## Form No. INC-27

Conversion of public company into private company or private company into public company and Conversion of Unlimited Liability Company into a Company Limited by shares or guarantee or conversion of guarantee company into a company limited by shares

[Pursuant to section 14 and 18 of the Companies Act, 2013 and Rule 33, Rule 37 and Rule 39 of the Companies (Incorporation) Rules, 2014]

Refer instruction kit for filing the form

All fields marked in \* are mandatory

## Healtha stade

language	

English

Hindi

|--|

1 *Application for	
Conversion of private company into public company Conversion of public company into private company Conversion of Unlimited Liability Company into a Company Limited by shares	
Conversion of Unlimited Liability Company into a Company Limited by guarantee  Conversion of company limited by guarantee into a company limited by shares	
2 *Corporate Identity Number (CIN)	
3 (a) *Name of the Company	

-						
	(b) *Regis	tered office address				
(c) *email ID of the company						
4	*Reason(s	) for conversion				
5	Particulars	of filing Form MGT-14 v	vith Registrar of	Companies (ROC)		
	(a) *SRN	of Form MGT-14				
	(b) *Date	of passing the special re	esolution (DD/M	1M/YYYY)		
e	S Particulars	of the order of Central (	Sovernment			
	(a) SRN o	f Form RD-1				
(b) Date of passing the order (DD/MM/YYYY)						
	(c) Date of receiving the order (DD/MM/YYYY)					
	7 *Name of the company at the time of incorporation (to be displayed n the certificate)					
8	(a) Date of publication of notice in English language as per rule 37 of the Companies (Incorporation) Rules, 2014 (DD/MM/YYYY)					
	(b) Date of publication of notice in vernacular language as per rule 37 of the Companies (Incorporation) Rules, 2014 (DD/MM/YYYY)					
c	Particulars of Creditors and Debenture Holders					
	S. No	Name of the Creditor / Debenture Holder	Туре	Address	Amount Due	Remarks (Nature of Debt / Claim / Liability)

S. No	Name of the Creditor / Debenture Holder	Туре	Address	Amount Due	Remarks (Nature of Debt / Claim / Liability)
(i)	(ii)	(iii)	(iv)	(v)	(vii)
		V			
		▼			
		▼			

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## Attachments

- (a) Copy of Newspaper publication
- (b) \*A copy of Statutory Auditors Certificate
- (c) Optional attachment(s), if any

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Max 2 MB	Choose File	Remove	Download
Max 2 MB	Choose File	Remove	Download

Declaration	
I have been authorised by the board of directors' resolution number*  to sign and submit this application. I, further declare	dated (DD/MM/YYYY) * e the following:
*To the best of my knowledge and belief, the information given in this application and it	ts attachments are correct and complete.
*The company has obtained all the mandatory approvals from the concerned authoritie	s, departments and substantial creditors.
*To be digitally signed by	DSCBOX
*Designation	
(Director/Manager/ Company Secretary/CFO/CEO)	▼
* Director identification number of the director; or DIN or PAN of the manager or CEO or CFO; or Membership number of the company secretary	
Declarations under rule 37	
I, on behalf of Board of Directors, hereby declare that conversion shall not affect any incurred or entered into by or on behalf of the Company before conversion (except to the shall become limited)	
I, on behalf of Board of Directors, hereby declare that we have made full enquiry into done so, have formed an opinion that the list of creditors is correct, and that the estimate claims payable on a contingency are proper estimates of the values of such debts and claims against the company to our knowledge.	d value as given in the list of the debts or
I, on behalf of Board of Directors, hereby declare that we have made a full inquiry into which we have formed an opinion that it is capable of meeting its liabilities and will not be year from the date of declaration, through a resolution, passed in a duly convened meeting	rendered insolvent within a period of one
I, on behalf of Board of Directors, hereby declare that no complaints are pending againsted investors and no inquiry, inspection or investigation is pending against the company or its D	
I, on behalf of Board of Directors, hereby declare that notice as required under rule Rules, 2014 has been dispatched to all the creditors and debenture holders with proof of di	
To be digitally signed by	DSCBOX
Designation (Director)	V
Director identification number of the director.	
To be digitally signed by	DSC BOX
Designation (Director)	<b>V</b>

[भाग II—खण्ड 3(i)]	भारत	का राजपत्र : असाधारण		217
Director identification number of the	director;			
Declaration and Certification by Prof	essional			
1*	member of*		having office at*	
form. It is hereby also certified that subject matter of this form and matt	I have gone through the ers incidental thereto a ned by the applicant w	e provisions of the Comp and I have verified the ab thich is subject matter of	ngaged for the purpose of certification panies Act, 2013 and rules thereunde tove particulars (including attachment in this form and found them to be true certify that;	r for the (s)) from
(i) The company is eligible for conv (Incorporation) Rules, 2014, and	ersion and does not at	tract any disqualification	n as specified under rule 8 of the Co	mpanies
unlimited liability to limited liability	and matters precedent the required officers o	or incidental thereto has	relating to conversion of the compa ve been complied with. The said reco ntained as per the relevant provision	rds have
(iii) I have opened all the attachments	s to this form and have	verified these to be as pe	r requirements, complete and legible;	
(iv) It is understood that I shall be liab at any stage.	le for action under Sect	ion 448 of the Companie	s Act, 2013 for wrong certification, if a	ny found
*To be digitally signed by			DSC BOX	
Chartered accountant (in whole-	time practice) or			
Cost accountant (in whole-time p	oractice) or			
Company secretary (in whole-tim	ne practice)			
*Whether associate or fellow:				
Associate O Fellow				
Membership number				
Certificate of practice number				
			Save	

Note: Attention is drawn to provisions of Section 448 and 449 of the Companies Act, 2013 which provide for punishment for false statement/ certificate and punishment for false evidence respectively.

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For office use only:		
eForm Service request number (SRN	1)	
eForm filing date (DD/MM/YYYY)		
Digital signature of the authorising	officer	
This eForm is hereby registered		DSCBOX
Date of signing (DD/MM/YYYY)		