GOVERNMENT OF RAJASTHAN
Industries (Group-2) Department

No. F.2(11)Ind/Gr.-2/2016 **Date: 31.10.2017**

NOTIFICATION

In exercise of the powers conferred by section 71 of the Indian Partnership Act, 1932 (Central Act No. 9 of 1932), the State Government hereby makes the following rules, namely:-

1. Short title and commencement.- These rules may be called The Rajasthan Partnership Rules, 2017.

(2) They shall come into force from the date of their publication in the Official Gazette.

2. Definitions.- In these rules, unless there is anything repugnant to the subject or context,-

(a) "Act" means the Indian Partnership Act, 1932 (Central Act No. 9 of 1932);
(b) "Firm" means a body of persons consisting of two or more partners, to which the Act applies;
(c) "Form" means Form appended to these rules;
(d) "Section" means a section of the Act;
(e) "Document" includes statements, intimations and notice specified in these rules; and
(f) "Registrar" means the Registrar of Firms appointed under section 57 of the Act.

3. Form of Statement.- (1) The statement required to be sent or delivered to the Registrar under section 58 shall be filed online in Form-A appended to these rules and shall be witnessed in the manner specified therein.

(2) On receipt of Form-A along with the fee, e-Signed certificate in the format given below shall be generated and same may be downloaded by applicant using his/her login credentials.

सत्यमेव जयते

Government of Rajasthan

In the Office of the Registrar of Firms
District Industries Centre- .....

CERTIFICATE OF REGISTRATION

Reg.No.- ..... Date .....

In the matter of M/s.

.....
.....

I hereby certify that the under mentioned document has been filed and registered pursuant to the provisions of the Indian Partnership Act, 1932:-

FORM 'A' UNDER SECTION 58 OF THE INDIAN PARTNERSHIP ACT, 1932

Received fees 300/- INR only

Registrar of Firms,
District Industries Centre- .....

Note:-
For future correspondence the above registration number should be mentioned invariably otherwise no action will be possible.
This is registration of only partnership not of the business/ activity.
Registrar of Firms will not be liable for any damages, losses or disputes arising between/ among the partners.

4. Forms for intimation and notices.- Statements, intimations and notices required under sections 60, 61, 62 and 63 shall be uploaded electronically in Form-B, Form-C, Form-D, Form-E or Form-F, as the case may be, respectively, within ninety days from the date of making such amendment, accompanied by the fee, specifying the amendments and signed and verified in the manner specified in the relevant Form:

Provided that Intimations and notices for amendments in firms registered prior to commencement of these rules shall be submitted and recorded offline.

5. Examination of documents received by the Registrar.- If any document required to be delivered to the registrar for registration is found to be incomplete or defective, the Registrar shall intimate the objections online and he shall not register or file it until all the requirements of the law have been complied with. When the provisions in respect thereof have been duly compiled with, he shall approve an entry of the document in the register.

6. Acknowledgement and registration of documents.- (1) On receipt of each document or intimation filed under the Act, the Registrar shall endorse the following particulars, namely:-

(i) Registration number of the firm;
(ii) Name of the firm;
(iii) Descriptions of the documents;
(iv) Serial number of the documents; and
(v) Date of receipt of document

(2) On filing of any documents along with the fee, a e-Signed acknowledgement shall be generated and same may be downloaded by applicant using his/her login credentials.

7. Register of Firms.- The Registrar shall maintain a Register of Firms in which following particulars shall be entered, a separate page being assigned to each firm:-

(a) Name of firm;
(b) Place or principle place of business of the firm;
(c) Date of Registration;
(d) Serial number of document filed;
(e) Description of document;
(f) By whom filed, when and to whom certificate granted; and
(g) Entry of amendment along with details:
    (i) By whom amendment filed,
    (ii) when and to whom amended certificate is granted.

8. Index to the register.- The Registrar shall maintain an alphabetical index to the Register showing the number, name and address of each firm.

