelines issued thereunder, and such other conditions and terms as may be contained in the certificate of registration or be specified or imposed by the Board subsequently.

Yours faithfully,

Sd/-

Authorized Signatory

(Name)

(Designation)

Date :

Place :

**ANNEXURE TO FORM A****PART I****GENERAL**

1. Name of the applicant.
2. Address of registered office and principal place of business of the applicant.
3. Corporate Identification Number (CIN).
4. PAN.

5. Name, designation and contact details of the person authorized to make this application and correspond with the Board in this respect.

### PART II

#### MEMORANDUM OF ASSOCIATION, ARTICLES OF ASSOCIATION AND BYE-LAWS

6. Please state if the memorandum of association, articles of association and bye-laws provide for all matters as required in, and are consistent with the Insolvency and Bankruptcy Board of India (Model Bye-Laws and Governing Board of Insolvency Professional Agencies) Regulations, 2016, and the Insolvency and Bankruptcy Board of India (Insolvency Professional Agencies) Regulations, 2016.

(Yes/ No)

7. Please specify the clause number of the provisions of the bye-laws which are in addition to the provisions of the model bye-laws specified in the Insolvency and Bankruptcy Board of India (Model Bye-Laws and Governing Board of Insolvency Professional Agencies) Regulations, 2016 (if any).

### PART III

#### SHAREHOLDING AND FINANCIAL STRENGTH

8. Please provide details of the persons holding more than 10%, directly or indirectly, of the share capital of the applicant.

Sl. No.	Name and address of the shareholder	PAN / Passport No and country of issue/ company registration number	Percentage of shareholding in the applicant company and/ or holding company

9. Do persons resident outside India in aggregate hold more than 49% of the share capital of the applicant? Please provide details.
10. Who exercises control over the applicant? Please provide details.
11. Do persons resident outside India exercise control over the management or policy decisions of the applicant? If so, please provide details.
12. Please provide audited financial statements of:
- a company holding more than 10% of the share capital of the applicant (if any),
  - a company who is in control of the applicant (if any),
  - promoter company (if any),
  - the applicant,

of the last three years or from the date of incorporation of the company, whichever is less.

13. Please provide any other information to demonstrate that the persons holding more than 10% of the share capital of the company, and the promoters of the company are fit and proper persons.

### PART IV

#### DIRECTORS AND EMPLOYEES

14. Please state the details of the applicant's Board of Directors:

Sl. No.	Name and address of the director	DIN and PAN	Details of any pending or concluded criminal proceedings against the directors

15. Please provide any other information to demonstrate that the directors are fit and proper persons.
16. Please provide number of employees, category-wise.

**PART V**  
**INFRASTRUCTURE**

17. Please state the infrastructure the applicant currently has and proposes to have to enable it to discharge its functions as an insolvency professional agency, including:
- (a) the number and locations of offices,
- (b) infrastructure in respect of enrolment, monitoring, grievance redressal and disciplinary proceedings,
- (c) IT and other computer facilities, and
- (d) library and training facilities.

**PART VI**  
**COMPLIANCE**

*[For applications for renewal of registration]*

18. Please provide details of the insolvency professional agency's compliance with the conditions of its certificate of registration.
19. Please provide details of the insolvency professional agency's compliance with the Board's requirements in respect of reporting.
20. Please provide details of any grievance redressal proceedings instituted against the insolvency professional agency or by it under its bye-laws, any regulations of the Board or the Code.

Please provide any other details you consider relevant in support of the application.

Sd/-  
Authorized Signatory  
(Name)  
(Designation)

Date :  
Place :

**SCHEDULE**  
**FORM B**

THE INSOLVENCY AND BANKRUPTCY BOARD OF INDIA

**Certificate of Registration No. \_**

The Insolvency and Bankruptcy Board of India hereby grants/ renews this certificate of registration to/of \_\_\_\_\_ *[insert name and address]* to act as an insolvency professional agency in accordance with the Insolvency and Bankruptcy Code, 2016.

The certificate of registration shall be valid from *[insert start date]* to *[insert end date]* and may be renewed.

Sd/-  
(Name and Designation)  
(For and on behalf of Insolvency and Bankruptcy Board of India)

Place :  
Date:

Dr. M. S. SAHOO, Chairperson  
[ADVT.-III/4/Exty./309]