TO BE PRINTED BY Rs 500 STAMP PAPER WITH NOTARY

FORM NO. STK-4

AFFIDAVIT

[Pursuant to sub section (2) of section 248 read with clause (iii) of sub-rule (3) of Rule 4]

1. I, [DIRECTOR NAME], Director of [NAME OF COMPANY], (hereinafter called "the Company"), incorporated on [DATE OF INCORP], under the Companies Act, 2013 having its Registered Office at [ADDRESS] and having CIN No.-____ do solemnly affirm and state as under:

- (i) I, **[DIRECTOR NAME]**, S/o or D/o [NAME OF FATHER OF DIRECTOR] holder of DIN number [], I am Director of the company stated above since [DATE OF APPOINTMENT].
- (ii) My present residential address is [].
- (iii) My permanent address is ∏.
- (iv) The Company does not maintain any current bank account as on date.
- (v) I affirm that the Company **[NAME OF COMPANY]** does not have any assets and liabilities as on date.
- (vi) The Company has been inoperative and has not carried out any business or operation since from last__years and has not made any application for obtaining status of dormant company under section 455.
- (vii) As on date, the Company does not have any dues towards Income Tax / Sales Tax / Central Excise/ Banks and Financial Institutions; any other Central or State Government Departments/Authorities or any Local Authorities.
- 2. I further affirm that -
- (i) No inquiry, technical scrutiny, inspection or investigation is ordered or pending against the company.
- (ii) No prosecution or any compounding application for any offence under the Act or under any of the other Acts is pending against the company or against the undersigned.
- (iii) The company is neither listed nor delisted for non-compliance of listing agreement.
- (iv) The company is not a company incorporated for charitable purposes under section 8 of the Companies Act, 2013 or section 25 of the Companies Act, 1956.
- (v) The company does not have any management disputes or there is no litigation pending regarding management or shareholding of the company.
- (vi) No order is in operation staying filing of the documents by a court or tribunal or any other competent authority.
- (vii) The company is not prevented from making the applications for strike off as mentioned in section 249 of the Act.

I solemnly state that the contents of t knowledge and belief and that it conce		•
	Signature: __	NAME OF DIRECTOR (Deponent)
<u>Verific</u>	ation: -	
I verify that the contents of this affidav and belief.	rit are true to tl	he best of my knowledge
	Signatu	re:
Place:		NAME OF DIRECTOR DIN (Deponent)

TO BE PRINTED BY Rs 500 STAMP PAPER WITH NOTARY

Form No. STK -3

INDEMNITY BOND

[Pursuant to clause (i) of sub-rule (3) of rule 4 of the companies] (Removal of names of companies from the register of companies Rules, 2016)

To, The Registrar of Companies Maharashtra, Mumbai We, the Director(s) of, **[NAME OF COMPANY]**, (hereinafter called "the Company"), incorporated on **DATE OF INCORP** under the Companies Act, 2013 having its Registered Office at [ADDRESS] do hereby declare that:

We,

- 1. [NAME OF DIRECTOR],
- 2. NAME OF DIRECTOR
- 3. NAME OF DIRECTOR

are the Directors of this Company.

- (I) That we have made an affidavit confirming that the company does not have any assets liabilities as on date.
- (II) Further, the Company has been inoperative from the period of more than two immediately preceding financial years and has not made any application for obtaining status of dormant company under section 455. Thus, the Company is defunct and I request the Registrar of Companies, Mumbai to strike off the name of the Company from the Register of Companies under Section 248 of the Companies Act, 2013.

We do hereby undertake to indemnify: -

- (i) The claimants all lawful claims arising in future after the striking off the name of the Company.
- (ii) Any person for any losses that may arise pursuant to striking off the name of the Company.

			fter the name of the Comp on 248 of the companies	
Signatures	5,			
[NAME	OF DIRECTOR],			
NAME	OF DIRECTOR			
Place:		Date:		
WITNESSES	:			
1. Signature: _		2.	Signature:	
Name:				
Father's nan	ne:		Name:	
Address:			Father's name:	
			Address:	
Occupation	1:		Occupation:	

The claimants all lawful claims and liabilities which have not come

(iii)