

**SECOND SCHEDULE**

**FORM D**

**INSOLVENCY AND BANKRUPTCY BOARD OF INDIA**

**CERTIFICATE OF RECOGNITION**

**INSOLVENCY PROFESSIONAL ENTITY RECOGNITION NO. \_\_**

*[Under Regulation 13 of the Insolvency and Bankruptcy Board of India (Insolvency Professionals) Regulations, 2016]*

1. In exercise of the powers conferred by Regulation 13 of the Insolvency and Bankruptcy Board of India (Insolvency Professionals) Regulations, 2016 the Board hereby grants a certificate recognising *[insert name]*, as an insolvency professional entity.
2. This certificate of recognition shall be valid from *[insert start date]*.

Sd/-

(Name and Designation)

For and on behalf of Insolvency and Bankruptcy Board of India

Place:

Date:

DR. M. S. SAHOO, Chairperson