



GOVERNMENT OF INDIA
MINISTRY OF CORPORATE AFFAIRS
Central Registration Centre

Certificate of Incorporation

[Pursuant to sub-section (2) of section 7 of the Companies Act, 2013 (18 of 2013) and rule 18 of the Companies (Incorporation) Rules, 2014]

I hereby certify that <name of the company> is incorporated on this (i.e. FIRST, SECOND etc) day of <Month of approval of the work item in words> two thousand <YEAR of approval of the work item in words> under the Companies Act, 2013 (18 of 2013) and that the company is <limited by shares/limited by guarantee/unlimited company>.

The Corporate Identity Number of the company is <CIN>

The Permanent Account Number (PAN) of the company is <PAN>*/@

Given under my hand at < Name of the city where the Registrar of Companies office is located > this < Date of approval of the work item in words (i.e FIRST, SECOND etc.)> day of < Month of approval of the work item in words > <YEAR of approval of the work item in words>.

Digital Signature Certificate
<Full name of the Authorising officer approving the work-item>
<Assistant Registrar of Companies/ Deputy Registrar of Companies/ Registrar of Companies>
For and on behalf of the Jurisdictional Registrar of Companies
Registrar of Companies
Central Registration Centre

Disclaimer: This certificate only evidences incorporation of the company on the basis of documents and declarations of the applicant(s). This certificate is neither a license nor permission to conduct business or solicit deposits or funds from public. Permission of sector regulator is necessary wherever required. Registration status and other details of the company can be verified on www.mca.gov.in

Mailing Address as per record available in Registrar of Companies office:

< Name of the company >

< Address of the correspondence/registered office of the company >

Government Seal

*as issued by the Income tax Department.

@ This sentence along with the footnotes, would be indicated in the certificate only in cases where the PAN is allotted by the Income tax Department at the time of incorporation.

4. In the principal rules, for form No.INC-32, the following form shall be substituted, namely:-

[Pursuant to sections 4, 7, 12, 152 and 153 of the Companies Act, 2013 read with rules made thereunder] – FORM NO. INC-32

SPICE

(Simplified Proforma for Incorporating Company Electronically)

Form language English Hindi

Refer the instruction kit for filing the form.

1. (a) *State the type of company
- (b) *State the class of company Public Private One Person Company
- (c) *State the category of company
- (d) *State the sub-category of company
- (e) *Company is Having share capital Not having share capital
- (f) Section 8 license number

2. (a) *Main division of industrial activity of the company

Description of the main division

- (b) Whether Articles of Association is entrenched Yes No

Number of Articles to which provisions of entrenchment shall be applicable

Details of such articles

Sr. No.	Article Number	Short description on entrenchment of the clause

3. (i) *Capital structure of the company
Total authorized share capital (in Rupees)

Authorized share capital	Equity	Preference	Unidentified
Number of shares			
Nominal amount per share (in Rupees)			
Total amount (in Rupees)			

Total subscribed share capital (in Rupees)

Subscribed share capital	Equity	Preference
Number of shares		
Nominal amount per share (in Rupees)		
Total amount (in Rupees)		

- (ii) *Details of number of members

(a) Enter the maximum number of members	
(b) Maximum number of members excluding proposed employees	
(c) Number of members	
(d) Number of members excluding proposed employee(s)	

4. (a) *Correspondence address

*Line I

Line II

*City

*State/Union Territory Pin code

*District

*Phone (with STD code)

Fax

*email ID of the company

(b) *Whether the address for correspondence is the address of registered office of the company o Yes o No

(c) *Name of the office of the Registrar of Companies in which the proposed company is to be registered

(a)(i) *Whether name is already approved by Registrar of Companies o Yes o No

SRN of form INC-1	<input type="text"/>	Pre-Fill
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(ii)

Proposed or approved name	<input type="text"/>
Significance of abbreviated or coined word in the proposed name	<input type="text"/>
State the name of the vernacular language(s) if used in the proposed name and meaning thereof	<input type="text"/>

5. *Particulars of the proposed or approved name

(b)

