Horaria sadi

Form No. DIR-3-KYC

Form	language
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English	Hindi
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KYC of Directors

[Pursuant to Rule 12Aof the Companies (Appointment and Qualification of Directors) Rules, 2014]

All fields marked in * are mandatory

In case of Indian nationals, Income-tax Permanent Account Number (Income-tax PAN) is mandatory in all cases even if there is no change in Income-tax PAN. In such cases, director details should be as per Income-tax PAN. In case the details as per Income-tax PAN are incorrect, director/designated partner is advised to first correct the details in Income-tax PAN

Refer instruction kit for filing the form

Director related information			
L (a) *Director Identification Number (DIN)			
(b) *Name			
2 Director's Name (Enter full name and do not use abbreviations)			
a) First name			
b) Last name			
c) Middle name			
Father's Name (Married woman shall also give father's name)			
a) First name			
b) Last name			
c) Middle name			
*Whether a citizen of India		○ Yes	○ No
5 *Nationality			
5 *Whether resident in India		Yes	○ No
*Date of birth(DD/MM/YYYY)			
3 *Gender	Male	Female	Transgender

9 Income tax PAN	
10 *Do you have Aadhaar	○ Yes ○ No
Aadhaar number	
11 Voter's Identity card number	
12 *Do you have a valid passport	○ Yes ○ No
Passport number	
13 Driving license number	
14 *Personal Mobile Number	
15 *Enter OTP for Mobile Number	
16 *Personal Email ID	
17 *Enter OTP for e-mail ID	
18 Permanent residential address	
18 Permanent residential address Do you have permanent address outsideIndia	○ Yes ○ No
	Yes No
Do you have permanent address outsideIndia	Yes No
Do you have permanent address outsideIndia *Address Line 1	Yes No
Po you have permanent address outsideIndia *Address Line 1 Address Line 2	Yes No
*Address Line 1 Address Line 2 *Country	Yes No
*Address Line 1 Address Line 2 *Country *Pin Code/Zip Code	Yes No
Do you have permanent address outsideIndia *Address Line 1 Address Line 2 *Country *Pin Code/Zip Code *Area/Locality	Yes No
*Address Line 1 Address Line 2 *Country *Pin Code/Zip Code *Area/Locality *City	Yes No
*Address Line 1 Address Line 2 *Country *Pin Code/Zip Code *Area/Locality *City District	Yes No

Phone	
Fax	
19 *Whether present residential address is same as permanent residential address	○ Yes ○ No
20 Present residential address	
*Address Line 1	
Address Line 2	
*Country	
*Pin Code/Zip Code	
*Area/Locality	
*City	
District	
*State/UT	
*Jurisdiction of police station	
Phone	
Fax	
Attachments	
(a) *Proof of permanent address	
(b) Copy of Aadhaar Card	
(c) Copy of Passport	
(d) Proof of present address	
(e) Optional attachment(s) -if any	
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.

	e documents being attached to the Form DIR-3KYC belong to me. I further confirm thad by the respective government authority and are attached to the Form DIR-3 KYC;	t all required documents have been duly
(ii) I fu	urther confirm that the Mobile No and email ID belong personally to me.	
	nave not been declared as a proclaimed offender by any court of Economic Offences of any other Court;	or court of Judicial Magistrate or High
	nave no other allotted DIN other than DIN in which changes are intimated under section attended the control of the Limited Liability Partnersh	
Penal	hall be liable under section 447 read with section 448 of the Companies Act, 2013 and Code, 1860 and any other law as applicable, if any statement in this application is four have been omitted.	
*To b	e digitally signed by DIN holder	
Certif	ficate by practicing professional	
I decl	are that I have been duly engaged for the purpose of certification/verification of this f	orm.It is hereby certified that:
	*I have satisfied myself about the identity of the DIN holder and his address based on the peru Note: In case where the DIN holder is residing outside India the particulars have to be attested by the attesting authority as prescribed.	
	*I have verified and attested the documents of the DIN holder based on the Original	s 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 thereund matters incidental thereto and I have verified the above particulars (including attach maintained by the Company/DIN holder which is subject matter of this form and fou and no information material to this form has been suppressed.	ment(s)) from the original records
*I fur	ther certify that:	
	*Mobile No and email ID belong to the Director signing the form.	
	*All the required attachments have been completely and legibly attached to this for *I have kept a copy of this form and attachments thereto, in my records for further	
	*It is understood that I shall be liable for action under section 477 read with section wrong certifications, if any found atany stage.	448 of The Companies Act, 2013 for
*To b	e digitally signed by	
	egory rtered accountant (in whole-time practice), accountant (in whole-time practice), Secretary (in whole-time practice)	
*Whe	ether associate or fellow	Associate Fellow

Membership number				
Certificate of Practice number				
Note: Attention is drawn to provisions of Section 447 read with section 448 and 449 of the Companies Act, 2013 which provide for punishment for false statement / certificate and punishment for false evidence respectively.				
For office use only:				
eForm Service request number (SRN)				
Form filing date(DD/MM/YYYY)				
This eForm has been taken on file maintained by the registrar of companies through electronic mode and on the basis of statement of correctness given by the director and professional.				