## FORM NO. ADT-2

[Pursuant to section 140(1) of the Companies Act, 2013 and rule 7(1) of the Companies (Audit and Auditors) Rules, 2014]



Application for removal of auditor(s) from his/their office before expiry of term

Pre-fill

(b) * SRN of relevant form filed for appointm	ent of the auditor
(c) * Category of auditor	Auditor's Firm
(d) * Membership number of the auditor or R number of the firm	Registration
(e) *Period for which the auditor was appoin	ted From To
9. * Whether any special notice has been recei	ived for removal of Auditors.  Yes  No
10. * Whether all due audit fee has been paid t	to the concerned Auditors. Yes No
11.Details of other services been rendered by	such Auditors to the company.
12. * Pendency of Audit i.e. number of financia	I years for which audit is pending

Financial year end date	State of accounts		Particulars			
* Whether there is any ne possession of Audit			counts Yes No			
ie possession of Additi	ors but not delivere	d back to the compa	irry.			
achments				Li	ist of attachme	ents
1. * Details of the gro	ounds for seeking re	moval of auditor;	Attach			
2. * Copy of the spec	ial resolution		Attach			
3. * Minutes of the annual general meeting or			Attach			
extraordinary ger	· ·					
4. Optional attachme	nts, if any		Attach			
				Re	move Attachn	nent
		Declara	ition			
I am authorized by the	Board of Directors	of the Company vide	resolution no. *		dated *	
•			anies Act, 2013 and the rule	s made thereun		of the subject
_			omplied with. I also declare t		·	-
true, correct and comp	olete including the at	tachments to this for	m and nothing material has	been suppresse	d.	
·	_		ū			
* To be digitally sign	ned by					
* Designation		7 L				
* Director identification DIN or PAN of the m Membership number	nanager or CEO or C	CFO; or				
Note: Attention is a	ilso drawn to prov	visions of Section 4	448 and section 449 of C	ompanies Act	2013 which r	orovide
for punishment for	•			paines /iet,		
				_		

For office use only:									
eForm Service request number (SRN)		eForm filing date	(0	DD/MM/YYYY)					
Digital signature of the authorising officer									
This e-Form is hereby approved		Confirm Submission							
This e-Form is hereby rejected									
Date of signing	(	DD/MM/YYYY)							