9. Procedure on dispute.- If any person wishes to dispute any entry in the register, such person shall give online notice to the Registrar, that he disputes the said entry and the Registrar shall make a remark to this effect at

the end of the then existing entries and shall also make a remark in the remarks columns against the entry so disputed. The Registrar of Firms shall not be liable for any kind of loss/damages/disputes arising between/among the partners.

10. Enquires and investigations by the Registrar.- The Registrar may in his discretion institute such enquires or make such investigation in respect of any matter as may in his opinion be necessary for the proper performance of his duties and the administrations of the Act.

11. Conditions of inspections.- The record of firm registration shall be open to inspection on applying online and payment of specified fee. The record of the firm registration shall be open to inspection by any person applying therefore:

Provided the applicant satisfies the registrar that he has sufficient interest in the contents of the documents of which he applies for inspection.

12. Grant of copies.- On online application and payment of specified fee, copies of the record of a Firm shall be furnished to any person who satisfies the Registrar that he has sufficient interest in the contents of the documents for which he applies. All copies shall be e-signed by the Registrar.

13. Fees Book.- The Registrar shall keep a Fees Book in which day to day entries of fees realised shall be made. All fees so realised shall be deposited in the Government Account.

14. Elimination of documents and records.- (1) On the dissolution of a firm, an entry to this effect shall be made opposite the firm's name in the register by writing the word dissolved along with the date of its dissolution and after expiry of five years from the date of the entry of dissolution in the register, the file and papers relating to such firm may be destroyed.

(2) Notwithstanding any thing contained in sub-rule (1) the following record shall be retained permanently, namely:-

(a) Certificate of Registration;
(b) Order of dissolution of Firm;
(c) Register of Firms;
(d) Alphabetical index prepared under rule 8; and
(e) File register.

15. Repeal and saving. – The Rajasthan Partnership Rules, 1952 are hereby repealed:

Provided that such repeal shall not -

(a) affect the previous operation of the rules so repealed or anything duly done or suffered thereunder; or

(b) affect any right, privilege, obligation, certificate issued or liability acquired, accrued or incurred under the rules so repealed; or

(c) affect any penalty, forfeiture or punishment incurred in respect of any offence committed against the rules so repealed; or

(d) affect any investigation, legal proceeding or remedy in respect of any such right, privilege, obligation, liability, penalty, forfeiture or punishment as aforesaid, and any such investigation, legal proceeding or remedy may be instituted, continued or enforce, and any such penalty, forfeiture or punishment may be imposed as if these rules had not been made.

FORM-A

INDUSTRIES DEPARTMENT
GOVERNMENT OF RAJASTHAN

Application for Registration of Firm
(Section 58 of Indian Partnership Act, 1932)

(A) Applicant Details/ आवेदक का विवरण

Applicant Type/ आवेदक का प्रकार
○ Authorized person ◉ Partner

(B) Firm Details/ फर्म का विवरण

Firm's Name/ फर्म का नाम*
enter firm name

Duration of Firm/ फर्म की अवधि
◉ At will ○ Not at will

Principal Place of Business/ Address *
enter principal place of business

Other Place of Business/ Address
enter other place of business

Station/ स्थान*
--Select District--

No. of Partners/ पार्टनर की संख्या (minimum 2 Partners)*
enter no of partners

(C) Partner's Detail (each Partners)/ प्रत्येक पार्टनर का विवरण

We, the undersigned, being partner hereby apply for registration as a firm and for that purpose supply the following particulars pursuant to Section 58 of the Indian partnership Act, 1932.

Partner Aadhaar Number/ पार्टनर आधार संख्या*
571566752744

Validate

Partner Name/ पार्टनर का नाम *
enter partner name

Age/ आयु *
enter age

Permanent Address of the Partners

Category Urban/ Rural/ शहरी/ ग्रामीण
◉ Urban ○ Rural

Plot Number/ House Number/ प्लाट संख्या/ मकान संख्या*
enter house number

Lane/ Street/ Road/ लेन/ गली/ सड़क *
enter lane/ street

Area/ Colony/ क्षेत्र/ कॉलोनी*
enter area/ colony

District/ ज़िला*
--Select District--

City/ Block/ शहर/ ब्लॉक*

enter city/block

Ward No./ Gram Panchayat/ वार्ड संख्या/ ग्राम पंचायत*

enter ward no./ gram panchayat

Pin Code/ पिन कोड*

enter pin code

State/ राज्य

--Select State--

Mobile Number/ मोबाइल नंबर*

enter 10 digit mobile number

Email ID/ ई-मेल*

enter email ID

Date (Partner joined)/ तारीख (पार्टनर शामिल हो गए)*

../../....