(i) *Whether the promoters are carrying on any Partnership firm, sole proprietary or unregistered entity in the name as applied for If yes, whether the business of such entity shall be acquired	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Yes <input type="radio"/> No
(ii) *Whether the proposed name including the phrase 'Electoral trust'	<input type="radio"/> Yes <input type="radio"/> No
(iii) *Whether the proposed name(s) contain such word or expression for which the previous approval of Central Government is required	<input type="radio"/> Yes <input type="radio"/> No
(iv) *Whether approval from any sectoral regulator is required	<input type="radio"/> Yes <input type="radio"/> No
(v) Whether the name is similar to <input type="radio"/> Existing Indian Company <input type="radio"/> Foreign body corporate [Attach the copy of No Objection Certificate by way of Board resolution (duly attested by a director of that company)] Provide CIN <input type="text"/> Pre-fill Name of the Company <input type="text"/>	

(c) (i) *Whether the proposed name is based on a trademark registered or is subject matter of an application pending for registration under the Trade Marks Act o Yes o No

(ii) *Specify the class(s) of trade mark (refer the instruction kit for details)

(iii) *Furnish the particulars of application and the approval of the applicant or owner of the trade mark

6. (a) *Number of first subscriber(s) to MOA and directors of the company

	Having valid DIN	Not having valid DIN
Total number of first subscribers (non-individual + individual)		
Number of non-individual first subscriber(s)		
Number of individual first subscriber(s) cum director(s)		
Total number of directors (director(s) who is/are not subscriber(s) + subscriber(s) cum director(s) as mentioned in above Row no. 3)		

(b) *Particulars of non-individual first subscriber(s)

*Category

*Corporate identity number(CIN) or foreign company registration number(FCRN) or any other registration number

*Name of the body corporate

Registered office address or Principal place of business in India or Principal place of business outside India

*Line I

Line II

*City

*State /Union Territory *Pin code

*ISO Country code

Country

*Phone (With STD/ISD code) -

Fax

*email id

Particulars of the authorised person

*First Name

Middle Name

*Surname

*Father's First Name

Father's Middle Name

*Father's Surname

* Gender *Date of Birth *Nationality

PAN Passport number

Aadhaar number

*Place of Birth (District & State)

*Occupation type

*Area of Occupation

*Educational qualification

Present Address

*Line I

Line II

*City

*State /Union Territory *Pin code

ISO Country code

Country

*Phone (With STD/ISD code) -

Mobile

Fax

*email id

Kind of shares subscribed	Number of subscribed shares	Amount of shares subscribed
Equity shares		
Preference shares		

(c) *Particulars of individual first subscriber(s) (other than subscriber cum director)

I *Director Identification number (DIN) **Pre-Fill**

*Name

Kind of shares subscribed	Number of subscribed shares	Amount of shares subscribed
Equity shares		
Preference shares		

I *First Name

Middle Name

*Surname

*Father's first name

Father's middle name

*Father's surname

*Gender *Date of Birth Nationality

*Place of Birth

*Occupation type Self Employed Professional Homemaker Student Serviceman

*Area of Occupation

If 'Others' selected, please specify

*Educational Qualification

* PAN Passport number **Verify Details**

Aadhaar number

*email ID

Permanent Address

*Line I

Line II

*City

* State/ Union Territory Pin code

*ISO Country code Country

*Phone (with STD/ISD code)

*Whether present residential address same as permanent residential address Yes No

Present address

*Line I

Line II

*City

*State/ Union Territory Pin code

*ISO Country code Country

*Phone (with STD/ISD code)

*Duration of stay at present address Years Months

If Duration of stay at present address is less than one year then address of previous residence

*Proof of identity

*Residential Proof

Submit the proof of identity and proof of address under attachments.

