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



(Simplified Proforma for Incorporating Company Electronically)

orm language	○ Hindi				
efer the instruction kit for filing			_		
*Whether name is already appro	oved by Registrar of 0	Compani	ies Yes	○ No	
(a) *State the type of company					
(b) *State the class of compar	y Public O	Private	One Person Com	pany	
(c) *State the category of com	pany				
(d) *State the sub-category of	company				
(e) *Whether proposed compa	any is an IFSC compa	any 🔘	Yes O No		
(f) *Company is Having	share capital	Not hav	ing share capital		
(a) *Main division of industrial	activity of the compa	ny			
Description of the main division		,			
/h) \\/\/\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	.:				
(b) Whether Articles of Associ		\bigcirc	Yes () No		
(i) *Capital structure of the con Total authorized share capita					
Total authorized chare capita	(iii rtapede)				
Authorized share capital	Equity		Preference		Unclassified
Number of shares					
Nominal amount per share					
(in Rupees)					
Total amount (in Rupees)					
Total subscribed share capita	I (in Rupees)				
Subscribed share capital			Equity		Preference
			Equity		rieleielice
Number of shares					
Nominal amount per share (ir	n Rupees)				
Total amount (in Rupees)					

4. (a) *Correspondence address				
*Line I				
*Line II				
*City				
*State/Union Territory		*	Pin code	
*District				
*Phone (with STD code)				
*email ID of the company				
emain ib or the company				
(b) *Whether the address for corre (c) *Name of the office of the Regi	•	-	·	
5. *Particulars of the proposed of				
(a) Proposed or approve	a name			
Significance of abbre in the proposed name				
	vernacular language(d name and meaning			
(b) (i) *Whether the proposed r	name includes the phra	ase 'Electoral trust'	\bigcirc Y	es No
(ii) *Whether the proposed the previous approval	name(s) contain such	word or expression fo	r which	res No
(iii) *Whether approval from	any sectoral regulato	r is required	○ Y	es No
(iv) Whether the name is si	milar to Existing	Indian Company	Foreign body of	corporate
[Attach the copy of No Objethat company) or in case of		-	-	
Name of the Company				
(c) (i) *Whether the proposed subject matter of an a	application pending for	registration under the		ct Yes No
. (a) Hamber of mot easternise (Having valid DIN		Not having valid DIN
Total number of first subscribe (non-individual + individual)	rs			
Number of non-individual first	subscriber(s)			
Number of individual first subs director(s)	criber(s) cum			
Total number of directors (dire is/are not subscriber(s) + subs director(s) as mentioned in about	criber(s) cum			
(d) *Particulars of individual f	irst subscriber(s) cui	m directors		
*First Name				
Middle Name				

*Father's fir	rst name						
Father's mi	ddle name						
*Father's s	urname						
*Gender			*Date of Birth		1	*Nationality	
*Place of B	Birth						
*Whether c	itizen of India	O Yes	○ No *W	hether resi	dent in I	ndia () Yes ()	No
*Occupation	on type 🔘 S	elf Employ	ved O Profession	al O Ho	memake	er O Student	Serviceman
*Area of O	ccupation						
If 'Others'	selected, plea	se specify					
*Education	nal Qualificatio	n					
* PAN	Passport	number					
*Designation	on			*Catego	ory		
Whether	Chairma	ın 🗌	Executive director		on-exec	utive director	
*email ID							
Permanent	Address						
*Line I	7.000						
Line II							
*City							
	on Territory				*Pin	code	
* ISO Coun			Country				
*Phone (wit	h STD/ISD co	de)	-				
*Whether p		ntial addre	ss same as perma	nent reside	ntial add	dress ○ Yes ○) No
*Line I							
Line II							

