

# FORM NO.SH-9

## Declaration of Solvency

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

Form language  English  Hindi

Refer the instruction kit for filing the form.

1. (a) \* Corporate identity number (CIN) of the company

(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  Yes  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

- (1) \* Copy of board resolution
- (2) \* Statement of assets and liabilities
- (3) \* Auditor's report
- (4) \* Affidavit as per rule 17 (3)
- (6) Optional Attachments , if any

### List of attachments

**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 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	<input type="text"/>	<input type="text"/>
* DIN	<input type="text"/>	
* Designation Director	<input type="text"/>	<input type="text"/>
* DIN	<input type="text"/>	

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Notes: Attention is drawn to provisions of Section 448 and 449 which provide for punishment for false statement / certificate and punishment for false evidence respectively.

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**For office use only:**

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)