**Form 9**

*[See rule 7 and 10(8)]*

**Consent to act as Designated Partner**

To,

**<your\_llp\_name> LLP**

**<llp\_address>**

**Subject: Consent to act as Designated Partner**

I, hereby give my consent to act as designated partner of the **<your\_llp\_name> LLP** pursuant to Section 7(3) of the Act.

**Particulars**

| 1.Designated Partner Identification Number (DPIN) | Applied |
| --- | --- |
| 2. Name of Designated Partner | <Designated\_Partner\_name> |
| 3. Father’s /Husband’s Name | <Designated\_Partner\_father\_name> |
| 4. Present residential address | <Designated\_Partner\_address> |
| 5. E-mail ID | <Designated\_Partner\_email> |
| 6. Phone Number | <Designated\_Partner\_number> |
| 7.Name of the Partnership Firm  OR  LLPIN & Name of Limited Liability Partnership  OR  CIN & Name of the company  OR  Name of any other body corporate whose nominee the designated partner is. | <applicable\_options> |

I hereby state that I satisfy the conditions and requirements for being eligible to be a designated partner and I have not been disqualified to act as a designated partner.

To be signed by the designated partner:

Date: <date>

Place: <place>

**<Designated\_Partner\_name>**