Kind of shares subscribed	Number of subscribed shares	Amount of shares subscribed
Equity shares		
Preference shares		

(d) *Particulars of individual first subscriber(s) cum directors

I

*Director Identification number (DIN) **Pre-Fill**

*Name

*Gender Date of Birth Nationality

*Designation Category

Whether Chairman Executive director Non-executive director

*Name of the company or institution whose nominee the appointee is

*email ID

Kind of shares subscribed	Number of subscribed shares	Amount of shares subscribed
Equity shares		
Preference shares		

Number of entities in which director have interest (Need not to mention if such entity is having CIN/FCRN/LLPIN)

*Registration number

*Name

*Address

Nature of interest	*Designation <input type="text"/>
	Percentage of Shareholding <input type="text"/> Amount <input type="text"/>
	Others (specify) <input type="text"/>

I

*First Name

Middle Name

*Surname

*Father's first name

Father's middle name

*Father's surname

*Gender *Date of Birth Nationality

*Place of Birth

*Whether citizen of India Yes No *Whether resident in India Yes No

*Occupation type Self Employed Professional Homemaker Student Serviceman

*Area of Occupation

If 'Others' selected, please specify

*Educational Qualification

* PAN Passport number **Verify Details**

*Designation Category

Whether Chairman Executive director Non-executive director

*Name of the company or institution whose nominee the appointee is

*email ID

Permanent Address

*Line I

Line II

*City

* State/ Union Territory Pin code

*ISO Country code Country

*Phone (with STD/ISD code)

*Whether present residential address same as permanent residential address Yes No

Present address

*Line I

Line II

*City

*State/ Union Territory Pin code

*ISO Country code Country

*Phone (with STD/ISD code)

*Duration of stay at present address Years Months

If Duration of stay at present address is less than one year then address of previous residence

*Proof of identity *Residential Proof

Voter's identity card number

Driving license number

Aadhaar Number

Submit the proof of identity and proof of address under attachments.

Kind of shares subscribed	Number of subscribed shares	Amount of shares subscribed
Equity shares		
Preference shares		

Number of entities in which director have interest

*Registration number

*Name

*Address

Nature of interest	* Designation <input type="text"/>
	Percentage of Shareholding <input type="text"/> Amount <input type="text"/>
	Others (specify) <input type="text"/>

(e) *Particulars of directors (other than first subscribers)

I *Director Identification number (DIN)

*Name

*Gender Date of Birth Nationality

*Designation Category

Whether Chairman Executive director Non-executive director

*Name of the company or institution whose nominee the appointee is

*email ID <input type="text"/>	
Number of entities in which director have interest (Need not to mention if such entity is having CIN/FCRN/LLPIN) <input type="text"/>	
*Registration number	<input type="text"/>
*Name	<input type="text"/>
*Address	<input type="text"/>
Nature of interest	*Designation <input type="text"/>
	Percentage of Shareholding <input type="text"/> Amount <input type="text"/>
	Others (specify) <input type="text"/>

I

*First Name	<input type="text"/>
Middle Name	<input type="text"/>
*Surname	<input type="text"/>
*Father's first name	<input type="text"/>
Father's middle name	<input type="text"/>
*Father's surname	<input type="text"/>
*Gender	<input type="text"/>
*Date of Birth	<input type="text"/>
ationality	<input type="text"/>
*Place of Birth	<input type="text"/>
*Whether citizen of India <input type="radio"/> Yes <input type="radio"/> No *Whether resident in India <input type="radio"/> Yes <input type="radio"/> No	
*Occupation type <input type="radio"/> Self Employed <input type="radio"/> Professional <input type="radio"/> Homemaker <input type="radio"/> Student <input type="radio"/> Serviceman	
*Area of Occupation	<input type="text"/>
If 'Others' selected, please specify <input type="text"/>	
*Educational Qualification	<input type="text"/>
* <input type="checkbox"/> PAN <input type="checkbox"/> Passport number	<input type="text"/>
Verify Details	
*Designation	<input type="text"/>
Whether <input type="checkbox"/> Chairman <input type="checkbox"/> Executive director <input type="checkbox"/> Non-executive director	
*Name of the company or institution whose nominee the appointee is	
<input type="text"/>	
*email ID	<input type="text"/>
Permanent Address	
*Line I	<input type="text"/>
Line II	<input type="text"/>
*City	<input type="text"/>
* State/ Union Territory	<input type="text"/>
Pin code	<input type="text"/>
*ISO Country code	<input type="text"/>
Country	<input type="text"/>
*Phone (with STD/ISD code)	<input type="text"/>
*Whether present residential address same as permanent residential address <input type="radio"/> Yes <input type="radio"/> No	
Present address	
*Line I	<input type="text"/>
Line II	<input type="text"/>
*City	<input type="text"/>
*State/ Union Territory	<input type="text"/>
Pin code	<input type="text"/>

