"[Pursuant to sections 4, 7, 8(1), 12, 152 and 153 of the Companies Act, 2013 read with rules made thereunder] – FORM NO. INC-32

SPICe+

M NO. II	NC-32		(Sim Plus		ma for Incorporating (Company Electronic
				RT – A		
(b) Cla	pe of Company LLPIN ass of Company ategory of Company ab-category of Comp	any				
	division of industrial		e company			
Partici i.	ulars of the proposed	l or approved r	name			
. Structu	re of the Company		PA	RT - B		
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otal subscribed share capital (in Rupees) Subscribed share capital Eq	uity	Preference
Number of shares		9
Nominal amount per share (in Rupees)		
Fotal amount (in Rupees)		
rotal amount (in respect)	***	
i) *Details of number of members		
(a) Enter the maximum number of members		
(b) Maximum number of members excluding proposed empl	oyees	
(c) Number of members		
(d) Number of members excluding proposed employee(s)		
(u) Humber of members excitating proposes strip to year		
ddwag of the Company		
ddress of the Company		
a) *Correspondence address		
Line I		
Line II		
City		
	* P' 4	
State/Union TerritoryL	* Pin code	
District		
Phone (with STD code) -		
Fax		
email ID of the company		
500 (1990) (1990) (1990) (1990) (1990) (1990) (1990) (1990)	1 66 6	the company o Ves o No
b) *Whether the address for correspondence is the address of	registered office of	the company or resorto
c) *Name of the office of the Registrar of Companies in which	th the proposed com	pany is to be registered
Subscriber and Directors Details		
(a) *Number of first subscriber(s) to MOA and directors of the	ne company	
	Having valid	Not having valid
	DIN	DIN
Total number of first subscribers		
(non-individual + individual)		
Number of non-individual first subscriber(s)		
Number of individual first subscriber(s) cum director(s)		
Total number of directors		1

Category	
Corporate identity number	er(CIN) or foreign company Pre-Fill
	I) or any other registration number
Name of the body corpor	rate
	to the second se
	or Principal place of business in India or Principal place of business outside India
Line I	
Line II	
City Union Torritory	*Pin code
State /Union Territory	1111 0000
ISO Country code	
Country	
Phone (With STD/ISD co	ode)
Fax	
*email id	
Particulars of the auth	orisea person
*First Name	
Middle Name	
*Surname	
*Father's First Name	
Father's Middle Name	
*Father's Surname	
* Gender	*Date of Birth *Nationality
□ PAN □ Passport numb	Der Verify
Aadhaar number	
*Place of Birth (District 8	& State)
*Occupation type	
*Area of Occupation	
*Educational qualification	on
Present Address	
*Line I	
Line II	
*City	*Pin code
*State /Union Territory	PIII code
ISO Country code	
Country	
*Phone (With STD/ISD	code)
Mobile	

