

## FORM DIR-2

Consent to act as a Director of a Company

[Pursuant to section 152(5) and rule 8 of Companies (Appointment and Qualification of Directors) Rules, 2014]

To,  
The Board of Directors  
JMT AUTO LIMITED

3-L S C POMPOSH ENCLAVE, GURU NANAK MRKT,  
OPP L.S.C MARKET, NEW DELHI South Delhi DL 110048

I, Rajiv Kapur Kanika Kapur S/o Mr. Rajiv Kapur R/o 302 EESHAN TOWER, PN-L/7, HOUSE NO: 258, SHIVAJI NAGAR,NAGPUR,Maharashtra-440010,hereby give my consent to act as a Director of **JMT AUTO LIMITED**, pursuant to Sub-section (5) of Section 152 of the Companies Act, 2013 and certify that I am not disqualified to become a director under the Companies Act, 2013.

1. Director Identification Number (DIN) : 07154667
2. Name : Rajiv Kapur Kanika Kapur
3. Father's Name : Mr. Rajiv Kapur
4. Address : 302 EESHAN TOWER, PN-L/7, HOUSE NO:258,  
Shivaji Nagar,Nagpur,Maharashtra-440010
5. PAN Card : BCBPK4558H
6. Occupation : Service
7. Date of Birth : 16/10/1983
8. Nationality : Indian
9. Phone Number& E mail Id : 9873446307, Kanu\_kapur@yahoo.co.in
10. Particulars of membership No. and Certificate of practice no. if the applicant is a member of any professional Institute: N.A

Number of companies in which I am already a Director and out of such companies the names of the companies in which I am a Managing Director, Chief Executive Officer. Whole Time Director, Secretary, Chief Financial Officer and Manager:  
1

### DECLARATION

I declare that I have not been convicted of any offence in connection with the promotion, formation or management of any company or LLP and have not been found guilty of any fraud or misfeasance or of any breach of duty to any company under this Act or any previous company law in the last five years. I further declare that if appointed my total Directorship in all the companies shall not exceed the prescribed number of companies in which a person can be appointed as a Director.

*Kanika Kapur*

**Rajiv Kapur Kanika Kapur**  
DIN: 07154667  
302 EESHAN TOWER, PN-L/7,HOUSE NO:258,  
SHIVAJI NAGAR,NAGPUR,Maharashtra-440010

**Date:**  
**Place:** New Delhi

**Attachment:**  
1. Proof of identity;  
2. Proof of residence;