

FORM NO.SH-9



Declaration of Solvency

[Pursuant to section 68(6) of the Companies Act, 2013 and rule 17(3) of the Companies (Share Capital and Debentures) Rules, 2014]

Form language English Hindi

Refer the instruction kit for filing the form.

1.(a) * Corporate identity number (CIN) of the company

(b) Global location number (GLN) of the company

2. (a) Name of the company

(b) Address of registered office of the company

Zydus Corporate Park,Scheme No. 63, Survey No. 536
Khoraj(Gandhinagar),Nr. Vaishnodevi Circle,
Ahmedabad
Gandhinagar
Gujarat
382481

(c) email Id of the company

3.(a) * Whether the company is listed Yes No

(b) Name of the stock exchange(s)

(c) Date of listing(s)

(d) Name of the merchant banker appointed

4.(a) * Date of Board of Directors' resolution authorizing the buy-back of securities

(b) (i) Date of special resolution of members authorizing the buy-back of securities

Attachments

- | | |
|---|---------------------------------------|
| (1) * Copy of board resolution | <input type="button" value="Attach"/> |
| (2) * Statement of assets and liabilities | <input type="button" value="Attach"/> |
| (3) * Auditor's report | <input type="button" value="Attach"/> |
| (4) * Affidavit as per rule 17 (3) | <input type="button" value="Attach"/> |
| (6) Optional Attachments , if any | <input type="button" value="Attach"/> |

List of attachments

Declaration

We solemnly declare that we have made a full enquiry into the affairs of the company including the assets and liabilities of this company and have noted that the shareholders by a special resolution dated and the resolution passed by the Board at its meeting held on * have approved the buy -back of * (in numbers) * (in words) shares or other specified securities as per the provisions of section 68 of the Companies Act, 2013

* Verified this day the day of *

To be digitally signed by two directors, one of whom shall be the Managing director (if any)

* Designation

* DIN

* Designation Director

* DIN

Notes: Attention is drawn to provisions of Section 448 and 449 which provide for punishment for false statement / certificate and punishment for false evidence respectively.

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 authorizing officer

Date of signing (DD/MM/YYYY)