Signature of the Partners/ Specially Authorised Agents*

Choose File No file chosen

Add Partner

(E) Witness & Payment/ भुगतान और गवाह

Witness Details*

Name/ गवाह का नाम *

enter witness name

Designation/ गवाह का पद*

enter witness designation

Address/ गवाह का पता *

enter witness address

Membership/Registration no (Mandatory in case of notary or an advocate of the High Court)*

enter witness membership / registration no

Applicant Signature/ आवेदक का हस्ताक्षर *

Choose File No file chosen

Witness Signature with Seal / गवाह का हस्ताक्षर सील के साथ*

Choose File No file chosen

Registration fees (₹) :- 300.00

Declaration

* ☐ I/we do hereby declare that the above statement is true and correct to the best of my/our knowledge and belief.

Note:- This form must be signed by all Partners or their agents specially authorised in this behalf in the presence of a witness /witnesses who must be Gazatted officer, Magistrate,notary public or an Advocate of the High Court.

Select DIC Office *

--Select--

Pay & Submit

Close

FORM – B

INDUSTRIES DEPARTMENT
GOVERNMENT OF RAJASTHAN

Alteration in the firm's name or in the location of the principal place of business of the firm
(Section 60 of Indian Partnership Act,1932)

Partnership Firm Registration Number

Firm Registration No.

enter firm registration number of FORM-A

Validate

(A) Applicant Details/ आवेदक का विवरण

Applicant Type/ आवेदक का प्रकार

(•) Authorized person ( ) Partner

Authorized Person/ Partner Aadhaar Number/ अधिकृत व्यक्ति/ पार्टनर आधार संख्या*

ENTER AADHAAR NUMBER

Validate

First Name/ पहला नाम *

enter first name

Last Name/ आखिरी नाम

enter last name

Date of Birth (DOB)/ जन्म तारीख*

DD/MM/YYYY

Gender/ लिंग

(•) Male ( ) Female ( ) Other

Address/ आवेदक का पता *

enter Address

Mobile Number/ मोबाइल नंबर *

enter 10 digit mobile number

Email ID/ ई-मेल*

enter email ID

(B) Firm Alteration Details/ फर्म परिवर्तन विवरण

We the undersigned, being the partners of the Firm (Firm's Name-mentioned below) whose registered address is at (Firm's registered address- mentioned below) hereby notify pursuant to section 60(1) of the Indian Partnership Act, 1932, that the changes specified below have occurred in this firm.

Firm's Name/ फर्म नाम

enter firm name

Registered Address of the firm

enter place of business

Please choose Firm Alteration

( ) Change in the Firm Name ( )
Change in the location of the principal place of business

No. of Partners/ पार्टनर की संख्या*

no of partners

SA9

Partner's Detail/ पार्टनर विवरण

S.No.	Partner Name	Specially Authorized Agent Name	Signature of partner	Signature of Specially Authorized Agent	Action
1.	PARDEEP PODDAR	NA			☑

(E) Witness & Payment/ भुगतान और गवाह

Witness Details*

Name/ गवाह का नाम *

enter witness name

Designation/ गवाह का पद*

enter witness designation

Address/ गवाह का पता *

enter witness address

Membership/Registration no (Mandatory in case of notary or an advocate of the High Court)*

enter witness membership / registration no

Applicant Signature/ आवेदक का हस्ताक्षर *

Choose File No file chosen

Witness Signature with Seal / गवाह का हस्ताक्षर सील के साथ*

Choose File No file chosen

Alteration fees (₹) :- 100.00

Declaration

* ☐ I/we do hereby declare that the above statement is true and correct to the best of my/our knowledge and belief.

