

Form 18

INSTRUCTIONS FOR FILLING OF EFORM – 18 **(Notice of situation or change of situation of registered office)**

IN CASE OF A NEW COMPANY

S. No.		Detailed Instructions
		Note: Instructions are not provided for the fields which are self explanatory
		Refer the relevant provisions of the Companies Act, 1956 and rules made there under with respect to the matter dealt in this eForm
2	(a)	Enter 'eForm 1A reference number, i.e. 'Service Request Number (SRN) of eForm 1A', filed for name approval
3	(a), (b), (c), (d)	Click the "Pre-fill" button. System will automatically display the Name of the company. Fields for address, name of office of existing Registrar of Companies (RoC) and purpose of the form will be disabled and are not required to be filled.
4	(a)	The registered office address of the company will always be from the date of incorporation. Enter the details of the address of the registered office of the company. Enter the email Id of the company for communication purposes. Ensure that this email ID is valid as intimation regarding processing of the eForms, important communication from RoC office shall also be communicated electronically at the email ID being mentioned here.
4	(b)	System will automatically display the name of office of proposed RoC on the basis of SRN of eForm 1A.
4	(c)	Enter the details of the address of the police station under whose jurisdiction the registered office of the company is situated.
Attachments		No mandatory attachment is required. Any other information can be provided as an optional attachment.
Verification		Select the second check box.
Digital signature		The eForm should be digitally signed by the managing director or director or manager or secretary whose name has been given in the articles of association of the company and is duly authorised by the promoters.
Designation		Select the designation of the person digitally signing the eForm. Enter the DIN in case the person digitally signing the eForm is a director or managing director Enter income-tax PAN in case the person digitally signing the eForm is a manager Enter membership number or income-tax PAN in case the person digitally signing the eForm is a secretary.
Certificate		The eForm should be certified by a chartered accountant (in whole-time practice) or cost accountant (in whole-time practice) or company secretary (in whole-time practice) by digitally signing the eForm. Select the relevant category of the professional and whether he/ she is an associate or fellow. In case the professional is a chartered accountant (in whole-time practice) or cost accountant (in whole-time practice), enter the membership number. In case the practising professional is a company secretary (in whole-time practice), enter the certificate of practice number.

IN CASE OF AN EXISTING COMPANY

S. No.		Detailed Instructions
		Note: Instructions are not provided for the fields which are self explanatory
		Refer the relevant provisions of the Companies Act, 1956 and rules made there under with respect to the matter dealt in this eForm

