

Form - Change Company Name

:: Contact Person Details ::

Name *	<input type="text"/>
Address *	<input type="text"/>
Email *	<input type="text"/>
Phone No *	<input type="text"/>

DIRECTOR / PROMOTERS DETAILS

Director/Promoter Name *	<input type="text"/>
DIN No	<input type="text"/>
Mobile Number *	<input type="text"/>
E-Mail Id *	<input type="text"/>

COMPANY DETAILS

Company Name *	<input type="text"/>
Company CIN No *	<input type="text"/>
Incorporation Certificate *	<input type="text" value="Browse... No file selected."/>
Company Pan No	<input type="text"/>
Registred Office Full Address with Pin No *	<input type="text"/>

MOA Login Id	<input type="text"/>
MOA Login Password	<input type="password"/>

PROPOSED COMPANY DETAILS

Proposed Company Name *	<input type="text"/>
Proposed Company Address *	<input type="text"/>
Address Proof * (Attached Latest Original Electricity Bill)	<input type="button" value="Browse..."/> No file selected.

SPONSORED INFORMATION AND FINAL SUBMISSION

Sponsored Name *	<input type="radio"/> Yes <input type="radio"/> No
If Yes, Give the Sponsored Username	<input type="text"/>