Note:- This form must be signed by all Partners or their agents specially authorised in this behalf in the presence of a witness /witnesses who must be Gazatted officer, Magistrate,notary public or an Advocate of the High Court.

Pay & Submit

Close

INDUSTRIES DEPARTMENT
GOVERNMENT OF RAJASTHAN

Change in Address of Business

(Section 61 of Indian Partnership Act,1932)

Partnership Firm Registration Number

Registration No

enter firm registration number of FORM-A

Validate

(A) Applicant Details/ आवेदक विवरण

Applicant Type/ आवेदक का प्रकार

○ Authorized person ◉ Partner

Authorized Person/ Partner Aadhaar Number/ अधिकृत व्यक्ति/ पार्टनर आधार संख्या*

ENTER AADHAAR NUMBER

Validate

First Name/ पहला नाम *

enter first name

Last Name/ आखिरी नाम

enter last name

Date of Birth (DOB)/ जन्म तारीख*

DD/MM/YYYY

Gender/ लिंग

◉ Male ○ Female ○ Other

Address/ आवेदक का पता *

enter Address

Mobile Number/ मोबाइल नंबर *

enter 10 digit mobile number

Email ID/ ई-मेल*

enter email ID

(B) Change of Address Details/ बदले पता का विवरण

Firm's Name/ फर्म नाम

enter firm name

Registered Address of the firm

enter place of business

We the partners of the firm hereby give notice pursuant to section 61 of the Indian Partnership Act, 1932, that the changes specified below have occurred in this firm.

The firm has discontinued business at Address *

firm discontinued business at

Discontinued with effect from*

../../....

The firm has begun to carry on business at Address *

carry on business at

Carry on Business with effect from*

../../....

No. of Partners/ पार्टनर की संख्या

no of partners

Partner's Detail/ पार्टनर विवरण

S.No	Partner Name	Specially Authorized Agent Name	Signature of partner	Signature of Specially Authorized Agent	Action
1.	PARDEEP PODDAR	NA			☑

(E) Witness & Payment/ भुगतान और गवाह

Witness Details*

Name/ गवाह का नाम *

enter witness name

Designation/ गवाह का पद*

enter witness designation

Address/ गवाह का पता *

enter witness address

Membership/registration no (Mandatory in case of notary or an advocate of the High Court)*

enter witness membership / registration no

Applicant Signature/ आवेदक का हस्ताक्षर *

Choose File No file chosen

Witness Signature with Seal / गवाह का हस्ताक्षर सील के साथ*

Choose File No file chosen

Alteration fees (₹) :- 100.00

Declaration

* ○ I/we do hereby declare that the above statement is true and correct to the best of my/our knowledge and belief.

Note:- This form must be signed by all Partners or their agents specially authorised in this behalf in the presence of a witness /witnesses who must be Gazatted officer, Magistrate,notary public or an Advocate of the High Court.

FORM – D

INDUSTRIES DEPARTMENT
GOVERNMENT OF RAJASTHAN

Change in the name of the Partner and his permanent Address

(Section 62 of Indian Partnership Act,1932)

Partnership Firm Registration Number

Firm Registration No

enter firm registration number of FORM-A

Validate

(A) Applicant Details/ आवेदक विवरण

Applicant Type/ आवेदक का प्रकार

○ Authorized person ◉ Partner

Authorized Person/ Partner Aadhaar Number/ अधिकृत व्यक्ति/ पार्टनर आधार संख्या*

ENTER AADHAAR NUMBER

Validate

First Name/ पहला नाम *

enter first name

Last Name/ आखिरी नाम

enter last name

Date of Birth (DOB)/ जन्म तारीख*

DD/MM/YYYY

Gender/ लिंग

○ Male ○ Female ○ Other

Address/ आवेदक का पता *

enter Address

Mobile Number/ मोबाइल नंबर *

enter 10 digit mobile number

Email ID/ ई-मेल*

enter email ID

(B) Change of Partner Name and Permanent Address Details/ पार्टनर का नाम और स्थायी पता का विवरण

Firm's Name/ फर्म नाम*

enter firm name

Registered Address *

enter place of business

No. of Partners/ पार्टनर की संख्या*

no of partners

We the partners of the firm hereby give notice pursuant to section 61 of the Indian Partnership Act, 1932, that the changes specified below have occurred in this firm.

