### Form NDH-2

# **Application for extension of Time**

(Pursuant to sub-rule (3) of rule 5 of Nidhi Rules, 2014)

The Regional Director
Ministry of Corporate Affairs,
(respective jurisdiction)

- 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. Date of Incorporation:
- Application filed for: extension of time for complying with rule 5(1)(a)
  5(1)(d)
- 5. Position as at the end of the previous financial year (based on audited financial statement)
  - (a) Number of members
  - (b) Ratio of Net Owned Funds to Deposits

6. Period for which extension is sought for complying with the requirement of

- (a) Rule 5(1)(a) or
- (b) Rule 5(1)(d) or
- (c) Both (a) & (b) above
- 7. Reasons for not complying with the requirements of rule 5(1)(a) and/or rule 5(1)(d)
- 8. Details of application(in brief)

( Box to be provided)

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#### Verification

I am authorized 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.

## To be digitally signed by

Designation (to be given)

DIN of the person signing the form

### Attachments:

- 1.Board resolution
- 2. Detailed application
- 3. Audited financial statements (last available)
- 4. Reasons and justification for the application

### Note:

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

For office use only: E-form Service Request N	umber (SRN) E-form
filing date	
Digital signature of the authorising officer	
This e-form is hereby approved/rejected	
Date of signing	