		Please Note: In case the registered office of the company is shifted from the jurisdiction of one RoC Office to another RoC office then the company is required to file both eForm 21 and eForm 18 only once. The filed eForms shall be available at both the RoCs for approval/ registration. Company shall be required to obtain the changed CIN and the Certificate for change of registered address from the RoC office, where the company is shifting (that is from the office of new RoC).
2	(a)	Enter Corporate Identity Number (CIN) of the company <ul style="list-style-type: none"> You may find CIN by entering existing registration number of the company in the 'Find CIN/GLN' service at the portal www.mca.gov.in
3	(a), (b), (c)	Click the "Pre-fill" button. System will automatically display the name, address of the registered office of the company and name of office of existing RoC.
3	(d)	Select the purpose of filing the form.
4	(a)	Enter the date from which the registered office of the company has changed. Enter the details of address of the changed registered office of the company. Enter the email Id of the company for communication purposes. Ensure that this email ID is valid as intimation regarding processing of the eForms, important communication from RoC office shall also be communicated electronically at the email ID being mentioned here.
4	(b)	Enter the name of office of new RoC. In case there is no change in the office of RoC, mention the name of office of existing RoC.
4	(c)	Enter the details of the address of the police station under whose jurisdiction the changed registered office of the company is situated.
5	(a), (b)	Enter the SRN of relevant eForm 23 in case purpose of the form is other than 'Change within local limits of city, town or village' Enter the SRN of relevant eForm 1AD in case of shifting of registered office from one RoC to another within the same state. Enter the SRN of relevant eForm 21 in case of shifting of registered office from one state to another.
6	(a), (b)	Enter the date of order of company law board (CLB) or any other competent authority and petition number in case of change of registered office from one state to another.
Attachments		Copy of the board resolution in case the company's registered office is shifted within the local limits of the city or town or village in which it was earlier situated is to be enclosed Copy of the special resolution in case the company's registered office is shifted outside the local limits of the city or town or village in which it was earlier situated is to be enclosed. Any other information can be provided as an optional attachment.
Verification		Select the first check box and enter the serial number and date of board resolution authorising the signatory to sign and submit the eForm.
Digital signature		The eForm should be digitally signed by the managing director or director or manager or secretary of the company duly authorised by the board of directors.
Designation		Select the designation of the person digitally signing the eForm. Enter the DIN in case the person digitally signing the eForm is a director or managing director Enter income-tax PAN in case the person digitally signing the eForm is a manager Enter membership number or income-tax PAN in case the person digitally signing the eForm is a secretary.
Certificate		The eForm should be certified by a chartered accountant (in whole-time practice) or cost accountant (in whole-time practice) or company secretary (in whole-time practice) by digitally signing the eForm. Select the relevant category of the professional and whether he/ she is an associate or fellow. In case the professional is a chartered accountant (in whole-time practice) or cost accountant (in whole-time practice), enter the membership number. In case the practising professional is a company secretary (in whole-time practice), enter the certificate of practice number.

Common Instruction Kit

Buttons	Particulars
Pre-fill	When the user clicks the pre fill button after entering the corporate identity number in eForm (excepting eForm 1A), the name and address is displayed by the system. This button may appear more than once in an eForm, and shall be required to be clicked for displaying the data pertaining to that field. You are required to be connected to the internet for pre-filling.
Attach	You have to click the attach button corresponding to the document you are making an attachment. In case you wish to attach any other document, please click the optional attach button.
Remove attachment	You can view the attachments added to eForm in the rectangle box provided next to the list of attachment. If the user wants to remove or delete any attachment, select the attachment to be removed and press the "Remove attachment" button.
Check Form	Once the eForm is filled up. The user is required to press the Check Form button. When this button is pressed form level validation is done such as, Whether all the mandatory fields are filled up or not. If an error is displayed after pressing the button the user is required to correct the mistake and again press the "Check Form" button. When all the form level validation is done. A message is displayed that "Form level pre scrutiny is successful". The Check Form is done without being connected to the internet.
Modify	"Modify" button gets enabled after the check form is done. By pressing this button the user can make the changes in the filled in eForm. If the user makes any change in the eForm again the user is required to press the "Check Form" button.
Pre scrutiny	Once the check form is done the user is required to Pre scrutinize the eForm. This requires being connected to the MCA21 site for uploading the eForm. On pre-scrutiny the system level check is performed and if there are any errors it is displayed to the user and once the error is corrected and again on Pre scrutiny if the message displayed is "No errors found. Click on the button below to "Get Form" Press the Get Form button and make the required corrections. Note: before pressing Submit button attach the digital signature by clicking on the box appearing on the signature field <input type="text"/>
Submit	After pre scrutiny is done the user is required to submit the eForm. This requires being connected to the MCA21 site for uploading the eForm. Once the eForm is submitted the fee is displayed to the user. When the user press the "Pay" button the mode of payment option is displayed. On challan payment option, a challan is generated displaying the amount of fee to be paid. The user is required to take the print out of three copies of challan and submit the payment at authorized bank branch. The user has to submit three copies at bank and user shall receive one copy with bank acknowledgment for user's record.
Country code	The list of country code required to be mentioned in the form are as follows:

Note: User is advised to refer to eForm specific instruction kit.

