

**Form No. 14**  
**[See sub-rule (2) of rule 42]**  
**[Heading as in form no 16]**  
**LLP Petition No..... of 20.....**

1. LLPIN
2. Name of the Limited Liability Partnership
3. Name and address of the Liquidator
4. Name of the practising professional , experts etc,  
appointed by Liquidator to assist him
5. Address of practising professional , experts etc,
6. Date of appointment
7. Purpose of appointment
8. In pursuance to rule 42(2) of the rules. I hereby declare that there is no conflict of  
interest and not lack of independence in respect of my appointment.

**Verification**

To the best of my knowledge and belief, the information given in the form is correct and complete.

I have gone through the provisions of the Limited Liability Partnership Act, 2008, the rules framed there under.

[Sd]

Name .....

Capacity..... (Professional/expert etc.)

