



**NAGDEV & ASSOCIATES**  
PRACTICING COMPANY SECRETARIES

**KARAN H. NAGDEV**

**FCS, LLB, B.COM**

+91 99755 54467 / +91 77000 62333

cskarannagdev@gmail.com

www.nagdevassociates.com

**REQUIREMENT LIST FOR INCORPORATION OF COMPANIES**

| <u>PARTICULARS</u>                  | <u>DETAILS OF DIRECTORS</u> |  |  |
|-------------------------------------|-----------------------------|--|--|
| Name                                |                             |  |  |
| DIN                                 |                             |  |  |
| Mobile No.                          |                             |  |  |
| Email ID                            |                             |  |  |
| Occupation                          |                             |  |  |
| Educational Qualification           |                             |  |  |
| Date of Birth                       |                             |  |  |
| Place of Birth (District and State) |                             |  |  |
| Stay at the present address         |                             |  |  |
| PAN                                 |                             |  |  |
| Aadhar Card Number                  |                             |  |  |



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|                                                                                           |  |  |  |
|-------------------------------------------------------------------------------------------|--|--|--|
| Residential Proof                                                                         |  |  |  |
| Address as per Residence Proof                                                            |  |  |  |
| Photo                                                                                     |  |  |  |
| Shareholding %                                                                            |  |  |  |
| Total Share Capital (Authorised & Paidup)                                                 |  |  |  |
| Contact No. & Email ID of Company                                                         |  |  |  |
| Registered Office of Company (Utility Bill not older than 2 months)<br><b>DRAFT NOC -</b> |  |  |  |
| Name of the bank in which the Bank A/C of the Company will be opened                      |  |  |  |
| <b>DRAFTS – EPFO, DIR 2, DIR 8 &amp; MBP 1</b>                                            |  |  |  |

**\*RESIDENTIAL ADDRESS PROOF – MOBILE BILL/TELEPHONE BILL/ ELECTRICITY BILL/BANK STATEMENT.(NOT OLDER THAN 2 MONTHS)  
FOR ID – DRIVING LICENSE/AADHAR CARD/PASSPORT/ VOTERID CARD**



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**DETAILS OF SHAREHOLDERS IF DIFFERENT FROM DIRECTORS**

| <b>PARTICULARS</b>                                                                                                                           | <b>DETAILS OF SHAREHOLDERS (IF DIFFERENT FROM DIRECTORS)</b> |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|--|--|
| <b>Name</b>                                                                                                                                  |                                                              |  |  |
| <b>DIN</b>                                                                                                                                   |                                                              |  |  |
| <b>Mobile No.</b>                                                                                                                            |                                                              |  |  |
| <b>Email ID</b>                                                                                                                              |                                                              |  |  |
| <b>Occupation</b>                                                                                                                            |                                                              |  |  |
| <b>Educational Qualification</b>                                                                                                             |                                                              |  |  |
| <b>Date of Birth</b>                                                                                                                         |                                                              |  |  |
| <b>Place of Birth (District and State)</b>                                                                                                   |                                                              |  |  |
| <b>No. of years of stay at the present address</b>                                                                                           |                                                              |  |  |
| <b>PAN</b>                                                                                                                                   |                                                              |  |  |
| <b>Aadhar Card Number</b>                                                                                                                    |                                                              |  |  |
| <b>Residential Proof</b><br>- Electricity Bill/<br>- Telephone Bill/<br>- Mobile Bill/<br>- Bank statement<br><b>Not older than 2 months</b> |                                                              |  |  |



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|                                           |  |  |  |
|-------------------------------------------|--|--|--|
| Address as per Residence Proof            |  |  |  |
| Photo                                     |  |  |  |
| Shareholding %                            |  |  |  |
| Total Share Capital (Authorised & Paidup) |  |  |  |