List of ISO Country Code

Country Name	Country Code	Country Name	Country Code
AFGHANISTAN	AF	CAPE VERDE	CV
ÅLAND ISLANDS	AX	CAYMAN ISLANDS	KY
ALBANIA	AL	CENTRAL AFRICAN REPUBLIC	CF
ALGERIA	DZ	CHAD	TD

Country Name	Country Code	Country Name	Country Code
AMERICAN SAMOA	AS	CHILE	CL
ANDORRA	AD	CHINA	CN
ANGOLA	AO	CHRISTMAS ISLAND	CX
ANGUILLA	AI	COCOS (KEELING) ISLANDS	CC
ANTARCTICA	AQ	COLOMBIA	CO
ANTIGUA AND BARBUDA	AG	COMOROS	KM
ARGENTINA	AR	CONGO	CG
ARMENIA	AM	CONGO, THE DEMOCRATIC REPUBLIC OF THE	CD
ARUBA	AW	COOK ISLANDS	CK
AUSTRALIA	AU	COSTA RICA	CR
AUSTRIA	AT	COTE D'IVOIRE	CI
AZERBAIJAN	AZ	CROATIA	HR
BAHAMAS	BS	CUBA	CU
BAHRAIN	BH	CYPRUS	CY
BANGLADESH	BD	CZECH REPUBLIC	CZ
BARBADOS	BB	DENMARK	DK
BELARUS	BY	DJIBOUTI	DJ
BELGIUM	BE	DOMINICA	DM
BELIZE	BZ	DOMINICAN REPUBLIC	DO
BENIN	BJ	ECUADOR	EC
BERMUDA	BM	EGYPT	EG
BHUTAN	BT	EL SALVADOR	SV
BOLIVIA	BO	EQUATORIAL GUINEA	GQ
BOSNIA AND HERZEGOVINA	BA	ERITREA	ER
BOTSWANA	BW	ESTONIA	EE
BOUVET ISLAND	BV	ETHIOPIA	ET
BRAZIL	BR	FALKLAND ISLANDS (MALVINAS)	FK
BRITISH INDIAN OCEAN TERRITORY	IO	FAROE ISLANDS	FO
BRUNEI DARUSSALAM	BN	FIJI	FJ
BULGARIA	BG	FINLAND	FI
BURKINA FASO	BF	FRANCE	FR
BURUNDI	BI	FRENCH GUIANA	GF
CAMBODIA	KH	FRENCH POLYNESIA	PF
CAMEROON	CM		
CANADA	CA		
GABON	GA	FRENCH SOUTHERN TERRITORIES	TF
GAMBIA	GM	LAO PEOPLE'S DEMOCRATIC REPUBLIC	LA
GEORGIA	GE	LATVIA	LV
GERMANY	DE	LEBANON	LB
GHANA	GH	LESOTHO	LS
GIBRALTAR	GI	LIBERIA	LR
GREECE	GR	LIBYAN ARAB JAMAHIRIYA	LY
GREENLAND	GL	LIECHTENSTEIN	LI
GRENADA	GD	LITHUANIA	LT