*City									
*State/ Unio	on Territory				*Pin	code			
* ISO Coun	try code		Country						
*Phone (wit	h STD/ISD code	e)		-					
*Duration o	of stay at presen	t address	;	Years	N	onths			
*D===f=f:d				¬	1				
*Proof of id				*Residential	Proof				
	ntity card number	er							
	nse number								
Aadhaar Nu			f -f - d-l						
	proof of identity shares subscrib			ss under attachme of subscribed sha		Λ m o	unt of obs	ares subscrib	, a d
Equity share		ea	Number	or subscribed sna	res	Amo	unt of Sna	ares subscrit	bea
Preference s									
Number of e	ntities in which	director h	ave interes	st					
*Registratio	n number								\blacksquare
*Name									
*Address									
Nature of interest	*Designation	on							
interest	Percentage of	of Shareho	olding		Amo	unt			
	Others (spe	ecify)							
*First Name	•								
Middle Nam	ne								
*Surname									
*Father's fir	st name								
Father's mid	ddle name								
*Father's su	ırname								
*Gender		,	*Date of Bi	irth		*Natio	nality		
*Place of B	irth					-			
*Whether ci	tizen of India () Yes (○ No	*Whether res	ident in	India	O Yes	○ No	
*Occupatio	n type <u>Self</u>	Employe	ed O Pro	fessional O Ho	omema	ker 🔘	Student	○ Serv	icemar
*Area of Oc	cupation								
If 'Others' s	selected, please	specify							
_	al Qualification				1				
* PAN	O Passport no	umber							
*Designation	n			*Categ	ory				
Whether	Chairman		Executive d	director	lon-exe	cutive	director		

*email ID					
Permanent	Address				
*Line I					
Line II					
*City					
*State/ Unio	on Territory		*	Pin code	
* ISO Count	try code	Country			
*Phone (wit	h STD/ISD code)]- [
	resent residential addre	ess same as permane	ent residential	address 🔘 Ye	s No
Present ad	dress				
*Line I					
Line II					
*City					
*State/ Unio	on Territory		*Pir	n code	
* ISO Coun	itry code	Country			
*Phone (wi	th STD/ISD code)	- [
*Duration o	of stay at present addre	ss Years	;	Months	
*Proof of ic	lentity	*Re	sidential Proof	;	
Voter's ider	ntity card number				
Driving lice	nse number				
Aadhaar Ni					
	proof of identity and pro	oof of address under	attachments.		
	shares subscribed	Number of subscri		Amount of	shares subscribed
Equity share					
Preference s	shares				
Number of e	entities in which director	have interest			
*Registration	on number				
*Name					
*Address					
Nature of interest	*Designation				
microsi	Percentage of Share	holding	Am	ount	
	Others (specify)			-	

8. Particulars of payment of stamp duty

(a) State or Union territory in reduty is paid or to be paid	espect of which stamp		
(b) *Whether stamp duty is to be p	oaid electronically through MCA	21 system O Yes O	No O Not applicable
(i) Details of stamp duty to be pa	aid		
Type of document/Particulars	Form	Memorandum of association	Articles of association
Amount of stamp duty to be paid			

(ii) Provide details of stamp duty already paid

Type of document/Particulars	Form	Memorandum of association	Articles of association	Others
Total amount of stamp duty paid(in Rs.)				
Mode of payment of stamp duty				
Name of vendor or Treasury or Authority or any other competent agency authorised to collect stamp duty or to sell stamp papers or to emboss the documents or to dispense stamp vouchers 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/MM/YYYY)				
Place of purchase of stamps or stamp paper or payment of stamp duty				

Area code AO type Range code AO No. formation specific to TAN
ormation specific to TAN
Area code AO type Range code AO No.
Source of Income
☐ Income from Business/profession☐ Capital Gains☐ Income from other source☐ No Income
Business/Profession code
Additional Information for Employer registration under Employee State Insurance Corporation (Es
Type of Unit Factory Establishment
Exact nature of Work/ Business carried on Work Sub category
Does the Employees Provident Fund and Miscellaneous Provisions Act 1952
pply to the establishment
Number of employees to be covered under Employees Provident Fund Act
Number of Employees earning wages less than Rupees fifteen thousand employed directly or three
e covered under Employees State Insurance Act
Do you need Importer Exporter code
Particulars of Investment
INVESTMENT Proposed amount (in Rup
) land (for rented premises, capitalised value of the same to be
indicated)
) building
) plant and machinery
I indigenous
I indigenous II import
II import

[^] The information in Serial number 10-15 are mandatorily required for Employees State Insurance Corporation registration, Employee Provident Fund, Employees State Insurance registration, Importer Exporter Code Registration in case of applicants desirous of applying for these services at the time of incorporation of a company and this facility is available at e-Biz Portal only as per separate procedure prescribed by e-Biz Portal. These services (Serial number 10-15) will not be available for forms filed on MCA21 Portal and no cognizance will be taken of entries in those fields if the form is filed on MCA21 Portal.