S.No.	Partner Name	Address	Update Name & Address
1	PARDEEP PODDAR	FG, DH HOUSE N.936,DFH,DGH,-124507, HARYANA	☑

Partner's Detail/ पार्टनर विवरण

S.No.	Partner Name	Specially Authorized Agent Name	Signature of partner	Signature of Specially Authorized Agent	Action
1.	PARDEEP PODDAR	NA			☑

(E) Witness & Payment/ भुगतान और गवाह

Witness Details*

Name/ गवाह का नाम *

enter witness name

Designation/ गवाह का पद*

enter witness designation

Address/ गवाह का पता *

enter witness address

Membership/Registration no (Mandatory in case of notary or an advocate of the High Court)*

enter witness membership / registration no

Applicant Signature/ आवेदक का हस्ताक्षर *

Choose File No file chosen

Witness Signature with Seal / गवाह का हस्ताक्षर सील के साथ*

Choose File No file chosen

Alteration fees (₹) :- 100.00

Declaration

* ☐ I/we do hereby declare that the above statement is true and correct to the best of my/our knowledge and belief.

Note:- This form must be signed by all Partners or their agents specially authorised in this behalf in the presence of a witness /witnesses who must be Gazatted officer, Magistrate,notary public or an Advocate of the High Court.

Pay & Submit

Close

FORM – E (Admission)

INDUSTRIES DEPARTMENT
GOVERNMENT OF RAJASTHAN

Change of Constitution in firm

(Section 63 of Indian Partnership Act,1932)

Partnership Firm Registration Number

Registration No

enter firm registration number of FORM-A | Validate

(A) Applicant Details/ आवेदक विवरण

Applicant Type/ आवेदक का प्रकार

◉ Authorized person ○ Partner

Authorized Person/ Partner Aadhaar Number/ अधिकृत व्यक्ति/ पार्टनर आधार संख्या*

ENTER AADHAAR NUMBER

Validate

First Name/ पहला नाम *

enter first name

Last Name/ आखिरी नाम

enter last name

Date of Birth (DOB)/ जन्म तारीख*

DD/MM/YYYY

Gender/ लिंग

○ Male ○ Female ○ Other

Address/ आवेदक का पता *

enter Address

Mobile Number/ मोबाइल नंबर *

enter 10 digit mobile number

Email ID/ ई-मेल*

enter email ID

(B) Change of Constitution

Firm's Name/ फर्म नाम

enter firm name

Registered Address of the firm

enter place of business

No. of Partners/ पार्टनर की संख्या

no of partners

We, a partner/ a person specially authorised by a partner in the above mentioned firm hereby give notice that-

(i) the constitution of the firm has been altered by retirement/ admission as follows:-

○ Retirement ◉ Admission

Admitting Person details

Name of the Admitting partner*

enter duration of firm

effective date of admission*

../../....

full permanent address of partner*

enter duration of firm

age of admitting partner*

enter duration of firm

Mobile Number/ मोबाइल नंबर *

enter 10 digit mobile number

Email ID/ ई मेल*

enter email ID

Date of Birth (DOB)/ जन्म तारीख*

Signature of the admitting partner*

../../....

Choose File | No file chosen

Add

(ii) the said firm has been dissolved with effect from (w.e.f.)

Dissolved Date

../../....