Country Name	Country Code	Country Name	Country Code
GUADELOUPE	GP	LUXEMBOURG	LU
GUAM	GU	MACAO	MO
GUATEMALA	GT	MACEDONIA, THE FORMER YUGOSLAV REPUBLIC OF	MK
GUINEA	GN	MADAGASCAR	MG
GUINEA-BISSAU	GW	MALAWI	MW
GUYANA	GY	MALAYSIA	MY
HAITI	HT	MALDIVES	MV
HEARD ISLAND AND MCDONALD ISLANDS	HM	MALI	ML
HOLY SEE (VATICAN CITY STATE)	VA	MALTA	MT
HONDURAS	HN	MARSHALL ISLANDS	MH
HONG KONG	HK	MARTINIQUE	MQ
HUNGARY	HU	MAURITANIA	MR
ICELAND	IS	MAURITIUS	MU
INDIA	IN	MAYOTTE	YT
INDONESIA	ID	MEXICO	MX
IRAN, ISLAMIC REPUBLIC OF	IR	MICRONESIA, FEDERATED STATES OF	FM
IRAQ	IQ	MOLDOVA, REPUBLIC OF	MD
IRELAND	IE	MONACO	MC
ISRAEL	IL	MONGOLIA	MN
ITALY	IT	MONTSERRAT	MS
JAMAICA	JM	MOROCCO	MA
JAPAN	JP	MOZAMBIQUE	MZ
JORDAN	JO	MYANMAR	MM
KAZAKHSTAN	KZ	NAMIBIA	NA
KENYA	KE	NAURU	NR
KIRIBATI	KI	NEPAL	NP
KOREA, DEMOCRATIC PEOPLE'S REPUBLIC OF	KP	NETHERLANDS	NL
KOREA, REPUBLIC OF	KR	NETHERLANDS ANTILLES	AN
KUWAIT	KW	NEW CALEDONIA	NC
KYRGYZSTAN	KG	NEW ZEALAND	NZ
		NICARAGUA	NI
		NIGER	NE
		NIGERIA	NG
NIUE	NU	SPAIN	ES
NORFOLK ISLAND	NF	SRI LANKA	LK
NORTHERN MARIANA ISLANDS	MP	SUDAN	SD
NORWAY	NO	SURINAME	SR
OMAN	OM	SVALBARD AND JAN MAYEN	SJ
PAKISTAN	PK	SWAZILAND	SZ
PALAU	PW	SWEDEN	SE
PALESTINIAN TERRITORY, OCCUPIED	PS	SWITZERLAND	CH
PANAMA	PA	SYRIAN ARAB REPUBLIC	SY
PAPUA NEW GUINEA	PG	TAIWAN, PROVINCE OF CHINA	TW
PARAGUAY	PY	TAJIKISTAN	TJ

Country Name	Country Code	Country Name	Country Code
PERU	PE	TANZANIA, UNITED REPUBLIC OF	TZ
PHILIPPINES	PH	THAILAND	TH
PITCAIRN	PN	TIMOR-LESTE	TL
POLAND	PL	TOGO	TG
PORTUGAL	PT	TOKELAU	TK
PUERTO RICO	PR	TONGA	TO
QATAR	QA	TRINIDAD AND TOBAGO	TT
REUNION	RE	TUNISIA	TN
ROMANIA	RO	TURKEY	TR
RUSSIAN FEDERATION	RU	TURKMENISTAN	TM
RWANDA	RW	TURKS AND CAICOS ISLANDS	TC
SAINT HELENA	SH	TUVALU	TV
SAINT KITTS AND NEVIS	KN	UGANDA	UG
SAINT LUCIA	LC	UKRAINE	UA
SAINT PIERRE AND MIQUELON	PM	UNITED ARAB EMIRATES	AE
SAINT VINCENT AND THE GRENADINES	VC	UNITED KINGDOM	GB
SAMOA	WS	UNITED STATES	US
SAN MARINO	SM	UNITED STATES MINOR OUTLYING ISLANDS	UM
SAO TOME AND PRINCIPE	ST	URUGUAY	UY
SAUDI ARABIA	SA	UZBEKISTAN	UZ
SENEGAL	SN	VANUATU	VU
SERBIA AND MONTENEGRO	CS	VENEZUELA	VE
SEYCHELLES	SC	VIET NAM	VN
SIERRA LEONE	SL	VIRGIN ISLANDS, BRITISH	VG
SINGAPORE	SG	VIRGIN ISLANDS, U.S.	VI
SLOVAKIA	SK	WALLIS AND FUTUNA	WF
SLOVENIA	SI	WESTERN SAHARA	EH
SOLOMON ISLANDS	SB	YEMEN	YE
SOMALIA	SO	ZAMBIA	ZM
SOUTH AFRICA	ZA	ZIMBABWE	ZW
SOUTH GEORGIA AND THE SOUTH SANDWICH ISLANDS	GS		