subscribed Equity shares Preference shares *First Name Middle Name *Surname *Father's first name Father's surname *Gender *Place of Birth *Occupation type o Self Employed o Professional o Homemaker o Student o Serviceman *Area of Occupation If 'Others' selected, please specify *Educational Qualification * ¬ PAN ¬ Passport number Aadhaar number *email ID Permanent Address *Line I Line II *City *State/Union Territory *Phone (with STD/ISD code) *Whether present residential address same as permanent residential address o Yes o No Present address	*Particulars of individual first subscriber(s) (other than subscriber cum director) *Director Identification number (DIN] Pre- *Name	Equity shares						
*Director Identification number (DIN] *Name Kind of shares subscribed Equity shares Preference shares *First Name Middle Name *Sumame *Father's first name Father's suriame *Gender *Place of Birth *Occupation type o Self Employed o Professional o Homemaker o Student o Serviceman *Area of Occupation If 'Others' selected, please specify *Educational Qualification *DAN DASSPORT number Aadhaar number *email ID Permanent Address *Line I Line II *City *State/ Union Territory *Phone (with STD/ISD code) *Whether present residential address same as permanent residential address o Yes o No Present address	*Director Identification number (DIN) *Name Kind of shares Subscribed Equity shares Preference shares *First Name Middle Name *Sumame *Father's first name Father's surname *Father's surname *Gender *Place of Birth *Occupation type o Self Employed o Professional o Homemaker o Student o Serviceman *Area of Occupation If 'Others' selected, please specify *Educational Qualification *aPAN passport number *City *Email ID Permanent Address *Line I Line II *City *State/ Union Territory *Pin code *Whether present residential address same as permanent residential address o Yes o No Present address *Line I	Preference shares						
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Father's surname *Father's surname *Gender	Father's surname *Father's surname *Gender	*Surname						
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*Place of Birth *Occupation type o Self Employed o Professional o Homemaker o Student o Serviceman *Area of Occupation If 'Others' selected, please specify *Educational Qualification *	*Place of Birth *Occupation type o Self Employed o Professional o Homemaker o Student o Serviceman *Area of Occupation If 'Others' selected, please specify *Educational Qualification *	*Father's surname						
*Occupation type o Self Employed o Professional o Homemaker o Student o Serviceman *Area of Occupation If 'Others' selected, please specify *Educational Qualification * □ PAN □ Passport number Aadhaar number *email ID Permanent Address *Line I Line II *City * State/ Union Territory *Pin code *ISO Country code Country *Phone (with STD/ISD code) *Whether present residential address same as permanent residential address o Yes o No Present address	*Occupation type o Self Employed o Professional o Homemaker o Student o Serviceman *Area of Occupation If 'Others' selected, please specify *Educational Qualification *	*Gender	*Date of Birth	*Nationality				
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* State/ Union Territory	* State/ Union Territory	Line II	Line II					
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*Phone (with S			Months
*Duration of sta	y at present a	address Years Years	The state of the s
If Duration of st	tay at present	address is less than one year then a	duress or provides
*Proof of identi	ty	*Residential	Proof
		and proof of address under attach	ments.
Kind of subscribed	shares	Number of subscribed shares	Amount of shares subscribed
Equity shares			
Preference sh	ares		
articulars of indiv	idual first subs	scriber(s) cum directors	
*Director Iden	tification numl	ber (DIN)	Pre-
*Name		*	
*Gender		*Date of Birth	*Nationality
Participation			tegory
*Designation			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		ocutive director - Non-executive di	rector
		ecutive director Non-executive di	
		stitution whose nominee the appoint	
*Name of the			
			ee is
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Middle Name		
*Surname		
*Father's first name		
Father's middle name		
*Father's surname		
*Gender	*Date of Birth	*Nationality
*Place of Birth		
*Whether citizen of Inc	a o Yes o No *Whether resident	ent in India o Yes o No
	f Employed o Professional o Homema	ker o Student o Serviceman
*Area of Occupation	, and the same of	
If 'Others' selected, pl	ase specify	
*Educational Qualifica		
* 🗆 PAN 🗆 Passport	process and the second	Verify
*Designation	*	Category
Whether Chairman	□ Executive director □ Non-executive	e director
*Name of the compan	or institution whose nominee the appoint	intee is
*email ID		
Permanent Address		
*Line I		
Line II		
*City		
* State/ Union Territo	у	*Pin code
*ISO Country code	Country	
*Phone (with STD/IS		0000
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Line II		
*City		*Pin code
*State/ Union Territo		1 iii code
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*Proof of ident	ty		*Residentia	l Proof
Voter's identity				
Driving license	number		-	
Aadhaar Numb				
		and proof of address	under attach	ments.
				Amount of shares subscribe
Kind of subscribed	shares	Number of subscrib	ed snares	Amount of shares subscribe
Equity share:	5			
Preference sl	nares			
Number of en	tities in which di	rector have interest		
*Registratio	n number			
*Name			8	
*Address				
Addioss				
Nature of	*Designation			
	1			
interest	Percentage of	Shareholding	Amou	nt
interest		Shareholding [Amou	nt
interest	Percentage of Others (speci		Amou	nt
10 m	Others (speci	fy)	Amou	nt
rticulars of dire	Others (special	fy) [] i first subscribers)	Amou	nt
rticulars of dire	Others (speci	fy) [] i first subscribers)	Amou	nt Pre-Fill
rticulars of dire	Others (special	fy) [] i first subscribers)	Amou	
rticulars of dire *Director Ide *Name	Others (special	fy) i first subscribers) per (DIN)		
*Director Ide *Name *Gender	Others (special control of the contr	fy) [] i first subscribers)		Pre-Fill *Nationality
*Name Gender *Designation	Others (special control of the contr	fy) i first subscribers) per (DIN) *Date of Birth	*Ca	Pre-Fill *Nationality stegory
*Name Gender Special Posignation Whether	Others (special control of the contr	fy) i first subscribers) per (DIN) *Date of Birth ecutive director □ N	*Ca	Pre-Fill *Nationality ategory irector
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*Name Gender Special Posignation Whether	Others (special control of the contr	fy) i first subscribers) per (DIN) *Date of Birth ecutive director □ N	*Ca	Pre-Fill *Nationality ategory irector
*Name Semail ID	Others (special ectors (other than entification numbers) Chairman Execute company or insertion of the company of the	*Date of Birth	*Ca on-executive d	Pre-Fill *Nationality ategory irector
*Name *Designation Whether C *Name of th	Others (special ectors (other than entification number than the company or instantities in which of the company or instanting or instantin	*Date of Birth ecutive director DN: stitution whose nomin	*Ca on-executive d nee the appoint	Pre-Fill *Nationality ategory irector
*Name *Designation Whether C *Name of th	Others (special ectors (other than entification number than the company or instantities in which of the company or instanting or instantin	*Date of Birth	*Ca on-executive d nee the appoint	Pre-Fill *Nationality ategory irector
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	Nature of *Designation
	interest Percentage of Shareholding Amount
	Others (specify)
1	*First Name
	Middle Name
	*Surname
	*Father's first name
	Father's middle name
	*Father's surname
	*Gender *Date of Birth *Nationality
	*Place of Birth
	*Whether citizen of India o Yes o No *Whether resident in India o Yes o No
	*Occupation type o Self Employed o Professional o Homemaker o Student o Serviceman
	*Area of Occupation
	If 'Others' selected, please specify
	*Educational Qualification
	* 🗆 PAN 🗆 Passport number Verify
	*Designation *Category
	Whether Chairman Executive director Non-executive director
	*Name of the company or institution whose nominee the appointee is
	*email ID
	Permanent Address
	*Line I
	Line II
	*City *Pin code *Pin code
	State/ Official Territory
	*ISO Country code Country
	*Phone (with STD/ISD code) -
	*Whether present residential address same as permanent residential address o Yes o No
	Present address
	*Line I
	Line II
	*City

