

# FORM NO. 5

Notice of consolidation, division, etc. or increase in share capital or increase in number of members

[Pursuant to sections 95, 97 or 94A(2) or 81(4) of the Companies Act, 1956]

Form Language ☐ English ☐ हिन्दी

**Note - All fields marked in \* are to be mandatorily filled.**

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

(b) Global location number (GLN) of company

2.(a) Name of the company

(b) Address of the  
registered office  
of the company

(c) \* e-mail ID of the company

3. \* Purpose of the form

- ☐ Increase in share capital independently by company ☐ Increase in number of members  
☐ Increase in share capital with Central Government order ☐ Consolidation or division etc.

4. In accordance with section 97 of the Companies Act, 1956, that by ☐ Ordinary ☐ Special resolution at

the meeting of the members of the company held on  (DD/MM/YYYY)

Service request number (SRN) of related Form 23

(a) The authorised share capital of the company has been increased from

Existing (in Rs.)

Revised (in Rs.)

Difference (addition) (in Rs.)

(b) (i) The number of members in the company has been increased from

Existing

Revised

Difference (additional)

(ii) Maximum number of members excluding past and present employee(s)

5.(a) In accordance with sub-section (3) of section 94(A) of the Companies Act, 1956, the authorised share

capital of the company has been increased consequent upon an order dated  (DD/MM/YYYY)

of the Central Government under sub-section (4) of section 81 or sub-section (2) of section 94A of the Act upon  
an application made to it by (Enter the name of the financial institution)

for conversion of ☐ debentures ☐ loans into shares

Existing authorised capital (in Rs.)

Revised authorised capital (in Rs.)

Difference (addition) (in Rs.)

(b) A copy of the aforesaid order was received by the company from the Central Government on

(DD/MM/YYYY)

6. The additional capital (taking into consideration the addition above) is divided as follows

(a) Number of equity shares  Total amount of equity shares (in Rs.)

(b) Number of preference shares  Total amount of preference shares

(in Rs.)

Total addition (in Rs.)

7. The conditions (e.g. voting rights, dividend rights, winding-up rights, etc.) subject to which new shares have been issued, are as follows

8. Notice is hereby given that

In accordance with section 95 of the Companies Act, 1956, that the company has on  (DD/MM/YYYY)

(a) ☐ Consolidated

(b) ☐ Converted

(c) ☐ Reconverted

(d) ☐ Subdivided

(e) ☐ Redeemed

(f) ☐ Cancelled

(g) ☐ Reclassified

9. Revised capital structure after taking into consideration the changes vide points 4, 5, 6 and 8 above

(a) Authorised capital of the company (in Rs.)

Break up of Authorised capital

Number of equity shares

Total amount of equity shares (in Rs.)

Nominal amount per equity share

Number of preference shares

Total amount of preference shares  
(in Rs.)

Nominal amount per preference share

Number of unclassified shares

Total amount of unclassified shares  
(inRs.)

(b) Issued capital of the company

(in Rs.)

Break up of Issued capital

Number of equity shares

Total amount of equity shares (in Rs.)  
(in Rs.)

Nominal amount per equity share

Number of preference shares

Total amount of preference shares

Nominal amount per preference share

(c) Subscribed capital of the company

( in Rs.)

Break up of Subscribed capital

Number of equity shares

Total amount of equity shares (in Rs.)

Nominal amount per equity share

Number of preference shares

Total amount of preference shares  
(in Rs.)

Nominal amount per preference share

(d) Paid up capital of the company (in Rs.)

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### Break up of Paid up capital

Number of equity shares

\_\_\_\_\_

Total amount of equity shares (in Rs.)

\_\_\_\_\_

Nominal amount per equity share

[illegible]

Number of preference shares

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Total amount of preference shares

(in Rs.)

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Nominal amount per preference share

(in RS.)

10. \* Whether articles of association have been altered ☐ Yes ☐ No

○

Yes

C

No

**11. Particulars of payment of stamp duty (Refer instruction kit for details before filling the particulars)**

(a) State or Union territory in respect of which stamp duty is paid or to be paid

\_\_\_\_\_

(b)\* Whether stamp duty is to be paid electronically through MCA21 system

C

Yes

C

No

C

Not applicable

(i) Details of stamp duty to be paid

Amount of stamp duty to be paid

(in Rs.)

\_\_\_\_\_

(ii) Provide details of stamp duty already paid

Type of document/Particulars	Form 5
Total amount of stamps or stamp paper (in Rs.)	<input type="text"/>
Mode of payment of stamp duty	<input type="text"/>
Name of vendor or Treasury or Authority or any other Competent agency authorised to collect stamp duty or to sell stamp papers or to emboss the documents or to dispense stamp vouchers on behalf of the Government	
Serial number of embossing or stamps or stamp paper or treasury challan number	
Registration number of vendor	
Date of purchase of stamps or stamp paper or payment of stamp duty	<input type="text"/> (DD/MM/YYYY)
Place of purchase of stamps or stamp paper or payment of stamp duty	

12. In case maximum stamp duty payable has already been paid, provide details of form(s) filled earlier (SRN or receipt number, form number, date of filling, amount of stamp duty paid)

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**Attachments**

List of attachments

1. Proof of receipt of Central Government order
2. Altered memorandum of association
3. Altered articles of association
4. Optional attachment(s) - if any

**Verification**

To the best of my knowledge and belief, the information given in this form and its attachments is correct and complete.

I have been authorised by the Board of directors' resolution number \*  dated \*  (DD/MM/YYYY) to sign and submit this form.

I further declare that the company has paid correct stamp duty as per applicable Stamp Act.

**To be digitally signed by**

Managing director or director or manager or secretary of the company

\* Designation

\* Director identification number of the director or Managing Director; or Income-tax permanent account number(Income-tax PAN) of the manager; or Membership number, if applicable or income-tax PAN of the secretary (secretary of a company who is not a member of ICSI, may quote his/ her income-tax PAN)

**Certificate**

It is hereby certified that I have verified the above particulars (including attachment(s)) from the records of

and found them to be true and correct. I further certify that all required attachment(s) have been completely attached to this form.

- ☐ Chartered accountant (in whole-time practice) or ☐ Cost accountant (in whole-time practice) or ☐ Company secretary (in whole-time practice)

\* Whether associate or fellow ☐ Associate ☐ Fellow

\* Membership number or certificate of practice number

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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 authorising officer**

Date of signing

(DD/MM/YYYY)