

**Form NDH-1**

**Return of Statutory Compliances**

*[Pursuant to sub rule (2) of rule 5 of Nidhi Rules, 2014)*

1. Corporate Identification Number (CIN) of *Nidhi* :

2. (a) Name of the *Nidhi*:

(b) Address of the registered office :

(c) E-mail id, if any:

(d) Phone Number:

3. (a) Number of subscribers to the  
Memorandum

(b) Number of members admitted  
since date of incorporation upto the  
end of the first financial year

(c) Number of persons who have  
ceased to be members upto the end  
of the first financial year

(d) Number of members as at the end  
of the first financial year

4. Whether the number of members as at  
the end of the first financial year is

200 or more                      Yes

    No

5. If answer to Sl. No. 4 is No, whether  
application for extension of time has

been made to Registrar     Yes

No

If yes, SRN of the application

6. Paid up equity share capital

Free reserves

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Less: Accumulated Losses  
Other intangible assets  
( give breakup)

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**Net Owned Funds**

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## 7. Unencumbered Term Deposits

(See rule 14)

(a) (i) deposit(s) in scheduled commercial  
Banks(in Rs)

(ii) Deposits in Post Office(in Rs)

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Total unencumbered term deposits

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(b) deposits outstanding at the close of  
business on the last working day of the  
second preceding month:

(c) Percentage of (a)/(b):

8. Ratio of Net Owned Funds to Deposits:

### **Verification**

I am authorised by the Board of Directors of the Company vide resolution no..... dated..... to sign this form and declare that all the requirements of Companies Act, 2013 (18 of 2013) and the rules made thereunder in respect of the subject matter of this form and matters incidental thereto have been complied with. I also declare that all the information given herein above is true, correct and complete including the attachments to this form and nothing material has been suppressed. It is hereby further certified that the professional ( Name and Type i.e. C.A/CS/CWA/ to Given) certifying this form has been duly engaged for this purpose.

**To be digitally signed by**

Designation (to be given)

DIN of the person signing the form

**Certificate by practicing professional**

I declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through the provisions of the Companies Act, 2013 (18 of 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 (name of Nidhi) 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;

- a. The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 (18 of 2013) and were found to be in order;
- b. All the required attachments have been completely and legibly attached to this form;

Signature

Chartered Accountant/Cost Accountant/Company Secretary in practice  
whether Associate or Fellow

Membership No. and also CP No.

Note:

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 filing company. Attention is also drawn to provisions of section 448 of the Act which provide for punishment for false statement and certification.