## FORM NO. DIR-6

[Pursuant to rule 12 (1) of the Companies (Appointment and Qualification of Directors) Rules, 2014]

13. Aadhaar number

14. Mobile \*15. Email ID



Intimation of change in particulars of Director to be given to the Central Government

Form Language 💿 English	) Hindi	
cases even if there is no chang should be as per Income-tax P	mandatorily filled. come-tax Permanent Account Name (Inco ge in Income-tax PAN. In such cases, di AN. In case the details as per Income-ta to first correct the details in Income-tax	rector details x PAN are incorrect, director/
1.(a) * Director Identification Num	nber (DIN)	Pre-fill
(b) Name		
2. *Type of change:		
Director's Name	Father's name	Nationality
Date of birth	Gender	Income-tax PAN
Voters Identity card numbe	er Passport number	Driving license number
Email ID/ Mobile	Permanent residential addre	ess Present residential address
Photograph of Director	Residential Status	
Aadhaar number		
Enter information that needs to be	e corrected. Enter only the relevant field(s)	
3. Director's name (Enter full nam	ne and do not use abbreviations)	
(a) First name		Photograph
(b) Last name		
(c) Middle name		
4. Father's name (Enter full name	e and do not use abbreviations)	
(a) First name		
(b) Last name		(Attach a latest passport
(c) Middle name		size photograph by clicking on above box)(Refer
5. Whether a citizen of India		instruction kit for details)
6. Nationality		Remove Photograph
6A. Whether resident in India	◯ Yes ◯ No	
7. Date of birth	(DD/MM/YYYY)	
8. Gender O Male	○ Female ○ Transgender	
9. Income tax PAN	Verify Income	e-tax PAN details
10. Voter's identity card number	11. Pa	assport number
12. Driving license number		

## 16. Permanent residential address

Line I						
Line II						
City						
State					Pin code	
ISO country code		Phone			Fax	
Country						
<ul> <li>17. Whether present residential address is same as permanent residential address</li> <li>18. Present residential address</li> </ul>						
Line I						
Line II						
City						
State					Pin code	
ISO country code		Phone			Fax	
Country						
					List C	Of Attachments
Attachments :					_	
1. *Proof of change	in particulars;			Attach		
2 Optional attachm	ents, if any.			Attach		
					Remo	ove Attachment

## **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.

(i) The photograph and documents being attached to the Form DIR-6 belong to me. I further confirm that all required documents have been duly certified by the respective government authority and are being attached to the Form DIR-6 and

(ii) I am not restrained, disqualified, removed of, for being appointed as director of a company under the provisions of the Companies Act, 2013 including sections 164 and 169, and

(iii) I have not been declared as proclaimed offender by any Economic Offence Court or Judicial Magistrate Court or High Court or any other Court, and

(iv) I have no other allotted DIN other than DIN in which changes are intimated under section 154 of the Companies Act, 2013 or a Designated Partner Identification Number under section 7 of the Limited Liability Partnership Act, 2008.

(v) I shall be liable under section 448 of the Act and under relevant provisions of the Indian Penal Code, 1860 and any other law as applicable, if any statement in this application is found to be false or any material fact is found to be have been omitted.

\*To be digitally signed by Applicant

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## **Certification**

I declare that I have been duly engaged for the purpose of certification/verification of this form. It is hereby certified that
I have satisfied myself about the identity of the applicant based on the perusal of the original of the attached document
Note: In case where the applicant is residing outside India the particulars have to be verified from the documents duly attested by the attesting authority as prescribed.
I also verify having attested the photograph of the said person:
(i) who is personally known to me; or
(ii) who meet me in person along with the original of the attested documents
* All required attachments have been completely attached to this application
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 records maintained by the Company/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 ;
* All the required attachments have been completely and legibly attached to this form;
* I have kept a copy of this form and attachments thereto, in my records for future reference.
* 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.
*To be digitally signed by
*Category
*Whether Associate or Fellow
*Membership Number
*Certificate of Practice number
Modify Check Form Prescrutiny Submit
Note: Attention is also drawn to provisions of Section 448 and 449 which provide for punishment for false statement /certification and punishment for false evidence respectively.
For office use only:
eForm Service request number (SRN) eForm filing date (DD/MM/YYY
Digital signature of the authorising officer
This e-Form is hereby approved

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

OR

This eForm has been taken on file maintained by registrar of companies through electronic mode and on the basis of statement of correctness given by the company.