Atta	achments	List of attachments
1.	Memorandum of association	
2.	Articles of Association	
3.	Affidavit and declaration by first subscriber(s) and director(s)	
4.	Proof of Office address (Conveyance/ Lease deed/ Rent Agreement etc. along with rent receipts)	
5.	Copy of the utility bills (not older than two months)	
14.	Proof of identity & residential address of subscribers	
	,	
16.	Proof of identity and address of Applicant I	
17.	Proof of identity and address of Applicant II	
	Trool of facility and address of Applicant II	
20.	Optional attachment(s), (if any)	
	Declaration	ann dan and marked and antidations
└ f	I have gone through the provisions of the Companies Act, 2013, the rules the ramed thereunder in respect of reservation of name, understood the meaning an conformity thereof.	
r á r t	I have used the search facilities available on the portal of the Ministry of Corporesemblance of the proposed name with the companies and Limited Liability palaready registered or the names already approved. I have also used the search resemblances of the proposed name with registered trademarks and trade mark Trade Marks Act, 1999 and other relevant search for checking the resemblase satisfy myself with the compliance of the provisions of the Act for resemblance	rtnerships (LLPs) respectively facility for checking the k subject of an application under ance of the proposed name to
	*The proposed name is not in violation of the provisions of Emblems and Name Act, 1950 as amended from time to time.	es (Prevention of Improper Use)
	*The proposed name is not offensive to any section of people, e.g. proposed nawords or phrases that are generally considered a slur against an ethnic group,	
	*The proposed name is not such that its use by the company will constitute an being in force.	offence under any law for the time
∪ , ו	I undertake to be fully responsible for the consequences in case the name is sometravention of the provisions of section 4(2) and section 4(4) of the Companionave also gone through and understood the provisions of section 4(5) (ii) (a) and rules thereunder and fully declare myself responsible for the consequences	es Act, 2013 and rules thereto and I ad (b) of the Companies Act, 2013
*		
C th	person named in the articles as a director of the company has been duly author ompany to sign this form and declare that all the requirements of the Companie nereunder in respect of Director Identification Number (DIN), registration of the r incidental thereto have been complied with.	es Act, 2013 and the rules made

	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.
	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 4 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
	*DIN / PAN
_	Declaration and certification by professional
I	, ,
r	member of
Г	having office at *
L	Who is engaged in the formation of the company declare that I have been duly engaged for the purpose of

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;

- (i) the draft memorandum and articles of association have been drawn up in conformity with the provisions of sections 4 and 5 and rules made thereunder; and
- (ii) all the requirements of Companies Act, 2013 and the rules made thereunder relating to registration of the 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;
- (iii) I have opened all the attachments to this form and have verified these to be as per requirements, complete and legible;
- (iv) I further declare that I have personally visited the premises of the proposed registered office given in the form 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).
- (v) It is understood that I shall be liable for action under Section 448 of the Companies Act, 2013 for wrong certification, if any found at any stage.

 Chartered Accountant (in whole- 	-time practice) or	Cost Accountant (ir	n whole-time practic	e) or
Company Secretary (in whole-tin	me practice)	C Advocate		
* Whether Associate or Fellow	○ Associate ○ F	ellow		
* Membership number.				
Certificate of practice number				
For office use only:				
eForm Service request number (SRN	١)	eForm filing date		(DD/MM/YYYY)
This e-Form is hereby registered				
Digital signature of the authorising	g officer			
Date of signing	(DD/MM/YYYY)			