## FORM NO. DIR-3C

[Pursuant to section 157 of The Companies Act, 2013 & Rule 10A(2) of the Companies (Appointment and Qualification of Directors) Rules, 2014]



Intimate information of directors, managing director, manager and secretary by an Indian company

Note - All fields marked in \* are to be mandatorily filled. Form language English Hindi Refer the instruction kit for filing the form. Pre-fill 1. \*Corporate identity number (CIN) of company 2(a). Name of the company (b). Address of the registered office of the company (c). \*City (e). \*State (d). \*District (f). \*ISO country code (g). \*Pin code 3. \*e-mail ID of the company 5. Number of Members of 4. Authorized capital (in Rupees) the company 6. Paid-up capital (in Rupees) 7(a). Total number of Managing Director, Director(s) as on the date of filing of this form 7(b). Number of (Enter here the total number of managing director, directors for which the Managing Director, form needs to be filed) Director(s)

8. Details of the managing director, director(s) of the company

*Details of the director or managing director of the company						
(a) Director Identification Number (D	Pre-fill					
(b)Full name						
(c) Father's name						
(d) Present Residential Address						
(e) Date of birth	(DD/MM/YYYY)					
(f) Date of approval of DIN by Centra	al Government (DD/MM/YYYY)					
(g) Date of receipt of Form DIN 2/ DIR-3B from the director (DD/MM/YYYY)						
Kindly attach form DIN-2/DIR-3B in	n case details entered above  Attach copy of Form DIN-2/DIR-38	В				
(h) Whether the address is as per the company's records Yes No						
(i) Designation						
<ul><li>(j) Category</li><li>(k) Whether Chairman, Executive Dir</li></ul>	rector, Non-Executive Director					
Chairman Executive	e Director Non-Executive Director					
(I) DIN of the director to whom the ap	ppointee is alternate Pre-fill					
(m) Name of the director to whom the appointee is alternate						
(n)* Name of the company or instituti whose nominee the appointee is	ion					
(o) Date of appointment	(DD/MM/YYYY)					
(p) email ID						

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## 9. Details of the Manager or Secretary of the company

## I. Details of the Manager or Secretary of the company (a) Income-tax permanent account number (PAN) (b) First name (c) Middle name (d) Last name (e) Father's name (e)(i) First name (e)(ii) Middle name (e)(iii) Last name (f) Present residential address (h) District (g) City (j) Country (i)State (k) Pin code (I) Phone (DD/MM/YYYY) (m) Fax (n) Date of birth (r) Designation (DD/MM/YYYY) (o) Date of appointment Full Time Part Time (p) Whether employed full time or part time (q) email ID II Details of the Manager or Secretary of the company (a) Income-tax permanent account number (PAN) (b) First name (c) Middle name (d) Last name (e) Father's name (e)(i) First name (e)(ii) Middle name (e)(iii) Last name (f) Present residential address (g) City (h) District (i) State (j) Country (k) Pin code (I) Phone (DD/MM/YYYY) (m) Fax (n) Date of birth (r) Designation (DD/MM/YYYY) (o) Date of appointment (p) Whether employed full time or part time O Part Time Full Time (q) email ID

## **Attachments** List of attachments 1. Optional attachment(s) - if any Attach Remove attachment Verification To the best of my knowledge and belief, the information given in this form is correct and complete. I have been authorized by the board of directors' resolution dated (DD/MM/YYYY) to sign and submit this form. It is hereby confirmed that the appointed director(s) whose particulars are given above, has given declaration to the company that he/she is not restrained/ disqualified/ removed of, for being appointed as Director of a company under the provisions of the Companies Act, 2013 including Section 164 of the said Act. It is also confirmed that the appointed director(s) whose particulars are given above, has given a declaration to the company that he/she has not been declared as proclaimed offender by any Economic Offence Court or Judicial Magistrate Court or High Court or any other Court. To be digitally signed by Managing director or director or manager of the company \* Designation Director identification number of the director Certification It is hereby certified that I have verified the above particulars from the records of M/s and found them to be true and correct. To be digitally signed by Company Secretary in whole-time practice or the Company Secretary in full-time employment of the company Designation Membership number of the secretary Modify Check Form Prescrutiny Submit

For office use only:				
eForm Service request number (SRN)		eForm filing date		(DD/MM/YYYY)
Digital signature of the authorising	officer			_
This e-Form is hereby approved			_	
This e-Form is hereby rejected		Confirm submission	on	
Date of signing		DD/MM/YYYY)		