Partner's Detail/ पार्टनर विवरण

S.No.	Partner Name	Specially Authorized Agent Name	Signature of partner	Signature of Specially Authorized Agent	Action
1.	PARDEEP PODDAR	NA			☑
2.	PARDEEP PODDAR	NA			☑

(D) List of Documents Required (Documents to be uploaded)

Note: Valid File Types: JPG/JPEG/PNG/PDF, Max. File Size: 1 MB per attachment

1. Authorization Certificate (If the Person is not a Partner in the firm and specially authorized by the partners for executing the registration process)*

Choose File | No file chosen

(D) List of Documents Required (Documents to be uploaded)

Note: Valid File Types: JPG/JPEG/PNG/PDF, Max. File Size: 1 MB per attachment

1. Authorization Certificate (If the Person is not a Partner in the firm and specially authorized by the partners for executing the registration process)*

Choose File | No file chosen

(E) Witness & Payment/ भुगतान और गवाह

Witness Details*

Name/ गवाह का नाम *

enter witness name

Designation/ गवाह की पद*

enter witness designation

Address/ गवाह का पता *

enter witness address

Membership/Registration no (Mandatory in case of notary or an advocate of the High Court)*

enter witness membership / registration no

Applicant Signature/ आवेदक का हस्ताक्षर *

Choose File | No file chosen

Witness Signature with Seal / गवाह का हस्ताक्षर सील के साथ*

Choose File | No file chosen

Alteration fees (₹) :- 100.00

Declaration

* ☐ I/we do hereby declare that the above statement is true and correct to the best of my/our knowledge and belief.

Note: This form must be signed by all Partners or their agents specially authorised in this behalf in the presence of a witness /witnesses who must be Gazatted officer, Magistrate,notary public or an Advocate of the High Court.

Pay & Submit

Close

SAG

FORM – E
(Retirement)

INDUSTRIES DEPARTMENT
GOVERNMENT OF RAJASTHAN

Change of Constitution in firm
(Section 63 of Indian Partnership Act,1932)

Partnership Firm Registration Number

Registration No
enter firm registration number of FORM-A
Validate

(A) Applicant Details/ आवेदक विवरण

Applicant Type/ आवेदक का प्रकार
◉ Authorized person ○ Partner

Authorized Person/ Partner Aadhaar Number/ अधिकृत व्यक्ति/ पार्टनर आधार संख्या*
ENTER AADHAAR NUMBER
Validate

First Name/ पहला नाम *
enter first name

Last Name/ अंतिम नाम
enter last name

Date of Birth (DOB)/ जन्म तारीख*
DD/MM/YYYY

Gender/ लिंग
○ Male ○ Female ○ Other

Address/ आवेदक का पता *
enter Address

Mobile Number/ मोबाइल नंबर *
enter 10 digit mobile number

Email ID/ ई-मेल*
enter email ID

(B) Change of Constitution

Firm's Name/ फर्म नाम
enter firm name

Registered Address of the firm
enter place of business

No. of Partners/ पार्टनर की संख्या
no of partners

We, a partner/ a person specially authorised by a partner in the above mentioned firm hereby gives notice that-
(i) the constitution of the firm has been altered by retirement/ admission as follows:-
◉ Retirement ○ Admission

SAG

Retiring Person details

Partner Name/ पार्टनर का नाम *

enter partner name

Name of Retiring Partner*

enter the name of retiring partner

effective date of retirement*

../../....

Add

(ii) the said firm has been dissolved with effect from (w.e.f.)

Dissolved Date

../../....

Partner's Detail/ पार्टनर विवरण

S.No.	Partner Name	Specially Authorized Agent Name	Signature of partner	Signature of Specially Authorized Agent	Action
1.	PARDEEP PODDAR	NA			
2.	PARDEEP PODDAR	NA			

SAG

(D) List of Documents Required (Documents to be uploaded)

Note: Valid File Types: JPG/JPEG/PNG/PDF, Max. File Size: 1 MB per attachment

1. Authorization Certificate (If the Person is not a Partner in the firm and specially authorized by the partners for executing the registration process)* — Choose File | No file chosen

(E) Witness & Payment/ भुगतान और गवाह

Witness Details*

Name/ गवाह का नाम *

enter witness name

Designation/ गवाह का पद*

enter witness designation

Address/ गवाह का पता *

enter witness address

Membership/Registration no (Mandatory in case of notary or an advocate of the High Court)*

enter witness membership / registration no

Applicant Signature/ आवेदक का हस्ताक्षर *

Choose File | No file chosen

Witness Signature with Seal / गवाह का हस्ताक्षर सील के साथ*

Choose File | No file chosen

Alteration fees (₹) :- 100.00

Declaration

* ☐ I/we do hereby declare that the above statement is true and correct to the best of my/our knowledge and belief.

