

Form 9

[See rule 7 and 10(8)]

Consent to act as Designated Partner

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

To

NAME & ADDRESS OF LLP

Date: _____

Subject: Consent to act as Designated Partner

I, **Name of Proposed Partner** hereby give my consent to act as designated partner of the **Name of LLP** pursuant to Section 7(3) of the Act.

Particulars

S No	Particulars	
1	Designated Partner Identification Number (DPIN)	
2	Name	
3	Father's /Husband's Name	
4	Present residential address	
5	e-mail ID	

6. Name of the Partnership Firm

Or

LLPIN & **Name of Limited Liability Partnership**

Or

CIN & **Name of the Company**

Or

Name of any other body corporate

Whose nominee the designated partner is.

I hereby state that I satisfy the conditions and requirements for being eligible to be a designated partner and I have not been disqualified to act as a designated partner.

To be signed by the designated partner:

DPIN:

Date:

Place: