

FORM NO. INC-7

[Pursuant to Section 7(1) of the Companies Act, 2013 and pursuant to Rule 10, 12, 14 and 15 of the Companies (Incorporation) Rules 2014]



Application for Incorporation of Company
(Other than OPC)

Form language ☒ English ☐ Hindi

Refer the instruction kit for filing the form.

1.*Service Request Number (SRN) of Form INC-1

Pre-fill

2. (a) Name of the company

(b) Type of Company is

(c) Class of Company

(d) Category

(e) Sub Category

(f) Section 8 license number

* (g) Company is

☐

Having share capital

☐

Not having share capital

3. (a) Name of the state/Union territory in which the company is to be registered

(b) Name of the office of the Registrar of Companies in which the company is to be registered

(c) *Whether the address for correspondence will be the address of Registered office of the Company

☐ Yes

☐ No

(d) Address for correspondence till the registered office of the company is established

* Line I	<input type="text"/>		
Line II	<input type="text"/>		
* City	<input type="text"/>		
* State/Union Territory	<input type="text"/>		
* District	<input type="text"/>	* Pin code	<input type="text"/>
ISO Country code	<input type="text"/>		
Country	<input type="text"/>		
* Phone(With STD/ISD code)	<input type="text"/>	-	<input type="text"/>
Fax	<input type="text"/>		
*email id of the company	<input type="text"/>		

4. I.*Capital structure of the company

(a) Authorized capital of the company (in Rs.)

(i) No. of classes of equity shares

Total number of equity shares

Total amount of equity shares (in Rs.)

Number of equity shares	Nominal amount per equity share	Total amount of equity shares
<input type="text"/>	<input type="text"/>	<input type="text"/>

(ii) No. of classes of Preference shares

Total number of Preference shares

Total amount of Preference shares(in Rs.)

Number of Preference shares	Nominal amount per Preference share	Total amount of Preference shares
<input type="text"/>	<input type="text"/>	<input type="text"/>

(b) Subscribed capital of the company (in Rs.)

(i) No. of classes of equity shares Total number of equity shares

Total amount of equity shares(in Rs.)

Number of equity shares	Nominal amount per equity share	Total amount of equity shares
<input type="text"/>	<input type="text"/>	<input type="text"/>

(ii) No. of classes of Preference shares Total number of Preference shares

Total amount of Preference shares(in Rs.)

Number of Preference shares	Nominal amount per Preference share	Total amount of Preference shares
<input type="text"/>	<input type="text"/>	<input type="text"/>

5. * Main division of industrial activity of the company

Description of the main division

6. * (a) Whether the proposed company shall be conducting any non – banking financial and investment (NBFI) activities within the meaning of section 45-I of the Reserve Bank of India Act, 1934

☐ Yes ☐ No

7. * Enter the number of promoters (first subscribers to the Memorandum of Association (MOA))

Particulars of Promoters (first subscribers to the MOA)

I * Category

* Director Identification number(DIN) or Income - tax permanent account number (Income - tax PAN) or passport number or corporate identity number(CIN) or foreign company registration number(FCRN) or any other registration number

Pre-fill

Verify details

* First Name

Middle Name

* Surname

Family Name

* ☐ Father's Name ☐ Mother's Name ☐ Spouse's Name

* Nationality

* Date of Birth

* Gender ☐ Male ☐ Female ☐ Transgender

* Place of birth (District and State)

* Occupation type

* Area of occupation

* Educational qualification

* Name of the entity

Income tax permanent Account Number (PAN)

Permanent Address/Registered Office address /Principal place of business

* Line I

Line II

* City

* State/Union Territory * Pin code

* ISO Country code

Country

* Phone(With STD/ISD code) - Fax

Mobile

* email id

* Whether present address is same as the permanent address ☐ Yes ☐ No
Present Address

* Line I

Line II

* City

* State/Union Territory

* ISO Country code * Pin code

Country

* Phone(With STD/ISD code) -

Mobile

Fax

* Duration of stay at present address Years Months
If Duration of stay at present address is less than one year then address of previous residence

* Proof of identity * Residential proof

If already a director or promoter of a company(s), specify details of such company(s) (In case director or promoter in more than three companies, attach separate sheet as an optional attachment)

Director <input type="checkbox"/>	Promoter <input type="checkbox"/>	CIN <input type="text"/>
Name of the company <input type="text"/>		
Director <input type="checkbox"/>	Promoter <input type="checkbox"/>	CIN <input type="text"/>
Name of the company <input type="text"/>		
Director <input type="checkbox"/>	Promoter <input type="checkbox"/>	CIN <input type="text"/>
		<input type="button" value="Pre-fill all"/>
Name of the company <input type="text"/>		

* Number of shares subscribed * Total amount of shares subscribed(in Rs.)

* Particulars of authorised person

(a) Name of the authorised person

(b) ☐ Father's name ☐ Mother's name ☐ Spouse's name

(c) Gender ☐ Male ☐ Female ☐ Transgender

(d) Nationality (e) Date of Birth

(f) Phone (With STD/ISD code) -

(g) email ID

8. * (a) Whether the Articles are entrenched or not ☐ Yes ☐ No

(If yes, entrenches Articles should be annexed thereto)

(b) Number of Articles to which provisions of entrenchment shall be applicable

Details of Articles to which provisions of entrenchment shall be applicable

Sr. No.	Article Number	Content

9. Particulars of payment of stamp duty (Refer instruction kit for details before filling the particulars)

(a) State or Union territory in respect of which stamp

duty is paid or to be paid

Pre-fill

(b) * Whether stamp duty is to be paid electronically through MCA21 system

☐ Yes

☐ No

☐ Not applicable

(i) Details of stamp duty to be paid

Type of document/ Particulars	Form INC-7	Memorandum of association	Articles of association
Amount of stamp duty to be paid (in Rs.)	0.00	0.00	0.00

(ii) Provide details of stamp duty already paid

Type of document/ Particulars	Form INC-7	Memorandum of association	Articles of association	Others
Total amount of stamp duty paid				
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				

Attachments

List of attachments

1)* Memorandum of association

Attach

2)* Articles of association

Attach

3)* Declaration in Form No. INC-8

Attach

4)* Affidavit from each of the subscriber to the memorandum in Form No.INC-9

Attach

5)* Proof of residential address

Attach

Remove attachment

6) Specimen Signature in Form No. INC-10

Attach

9) * Copy of In-principle approval granted by the RBI or any concerned authority.

Attach

10) NOC in case there is change in the promoters (first subscribers to Memorandum of Association)

Attach

15) Optional attachment, if any

Attach

Declaration

I *

a person named in the articles as a director declare that all the requirements of The Companies Act, 2013 and the rules made thereunder in respect to the registration of the company and matters precedent or incidental thereto have been complied with. I am authorized by other promoters subscribing to the Memorandum of Association and Articles of Association and the first directors to give this declaration and to sign and submit this Form. It is further declared and verified that:

1. Whatever is stated in this form and in the attachments thereto is true, correct and complete and no information material to the subject matter of this form has been suppressed or concealed and is as per the original records maintained by the promoters subscribing to the Memorandum of Association and Articles of Association.

2. All the required attachments have been completely and legibly attached to this form;

3. , a/an

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.

* To be digitally signed by

Designation

* Director Identification Number

Note: Attention is drawn to provisions of section 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.

Modify

Check Form

Prescrutiny

Submit

For office use only:

Affix eStamp and filing details

eForm Service request number (SRN)

eForm filing date (DD/MM/YYYY)

This e-Form is hereby registered

Digital signature of the authorizing officer

Date of signing

(DD/MM/YYYY)

Confirm submission