Note:- This form must be signed by all Partners or their agents specially authorised in this behalf in the presence of a witness /witnesses who must be Gazatted officer, Magistrate,notary public or an Advocate of the High Court.

Pay & Submit

INDUSTRIES DEPARTMENT
GOVERNMENT OF RAJASTHAN

Election by a person admitted as a Minor to the benefits of Partnership in a firm to become or not to become a partner

(Section 63 (2) of Indian Partnership Act,1932)

Partnership Firm Registration Number

Registration No

enter firm registration number of FORM-A | Validate

(A) Applicant Details/ आवेदक विवरण

Applicant Type/ आवेदक का प्रकार
○ Authorized person ◉ Partner

Authorized Person/ Partner Aadhaar Number/ अधिकृत व्यक्ति/ पार्टनर आधार संख्या*

ENTER AADHAAR NUMBER

Validate

First Name/ पहला नाम * | Last Name/ आखिरी नाम

enter first name | enter last name

Date of Birth (DOB)/ जन्म तारीख* | Gender/ लिंग

DD/MM/YYYY | Male Female Other

Address/ आवेदक का पता * | Mobile Number/ मोबाइल नंबर *

enter Address | enter 10 digit mobile number

Email ID/ ई-मेल*

enter email ID

(B) Firm Details/ फर्म विवरण

Firm's Name/ फर्म नाम | Registered Address of the firm *

enter firm name | enter place of business

No. of Partners in th firm/ पार्टनर की संख्या | Profits of partnership in the firm having been *

no of partners | D D

(C) Minor Details

Minor Name/ माइनर का नाम * | Minor Address/ माइनर का पता*

enter minor name | enter minor address

Guardian Name/ अभिभावक का नाम*

enter guardian name

Guardian Address/ अभिभावक का पता*

enter the guardian address

Date of admission to benefits/ तारीख लाभ के लिए

../../....

Date when he/she will attain majority/ तारीख बहुमत प्राप्त होगी

../../....

Specially authorised in this behalf hereby give notice that of elected to become/ not to become a partner in the above mentioned firm

Signature of a person admitted as a minor or his agent *

Choose File No file chosen

(E) Witness & Payment/ भुगतान और गवाह

Witness Details*

Name/ गवाह का नाम *

enter witness name

Designation/ गवाह का पद*

enter witness designation

Address/ गवाह का पता *

enter witness address

Membership/Registration no (Mandatory in case of notary or an advocate of the High Court)*

enter witness membership / registration no

Applicant Signature/ आवेदक का हस्ताक्षर *

Choose File No file chosen

Witness Signature with Seal / गवाह का हस्ताक्षर सील के साथ*

Choose File No file chosen

Alteration fees (₹) :- 100.00

Declaration

* ☐ I/we do hereby declare that the above statement is true and correct to the best of my/our knowledge and belief.

Note:- This form must be signed by all Partners or their agents specially authorised in this behalf in the presence of a witness /witnesses who must be Gazetted officer, Magistrate,notary public or an Advocate of the High Court.

Pay & Submit

Close

By Order and in the name of the Governor,

(Dr. Subodh Agarwal)
Principal Secretary (MSME) to the Government

No. F.2(11)Ind/Gr.-2/2016 **Date: 31.10.2017**

Copy forwarded to information and necessary action –

1. Superintendent, Rajasthan Government Press, Jaipur with soft copy for publication in Gazette.
2. Commissioner, Industries Department, Rajasthan, Jaipur
3. District Collector, All
4. Registrar of Companies, Rajathan, Jaipur
5. Registrar of Non-Trading Companies, Rajasthan, Jaipur.
6. General Manager, District Industries Centre, All
7. Deputy Secretary to Government, Industries (Group-1) Department, Jaipur
8. Industries (PPC) Department
9. Guard Copy

Principal Secretary (MSME) to the Government