*ISO Country code	Country	<input type="text"/>
*Phone (with STD/ISD code)	<input type="text"/>	<input type="text"/>
*Duration of stay at present address	<input type="text"/> Years	<input type="text"/> Months
If Duration of stay at present address is less than one year then address of previous residence		
<input type="text"/>		
*Proof of identity	<input type="text"/>	Residential Proof <input type="text"/>
Voter's identity card number	<input type="text"/>	
Driving license number	<input type="text"/>	
Aadhaar Number	<input type="text"/>	
Submit the proof of identity and proof of address under attachments.		
Number of entities in which director have interest <input type="text"/>		
*Registration number	<input type="text"/>	
*Name	<input type="text"/>	
*Address	<input type="text"/>	
Nature of interest	*Designation	<input type="text"/>
	Percentage of Shareholding	<input type="text"/> Amount <input type="text"/>
	Others (specify)	<input type="text"/>

7. (a) ***Nomination**

I

the subscriber to the memorandum of association of

do hereby nominate *

who shall become the member of the company in the event of my death or incapacity to contract. I declare that the nominee is eligible for nomination within the meaning of Rule 3 of the Companies (Incorporation) Rules, 2014.

(b) ***Particulars of the Nominee**

Director Identification number(DIN)	<input type="text"/>	Pre-Fill
*First Name	<input type="text"/>	
Middle Name	<input type="text"/>	
*Surname	<input type="text"/>	
*Father's First Name	<input type="text"/>	
Father's Middle Name	<input type="text"/>	
*Father's Surname	<input type="text"/>	
*Gender	<input type="text"/>	*Date of Birth <input type="text"/>
		Nationality <input type="text"/>
*Income- tax PAN	<input type="text"/>	Verify Details
Aadhaar number	<input type="text"/>	
*Place of Birth (District & State)	<input type="text"/>	
*Occupation type	<input type="text"/>	
*Area of Occupation	<input type="text"/>	
*Educational qualification	<input type="text"/>	
Permanent Address		
*Line I	<input type="text"/>	
Line II	<input type="text"/>	
*City	<input type="text"/>	
*State /Union Territory	<input type="text"/>	*Pin code <input type="text"/>

*ISO Country code
Country

*Phone (With STD/ISD code)

Mobile

Fax

*email id

*Whether present address is same as the permanent address Yes No

Present Address

*Line I

Line II

*City

*State/Union Territory in code

*ISO Country code

Country

Phone (With STD/ISD code)

Mobile

Fax

*Duration of stay at present address Years months

If Duration of stay at present address is less than one year then address of previous residence

*Proof of identity residential Proof

8. Particulars of payment of stamp duty

(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 Yes No Not applicable

(i) Details of stamp duty to be paid

Type of document/ Particulars	Form	Memorandum of association	Articles of association
Amount of stamp duty to be paid (in Rs.)	<input type="text"/>	<input type="text"/>	<input type="text"/>

(ii) Provide details of stamp duty already paid

Type of document/ Particulars	Form	Memorandum of association	Articles of association	Others
Total amount of stamp duty paid (in Rs.)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mode of payment of stamp duty	<input type="text"/>	<input type="text"/>	<input type="text"/>	<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 (DD/MM/YYYY)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Place of purchase of stamps or stamp paper or payment of stamp duty				

9. * Additional Information for applying Permanent Account Number (PAN) and Tax Deduction Account Number (TAN)

Information specific to PAN



Information specific to TAN



Source of Income

- Income from Business/profession
 Capital Gains
 Income from house property
 Income from other source
 No Income

