## FORM NO. SH.9

[Pursuant to section 68(6) of the Companies Act, 2013 and Rule 17(3) of the Companies (Share Capital & Debentures) Rules, 2014]



## **Declaration of Solvency**

Form language o English o Hindi Refer the instruction kit for filing the form. 1.(a) \*Corporate identity number (CIN) of the company Pre-fill (b) Global location number (GLN) of the company 2.(a) Name of the company (b) Address of registered office of the company (c) email Id of the company 3. (a) \*Whether the company is listed  $\bigcirc$ Yes  $\bigcirc$ No (b) Name of the stock exchange(s) (c) Date of listing(s) (d) Name of the merchant banker appointed 4.(a) \*Date of Board of Directors' resolution authorizing the buy-back of securities (b) (i) Date of special resolution of members authorizing the buy-back of securities (ii) Service request number of Form no. MGT.14 (iii) Date of filling form MGT.14 **Attachments** Attach (1) \*Copy of board resolution Attach (2) \*Statement of assets and liabilities (3) \*Auditor's report Attach (4) \*Affidavit as per rule 17(3) Attach (5) Copy of Special Resolution Attach (6) Optional Attachments , if any Attach

Declaration
We solemnly declare that we have made a full enquiry into the affairs of the company including the assets
and liabilities of this company and have noted that the shareholders by a special resolution dated
And/or the resolution passed by the Board at its meeting held on* have approved the buy-
back of* (in numbers)
(in words) shares or
other specified securities as per the provisions of section 68 of the Companies Act, 2013.
Verified this day the* day of *
To be digitally signed by two directors, one of whom shall be the Managing director (if any)
*Designation (Drop down) DSC Box
(Values: Director, Managing Director)
*DIN
*Designation DSC Box Director *DIN
Note: Attention is drawn to provisions of Section 448 and 449 which provide for punishment for
false statement / certificate and punishment for false evidence respective
Modify Check Form Prescrutiny Submit
For office use only:  Affix filing details
eForm Service request number (SRN) eForm filing date (DD/MM/YYYY
This e-Form is hereby registered
Digital signature of the authorising officer Confirm submission
Date of signing (DD/MM/YYYY)