

7. *Date of birth (DD/MM/YYYY)

8. *Gender ☐ Male ☐ Female ☐ Transgender

9. Income tax PAN

10. Voter's Identity card number

11. Do You have a Passport ☐ Yes ☐ No

#Passport number

12. Driving license number

*13. Aadhaar number

@*14. Personal Mobile

@*15. Personal Email
ID

16. Permanent residential address

*
Line I

Line II

*
City

*Pin *State
code

ISO
country code Phone Fax

*Country

17. Whether present residential address is same as permanent residential address ☐ Yes ☐ No

18. Present residential address

*
Line I

Line II

*City

* State
*Pin code
ISO country code Phone
Fax

*Country

@Mobile No. and Email id shall be of the Director himself only.

In case of Indian nationals, Passport is not Mandatory, In case of foreign nationals Passport is Mandatory.

Attachments:

1. * Proof of Identity;
2. * Proof of Address;
3. Optional attachments, if any.

Attach
Attach
Attach

List of Attachments

--

Verification

I, hereby confirm and verify that the particulars given in the Form herein above are true and also are in agreement with the documents being attached to this form.

- (i) The documents being attached to the Form DIR-3KYC belong to me. I further confirm that all required documents have been duly certified by the respective government authority and are being attached to the Form DIR-3 KYC and
- (ii) I further confirm that the Mobile No and email ID belong personally to me.
- (iii) I am not restrained, disqualified, removed of, for being appointed as director of a company under the provisions of the Companies Act, 2013 including sections 164 and 169, and
- (iv) I have not been declared as proclaimed offender by any Economic Offence Court or Judicial Magistrate Court or High Court or any other Court, and
- (v) I have no other allotted DIN other than DIN in which changes are intimated under section 154 of the Companies Act, 2013 or a Designated Partner Identification Number under section 7 of the Limited Liability Partnership Act, 2008.

- (vi) I shall be liable under section 448 of the Act and under relevant provisions of the Indian Penal Code, 1860 and any other law as applicable, if any statement in this application is found to be false or any material fact is found to be have been omitted.

*To be digitally signed by Applicant

Certification

I declare that I have been duly engaged for the purpose of certification/verification of this form. It is hereby certified that:

- ☐ * I have satisfied myself about the identity of the applicant and his address based on the perusal of the original of the attached document.

Note: In case where the applicant is residing outside India the particulars have to be verified from the documents duly attested by the attesting authority as prescribed.

- ☐ * I have verified and attested the documents of the applicant based on the Originals documents produced before me.
- ☐ * All required attachments have been completely attached to this application
- ☐ * 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 records maintained by the Company/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:
- * Mobile No and email ID belong to the applicant / Director signing the form.
 - * All the required attachments have been completely and legibly attached to this form;
 - *I have kept a copy of this form and attachments thereto, in my records for further reference.
 - *It is understood that I shall be liable for action under section 448 of The Companies Act, 2013 for wrong certifications, if any found at any stage.

*To be digitally signed by

*Category

*Whether Associate or Fellow ☐ Associate ☐ Fellow

*Membership Number

*Certificate of Practice

Number

Modify

Check

Prescrutiniv

Submit

Note: Attention is drawn to provisions of Section 448 and 449 which provide for punishment for false statement / certificate and punishment for false evidence respectively.

For office use only:

Affix filing details

eForm Service request number (SRN)
eForm filing date
(DD/MM/YYYY)

Digital signature of the authorizing officer

This e-Form is hereby approved

Confirm

This e-Form is hereby rejected

Date of signing (DD/MM/YYYY)

OR

This e-Form has been taken on file maintained by the register of companies through electronic mode and on the basis of statement of correctness given by the Director and professional. ”.