**FORM C**

**Submission Of Claim By Financial Creditors**

(Under Regulation 8 of the Insolvency and Bankruptcy Board of India (Insolvency Resolution Process for Corporate Persons) Regulations, 2016)

[Date]

From

[*Name and address of the financial creditor, including address of its registered office and principal office*]

To,

[*name of corporate debtor*],

The Claims Management Advisor,

[Registered office Address as set out in public announcement]

**Kindly post your claims to the below address-**

The IL&FS financial centre,

Plot C22, G Block,

Bandra Kurla Complex,

Bandra (East),

Mumbai 400051

**Subject: Submission of proof of claim in respect of [*name of the corporate debtor*] as on 15-Oct-18**

Madam/Sir,

[*Name of the financial creditor*], hereby submits this claim in respect of the corporate insolvency resolution process of *[name of corporate debtor*]. The details for the same are set out below:

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|  Relevant Particulars |
| 1. | Name of the financial creditor |  |
| 2. | Identification number of the financial creditor(If an incorporated body, provide identification number and proof of incorporation. If a partnership or individual provide identification records\* of all the partners or the individual) |  |
| 3. | Address and email address of the financial creditor for correspondence |   |
| 4. | Details of claim, if it is made against corporate debtor as principal borrower: (i) Amount of claim (ii) Amount of claim covered by security interest, if any(Please provide details of security interest, the value of the security, and the date it was given)(iii) Amount of claim covered by guarantee, if any(Please provide details of guarantee held, the value of the guarantee, and the date it was given)(iv) Name and address of the guarantor(s) |  |
| 5. | Details of claim, if it is made against corporate debtor as guarantor:(i) Amount of claim (ii) Amount of claim covered by security interest, if any(Please provide details of security interest, the value of the security, and the date it was given)(iii) Amount of claim covered by guarantee, if any(Please provide details of guarantee held, the value of the guarantee, and the date it was given)(iv) Name and address of the principal borrower |  |
| 6.  | Details of claim, if it is made in respect of financial debt covered under clauses (h) and (i) of sub-section (8) of section 5 of the Code, extended by the creditor:(i) Amount of claim(ii) Name and address of the beneficiary |  |
| 7.  | Details of how and when debt incurred |   |
| 8. | Details of any mutual credit, mutual debts, or other mutual dealings between the corporate debtor and the creditor which may be set-off against the claim |   |
| 9. | Details of the bank account to which the amount of the claim or any part thereof can be transferred pursuant to a resolution plan |  |
|   (Signature of financial creditor or person authorised to act on its behalf)[Please enclose the authority if this is being submitted on behalf of the financial creditor] |
|  Name in BLOCK LETTERS |
|  Position with or in relation to creditor |
|  Address of person signing |

**\***PAN, passport, AADHAAR Card or the identity card issued by the Election Commission of India.

**DECLARATION**

I, [Name of claimant], currently residing at [insert address], do hereby declare and state as follows: -

1. [Name of corporate debtor], the corporate debtor was, at the insolvency commencement date, being the……………..day of…………..20……., actually indebted to me for a sum of Rs. [insert amount of claim].
2. In respect of my claim of the said sum or any part thereof, I have relied on the documents specified below: [Please list the documents relied on as evidence of claim].
3. The said documents are true, valid and genuine to the best of my knowledge, information and belief and no material facts have been concealed therefrom.
4. In respect of the said sum or any part thereof, neither I, nor any person, by my order, to my knowledge or belief, for my use, had or received any manner of satisfaction or security whatsoever, save and except the following:

[Please state details of any mutual credit, mutual debts, or other mutual dealings between the corporate debtor and the creditor which may be set-off against the claim].

1. I undertake to update my claim as and when the claim is satisfied, partly or fully, from any source in any manner, after the insolvency commencement date.
2. I am / I am not a related party of the corporate debtor, as defined under section 5 (24) of the Code.
3. I am eligible to join committee of creditors by virtue of proviso to section 21 (2) of the Code even though I am a related party of the corporate debtor.

Date:

Place:

(Signature of the claimant)

VERIFICATION

I, [Name] the claimant hereinabove, do hereby verify that the contents of this proof of claim are true and correct to my knowledge and belief and no material fact has been concealed therefrom.

Verified at … on this …… day of ………., 20….

 (Signature of claimant)

[Note: In the case of company or limited liability partnership, the declaration and verification shall be made by the director/manager/secretary/designated partner and in the case of other entities, an officer authorised for the purpose by the entity.]

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