**Residential Proof **Proof of identity and proof of address under attachments. **Number of entities in which director have interest **Registration number **Name **Address Nature of **Designation interest Percentage of Shareholding Amount Others (specify) **Def Nomination 1.5* **The subscriber to the memorandum of association of do hereby nominate ** who shall become the member of the company in the event of my death or incapacity to contract. I de nominee is eligible for nomination within the meaning of Rule 3 of the Companies (Incorporation) Rule Director identification number(DIN) **First Name Director identification number(DIN) **Frest Name Director identification number(DIN) **Frest Name Middle Name Pro-Fill **Proof of identity and proof of address under attachments. **Nomination Interest	*State/ Union 7	Territory *Pin code
*Duration of stay at present address	*ISO Country	code Country
*Duration of stay at present address	*Phone (with S	TD/ISD code) -
If Duration of stay at present address is less than one year then address of previous residence "Proof of identity		
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(a) State or Union territory	in respect of which s	stamp				Pre-Fill
duty is paid or to be paid (b) "Whether stamp duty is	d to be baid electroni	cally through MCA	1 system	(") Yes	() No	○ Not applicable
		cary unough more				
(i) Details of stamp duty Type of document		Form		morandum of	Article	es of association
Particulars	,	10111		association		
Amount of stamp duty to be	paid (in Rs.)					
(ii) Provide details of st	tamp duty already p	aid				
Type of document/ Particulars	Form	Memora assoc		Articles of association		Others
Total amount of stamp duty paid (in Rs.)						
Mode of payment of stamp outy						
Name of vendor or Treasury or Authority orany other competent agency authorised to obliect stamp duty or to sell stamp papers on to emboss the documents or to dispense stamp youghers on behalf of the Government						
Serial number of embossing or stamps or stamp paper or treasury challan number						
Registration number of vendor						
Date of purchase of stamps or stamp paper or payment of stamp duty (DD/MMYYYYY)						
Place of purchase of stamps or stamp paper or payment of stamp duty						

VII. PAN/ TAN Information

11. *Additional Information for applying Permanent Account Number (PAN) and Tax Deduction Account Number (TAN)

Information	specific to	PAN
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Information specific to TAN

Area code	AO type	Range code	AO No
Area code			

Source	of	Income

- □ Income from Business/profession □ Capital Gains
- □ Income from house property

Attach

- □ Income from other source
- □ No Income

Business/Profession code

10	
10	

VII. Attachments

Attachments

- "Memorandum of association;
- *Articles of Association;
- 3. Declaration by first subscriber(s) and director(s) (Affidavit is not required to be attached);
- 4. Proof of Office address (Conveyance/ Lease deed/Rent Agreement along with rent receipts);
- 5. Copy of the utility bills (not older than two months);
- 6. Copy of certificate of incorporation of the foreign body corporate and resolution passed by foreign company or authority given through constitutional document;
- Resolution passed by promoter company;
- 8. Interest of first director(s) in other entities;
- Consent of Nominee (INC-3);
- 10. Proof of identity & residential address of subscribers;
- 11. Proof of identity & residential address of nominee;
- 12. Proof of identity and address of Applicant I;
- 13. Proof of identity and address of Applicant II;
- 14. Proof of identity and address of Applicant III;
- 15. Resolution of unregistered companies in case of Chapter XXI (Part I) companies
- 16. Declaration in Form No. INC-14
- 17. Declaration in Form No. INC-15
- 18. Optional attachment(s), (if any)
- 19. Attachment Part A

