

Form No. MGT-6



Form language

☒ English

☐ Hindi

Return to the Registrar in respect of declaration under section 89 received by the company

[Pursuant to section 89(6) of The Companies Act, 2013 and pursuant to rule 9(3) of The Companies (Management and Administration) Rules, 2014]

Refer instruction kit for filing the form

*All fields marked in * are mandatory*

Company Information

1 *Corporate Identity Number (CIN)

1(a) *Name of the Company

(b) *Registered office address

(c) *email id

2 *Number of Registered Owners for whom the form is being filed

3 Particulars of shares in respect of which the person whose name is entered in the register of members of the company as a holder of shares does not hold the beneficial interest in such shares

(a) *Number of Shares

(b) Distinctive Number of Shares (From)

*Distinctive Number of Share (To)

(c) *Type of shares

*Class of shares

(d) *Face value of shares

(e) *Paid up value of shares

4 Particulars of the person in whose name the above shares have been registered as holders in the register of members

(a) *Income Tax PAN / Passport Number/ Other Registration Number

☐

Income Tax PAN

☐

Passport Number

☐

Other Registration Number

*Enter Income Tax PAN / Passport Number/ Other Registration Number

(b) *Name of registered owner

(c) *Date of Birth / Date of incorporation (DD/MM/YYYY)

(Note: In case DOB/Date of incorporation is not available, date can be entered as 1 January 1980)

(d) *Nationality / Country of Incorporation

(e) *Mobile number

(f) *Email Id

(g) Address

*Address Line 1

Address Line 2

(h) *Country

(i) *Pin Code/Zip code

(j) *Area/Locality

(k) *City

(l) *District

(m) *State/UT

(n) *Father's Name/Husband's Name

☐ Father's Name ☐ Husband's Name

First Name

Middle Name

Last Name

(o) Name of the authorised person

(p) *Date of entry of name in register (DD/MM/YYYY)

(q) *Date of declaration (DD/MM/YYYY)

(r) *Date of receipt of declaration by the company (DD/MM/YYYY)

5 Particulars of the person who holds a beneficial interest in such shares

(a) *Whether BO ID is available?

☐ Yes

☐ No

(b) ID of Beneficial Owner

(c) *Income Tax PAN / Passport

☐ Income Tax PAN

☐ Passport Number

Verify Income tax PAN

*Enter Income Tax PAN / Passport Number

(d) *Name of the beneficial owner

(i) First Name

(ii) Middle Name

(iii) Last Name

(e) *Date of Birth (DD/MM/YYYY)

(f) *Nationality

(g) *Mobile number

(h) *Email Id

(i) Address

*Address Line 1

Address Line 2

(j) *Country

(k) *Pin Code/Zip code

(l) *Area/Locality

(m) *City

(n) District

(o) *State/UT

(p) *Father's Name/Husband's Name

☐ Father's Name

☐ Husband's Name

First Name

Middle Name

Last Name

(q) *Date of declaration (DD/MM/YYYY)

(r) *Date of receipt of declaration by the company (DD/MM/YYYY)

Attachments

(a) *Declaration by person referred to in section 89(1)

Choose File

Remove

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(b) *Declaration by person referred to in section 89(2) or 89(3)

Choose File

Remove

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(c) Optional attachment(s)- if any

Choose File

Remove

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Declaration

To the best of my knowledge and belief, the information given in this form and attachments is correct and complete. I have been authorised by board of directors' resolution dated * (DD/MM/YYYY) to sign and submit this form.

*To be digitally signed by

DSC BOX

*Designation

(Director/Manager/CFO/ CEO/ Company Secretary)

*Director identification number of the director; or DIN or PAN of the manager or CEO or CFO; or Membership number of the Company secretary

Save

Submit

Note: Attention is drawn to provisions of Section 448 and 449 of the Companies Act, 2013 which provide for punishment for false statement/ certificate and punishment for false evidence respectively.

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

For office use only:

eForm Service request number (SRN)

eForm filing date (DD/MM/YYYY)