Business/Profession code

<input type="text"/>	<input type="text"/>
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10. ^ Additional Information for Employer registration under Employee State Insurance Corporation (ESIC)

Type of Unit Factory Establishment

Exact nature of Work/ Business carried on

Work Sub category

11. ^ Does the Employees Provident Fund and Miscellaneous Provisions Act 1952 apply to the establishment EFP and MP Act Voluntary Coverage

12. ^ Number of employees to be covered under Employees Provident Fund Act

13. ^ Number. of Employees earning wages less than Rupees fifteen thousand rupees employed directly or through contractor to be covered under Employees State Insurance Act

14. ^ Do you need Importer Exporter code Yes No

15. ^Particulars of Investment

INVESTMENT	Proposed amount (in Rupees)
A) land (for rented premises, capitalised value of the same to be indicated)	
B) building	
C) plant and machinery	
(I) indigenous	
(II) import	
(A) cif value	
(B) landed cost	
(III) TOTAL [(I) + (II) (B)]	0

^The information in Serial number 10-15 are mandatorily required for Employees State Insurance Corporation registration, Employees Provident Fund, Employees State Insurance registration, Importer Exporter Code Registration in case of applicants desirous of applying for these services at the time of incorporation of a company and this facility is available at e-Biz Portal only as per separate procedure prescribed by e-Biz Portal. These services (Serial number 10-15) will not be available for forms filed on MCA21 Portal and no cognizance will be taken of entries in those fields if the form is filed on MCA21 Portal.

Attachments

List of attachments

1. *Memorandum of association;
2. *Articles of Association;
3. *Affidavit and declaration by first subscriber(s) and director(s);
4. Proof of Office address (Conveyance/ Lease deed/Rent Agreement etc. along with rent receipts);
5. Copy of the utility bills (not older than two months);
6. Copy of approval in case the proposed name contains any word(s) or expression(s) which requires approval from central government;
7. Approval of the owner of the trademark or the applicant of such application for registration of Trademark;
8. NOC from the sole proprietor/partners/other associates/ existing company;
9. In principle approval from the concerned regulator;
10. Copy of certificate of incorporation of the foreign body corporate and resolution passed;
11. Resolution passed by promoter company;
12. NOC from existing Indian company or foreign company
13. Interest of first director(s) in other entities;
14. Consent of Nominee (INC-3);
15. Proof of identity & residential address of subscribers;
16. Proof of identity & residential address of nominee;
17. Proof of identity and address of Applicant I;
18. Proof of identity and address of Applicant II;
19. Proof of identity and address of Applicant III;
20. NOC in case there is change in the promoters (first subscribers to Memorandum of Association)
21. Optional attachment(s), (if any)

List of attachments

Attach

Attach

Attach

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[Remove attachment](#)

Declaration

I have gone through the provisions of the Companies Act, 2013, the rules thereunder and prescribed guidelines framed thereunder in respect of reservation of name, understood the meaning thereof and the

proposed name is in conformity thereof.