List of attachments

	VIII. Declaration
	Declaration
	I have gone through the provisions of the Companies Act, 2013, the rules thereunder and prescribed guidelines framed thereunder in respect of reservation of name, understood the meaning thereof and the proposed name is in conformity thereof.
The state of the s	I have used the search facilities available on the portal of the Ministry of Corporate Affairs (MCA) for checking the resemblance of the proposed name with the companies and Limited Liability partnerships (LLPs) respectively already registered or the names already approved. I have also used the search facility for checking the resemblances of the proposed name with registered trademarks and trade mark subject of an application under the Trade Marks Act, 1999 and other relevant search for checking the resemblance of the proposed name to satisfy myself with the compliance of the provisions of the Act for resemblance of name and Rules thereof.
	The proposed name is not in violation of the provisions of Emblems and Names (Prevention of Improper Use) Act, 1950 as amended from time to time.
	The proposed name is not offensive to any section of people, e.g. proposed name does not contain profanity or words or phrases that are generally considered a slur against an ethnic group, religion, gender or heredity. The proposed name is not such that its use by the company will constitute an offence under any law for the time being
	I undertake to be fully responsible for the consequences in case the name is subsequently found to be in contravention of the provisions of section 4(2) and section 4(4) of the Companies Act, 2013 and rules thereto and I have also gone through and understood the provisions of section 4(5) (ii) (a) and (b) of the Companies Act, 2013 and rules thereunder and fully declare myself responsible for the consequences thereof.
	* ,
	a person named in the articles as a director of the company has been duly authorized by the promoters of the company to sign this form and declare that all the requirements of the Companies Act, 2013 and the rules made thereunder in respect of Director Identification Number (DIN), registration of the company and matters precedent or incidental thereto have been complied with.
	I am authorized by the promoter subscribing to the Memorandum of Association and Articles of Association and the first director(s) to give this declaration and to sign and submit this Form.
	I further declare that, company shall not commence its business, unless all the required approval from the sectoral Regulators such as RBI, SEBI etc. have been obtained;
	I on behalf of the promoters and the first directors, hereby declare that the registered office is capable of receiving and acknowledging all communications and notices addressed to the proposed company on incorporation, shall be maintained at the given address at item 7 of this form;
	*I, on behalf of all the first director(s) named in the Articles of Association of the proposed company, solemnly declare, that the declaration given herein as stated above are true to the best of my knowledge and belief, the information given in this integrated application form for incorporation and attachments thereto are correct and complete, and nothing relevant to this form has been suppressed. All the required attachments have been completely, correctly and legibly attached to this form and are as per the original records maintained by the promoters subscribing to the Memorandum of Association and Articles of Association.
	I, on behalf of the proposed Directors whose particulars for allotment of DIN are filled as above, hereby confirm and declare that they are not restrained, disqualified, removed for being appointed as Director of a company under the provisions of the Companies Act, 2013 including sections 164 and 169, and have not been declared as proclaimed offender by any Economic Offence Court or Judicial Magistrate Court or High Court or any other Court, and not been already allotted a Director Identification Number (DIN) under section 154 of the Companies Act, 2013, and I further declare that I have read and understood the provisions of Sections 154, 155, 447 and 448 read with Sections 449, 450 and 451 of the Companies Act, 2013.
-	
	having Membership number and/or certificate of practice number has been engaged to give declaration under section 7(1) (b) and such declaration is attached.

Note: Attention is drawn to the provisions of sections 7(5) and 7(6) which, inter-alia, provides that furnishing of any false or incorrect particulars of any information or suppression of any material information shall attract punishment for fraud under section 447. Attention is also drawn to provisions of section 448 and 449 which provide for punishment for false statement and punishment for false evidence respectively. *To be digitally signed by director DSC BOX *DIN / PAN IX. Declaration and Certification by Professional **Declaration and Certification by Professional** member of having office at * Who is engaged in the formation of the company declare that I have been duly engaged for the purpose of certification of this form. It is hereby also certified that 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/certified records maintained by the 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; the draft memorandum and articles of association have been drawn up in conformity with the provisions of (i) sections 4 and 5 and rules made thereunder; and all the requirements of Companies Act, 2013 and the rules made thereunder relating to registration of the (ii) company under section 7 of the Act and matters precedent or incidental thereto have been complied with. 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; I have opened all the attachments to this form and have verified these to be as per requirements, complete and (iii) I further declare that I have personally visited the premises of the proposed registered office given in the form (iv) at the address mentioned herein above and verified that the said proposed registered office of the company will be functioning for the business purposes of the company (wherever applicable in respect of the proposed registered office has been given). It is understood that I shall be liable for action under Section 448 of the Companies Act, 2013 for wrong (v) certification, if any found at any stage. Cost accountant (in whole-time practice) or Chartered accountant (in whole-time practice) or Company secretary (in whole-time practice) *Whether associate or fellow Associate Fellow * Membership number Certificate of practice number "Income-tax PAN Prescrutiny Check Form

Affix estiamp and thing details	
eForm filing date	(DD/MM/YYYY)
Continu submission	
(DD/MM/YYYY)	
	Confirm submission