**FORM P6**

**DECLARATION BY DIRECTOR/PARTNERS**

(Under regulation 16(1) of the Insolvency and Bankruptcy Board of India (Pre-packaged Insolvency Resolution Process) Regulations, 2021)

[Date]

To

The Adjudicating Authority

[ \_\_\_\_\_\_\_\_ Bench]

**Subject: Declaration for initiating pre-packaged insolvency resolution process in respect of *[name of corporate debtor]*.**

We,-

|  |  |  |  |
| --- | --- | --- | --- |
| **Sl. No.** | **Name and Designation** | **Director Identification Number** | **Address** |
| **I** | **II** | **III** | **IV** |
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representing majority among the directors/partners of the [name of the corporate debtor] “Corporate Debtor”) having [*Identification Number*] and having registered office at *[Address]*, declare and affirm as under:-

1. The corporate debtor shall file an application for initiating pre-packaged insolvency resolution process within [insert number of days].
2. The pre-packaged insolvency resolution process is not being initiated to defraud any person.;
3. The creditors have approved the name of [name of insolvency professional], having registration number [registration number], in the meeting of creditors convened under clause (e) of sub-section (2) of section 54A read with regulation 8 of the Insolvency and Bankruptcy Board of India (Pre-packaged Insolvency Resolution Process) Regulations, 2021, held on [date of meeting].
4. The details of the corporate debtor

|  |  |  |
| --- | --- | --- |
| **Sl. No.** | **Title** | **Details** |
| **I** | **II** | **III** |
|  | Name of the corporate debtor |  |
|  | Registered address of the corporate debtor |  |
|  | Date of incorporation of the corporate debtor |  |
|  | Estimated date for filing the application with adjudicating authority for initiating pre-packaged insolvency resolution process  |  |

1. The contents of this declaration are true and correct and that we have concealed nothing and that no part of it is false.

|  |  |
| --- | --- |
| Date: Place:  | (Signature of the Director/Partner) (Name in block letters)DIN-\_\_\_\_\_\_\_\_\_Address:\_\_\_\_\_\_\_\_\_ |
| Date: Place:  | (Signature of the Director/Partner) (Name in block letters)DIN-\_\_\_\_\_\_\_\_\_Address:\_\_\_\_\_\_\_\_\_ |

*(To be signed by all the directors/partners mentioned in Point-1)*