- I have used the search facilities available on the portal of the Ministry of Corporate Affairs (MCA) for checking the resemblance of the proposed name with the companies and Limited Liability partnerships (LLPs) respectively already registered or the names already approved. I have also used the search facility for checking the resemblances of the proposed name with registered trademarks and trade mark subject of an application under the Trade Marks Act, 1999 and other relevant search for checking the resemblance of the proposed name to satisfy myself with the compliance of the provisions of the Act for resemblance of name and Rules thereof.
- The proposed name is not in violation of the provisions of Emblems and Names (Prevention of Improper Use) Act, 1950 as amended from time to time.
- The proposed name is not offensive to any section of people, e.g. proposed name does not contain profanity or words or phrases that are generally considered a slur against an ethnic group, religion, gender or heredity.
- The proposed name is not such that its use by the company will constitute an offence under any law for the time being in force.
- I undertake to be fully responsible for the consequences in case the name is subsequently found to be in contravention of the provisions of section 4(2) and section 4(4) of the Companies Act, 2013 and rules thereto and I have also gone through and understood the provisions of section 4(5) (ii) (a) and (b) of the Companies Act, 2013 and rules thereunder and fully declare myself responsible for the consequences thereof.
- * [redacted]
, a person named in the articles as a director of the company has been duly authorized by the promoters of the company to sign this form and declare that all the requirements of the Companies Act, 2013 and the rules made thereunder in respect of Director Identification Number (DIN), registration of the company and matters precedent or incidental thereto have been complied with.
- I am authorized by the promoter subscribing to the Memorandum of Association and Articles of Association and the first director(s) to give this declaration and to sign and submit this Form.
- *I am authorised by each subscriber to declare that company shall not commence its business, unless each subscriber has paid the value of the shares agreed to be taken by him at the time of subscribing to the Memorandum of Association;
- I further declare that, company shall not commence its business, unless all the required approval from the sectoral Regulators such as RBI, SEBI etc. have been obtained;
- I on behalf of the promoters and the first directors, hereby declare that the registered office is capable of receiving and acknowledging all communications and notices addressed to the proposed company on incorporation , shall be maintained at the given address at item 4 of this form;
- *I, on behalf of all the first director(s) named in the Articles of Association of the proposed company, solemnly declare, that the declaration given herein as stated above are true to the best of my knowledge and belief, the information given in this integrated application form for incorporation and attachments thereto are correct and complete, and nothing relevant to this form has been suppressed. All the required attachments have been completely, correctly and legibly attached to this form and are as per the original records maintained by the promoters subscribing to the Memorandum of Association and Articles of Association.
- I, on behalf of the proposed Directors whose particulars for allotment of DIN are filled as above, hereby confirm and declare that they are not restrained, disqualified, removed for being appointed as Director of a company under the provisions of the Companies Act, 2013 including sections 164 and 169, and have not been declared as proclaimed offender by any Economic Offence Court or Judicial Magistrate Court or High Court or any other Court, and not been already allotted a Director Identification Number (DIN) under section 154 of the Companies Act, 2013, and I further declare that I have read and understood the provisions of Sections 154, 155, 447 and 448 read with Sections 449, 450 and 451 of the Companies Act, 2013.

* [redacted]

[redacted]
[redacted]
having Membership number [redacted] and/or certificate of practice [redacted]
has been engaged to give declaration under section 7(1) (b) and such declaration is attached.

Note: Attention is drawn to the provisions of sections 7(5) and 7(6) which, *inter-alia*, provides that furnishing of any false or incorrect particulars of any information or suppression of any material information shall attract punishment for fraud under section 447. Attention is also drawn to provisions of section 448 and 449 which provide for punishment for false statement and punishment for false evidence respectively.

*To be digitally signed by director

DSC BOX

[redacted]

*DIN / PAN

Declaration and Certification by Professional

I _____
, member of _____
having office at *

Who is engaged in the formation of the company declare that I have been duly engaged for the purpose of certification of this form. It is hereby also certified that I have gone through the provisions of the Companies Act, 2013 and rules thereunder for the subject matter of this form and matters incidental thereto and I have verified the above particulars (including attachment(s)) from the original/certified records maintained by the applicant which is subject matter of this form and found them to be true, correct and complete and no information material to this form has been suppressed. I further certify that;

- (i) the draft memorandum and articles of association have been drawn up in conformity with the provisions of sections 4 and 5 and rules made thereunder; and
- (ii) all the requirements of Companies Act, 2013 and the rules made thereunder relating to registration of the company under section 7 of the Act and matters precedent or incidental thereto have been complied with. The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order;
- (iii) I have opened all the attachments to this form and have verified these to be as per requirements, complete and legible;
- (iv) I further declare that I have personally visited the proposed registered office given in the form at the address mentioned herein above and verified that the said proposed registered office of the company is functioning for the business purposes of the company (wherever applicable in respect of the proposed registered office has been given).
- (v) It is understood that I shall be liable for action under Section 448 of the Companies Act, 2013 for wrong certification, if any found at any stage.

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

* Whether associate or fellow Associate Fellow

* Membership number _____

Certificate of practice number _____

* Income-tax PAN _____

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)