

Fill in the form on your computer or legibly by hand.  
Sign the application form and send in the original.  
When the matter has been registered we shall  
send you an extract from the register (in Swedish).

Skickas till | Send to  
**Bolagsverket**  
851 81 Sundsvall

**Org.nr | Registration number    Företagsnamn (firma) | Business name**

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**Anmälan avser | Application for registration of**

<input type="checkbox"/> Att företaget trätt i frivillig likvidation   The company has gone into voluntary liquidation	<input type="checkbox"/> Förslag till   Proposal for Likvidatorer   Liquidators Likvidatorssuppleanter   Deputy liquidators	<input type="checkbox"/> Firmateckning   Signatory power
<input type="checkbox"/> Revisor   Auditor Revisorssuppleanter   Deputy auditor	<input type="checkbox"/> Adressändring   Change of address	

**Dag då företaget ska försättas i likvidation | Date of commencement of the liquidation**

<input type="checkbox"/> Omedelbart, dvs dag för bolagsstämman   Immediately, i.e. the date of the shareholders meeting	<input type="checkbox"/> Den dag som anges i bolagsstämmoprotokollet   The date stated in the minutes from the shareholders meeting (see the information below): _____
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**Ombud/kontaktperson i detta ärende | Agent/contact person in this matter** If the enterprise does not have an agent/special contact person for this matter, you need not fill in this section. In that case all documents regarding this application (e.g. the extract of the register) will be sent to the business address registered with us.

Företagsnamn   Company name		Kontaktpersonens förnamn och efternamn   First name and surname of the contact person	
Ombudets/kontaktpersonens postadress   Postal address of the agent/contact person		Ombudets/kontaktpersonens e-postadress   E-mail address of the agent/contact person	
Postnummer   Postcode	Ombudets/kontaktpersonens postort   Post town of the agent/contact person	Telefonnummer dagtid   Phone number daytime	

**Adressändring | Change of address** If no address is reported, we shall register the liquidator's address. Remember to sign the application form.

Ny postadress   New postal address	
Postnummer   Postcode	Postort   Post town

**Förslag till likvidator | Proposal for liquidator** Is always appointed by Bolagsverket.

Personnummer   Personal identity number	Titel   Title		
Efternamn   Surname	Samtliga förnamn   All first names		
Postadress   Postal address	Postnummer   Postcode	Postort   Post town	
Land   Country	Telefonnummer dagtid   Phone number daytime	Faxnummer   Fax number	

**Registreringsavgift | Registration fee**

The fee should be paid at the same time as the application form is sent to Bolagsverket. To enable us to match the fee with your application, you must state the registration number or business name when paying. The fee cannot be refunded, once we have started the examination of the application. See [www.bolagsverket.se](http://www.bolagsverket.se) for current prices and fees.

Avgiften betald, datum   Date of payment	Betalt belopp   Amount paid	Betalningsätt   Method of payment	
		<input type="checkbox"/> Bank giro 5050-0255	<input type="checkbox"/> Plusgiro 95 06 08-0 <input type="checkbox"/> Cheque

**Förslag till likvidatorssuppleant | Proposal for deputy liquidator** If proposed.

Personnummer   Personal identity number	Titel   Title		
Efternamn   Surname	Samtliga förnamn   All first names		
Postadress   Postal address	Postnummer   Postcode	Postort   Post town	
Land   Country	Telefonnummer dagtid   Phone number daytime	Faxnummer   Fax number	

**Revisor | Auditor** If appointed.

Personnummer   Personal identity number	Hemvist (folkbokförd i kommun)   Domicile (registered in the municipality of)		
Efternamn   Surname	Samtliga förnamn   All first names		
Postadress   Postal address	Postnummer   Postcode	Postort   Post town	

**Revisorssuppleant | Deputy auditor** If appointed.

Personnummer   Personal identity number	Hemvist (folkbokförd i kommun)   Domicile (registered in the municipality of)		
Efternamn   Surname	Samtliga förnamn   All first names		
Postadress   Postal address	Postnummer   Postcode	Postort   Post town	

**Firmateckning | Signatory power** Signatory power must **always** be stated.

<input type="checkbox"/> 1) Firman tecknas av likvidatorn   The liquidator is entitled to sign on behalf of the company
<input type="checkbox"/> 2) Firman tecknas av likvidatorerna var för sig   The liquidators, individually, are entitled to sign on behalf of the company
<input type="checkbox"/> 3) Firman tecknas av likvidatorerna i förening   The liquidators, jointly, are entitled to sign on behalf of the company
<input type="checkbox"/> 4) Firman tecknas i enlighet med bilagt protokoll från sammanträde med likvidatorerna   The entitlement to sign on behalf of the company as stated in the enclosed minutes from the meeting with the liquidators

**Likvidatorernas bekräftelse | The liquidator's confirmation** Enclose a list of qualifications (CV) showing the liquidator's competence.

<b>I hereby confirm that</b>	
- I accept the assignment as liquidator.	
Namnteckning   Signature	Namnförtydligande   Clarification of signature (typed or in block letters)

**Försäkran och underskrift | Declaration and signature**

The application form must always be signed by an authorized representative for the company.

<b>I do solemnly and sincerely declare that</b>		
- All the above-mentioned, auditors and deputy auditors have not been declared bankrupt and do not have custodians as stipulated in Article 11, section 7 of the Parental Code.		
- The company' s auditors meet the qualification requirements as stipulated in Article 9, sections 10-13 of the Companies Act, and concerning credit market companies, the qualification requirements as stipulated in Article 10, section 9, first paragraph of the Act on Banking and Financing Operations.		
- The persons appointed auditors and deputy auditors have accepted the assignments.		
Datum   Date	Funktion   Function	
Postadress   Postal address	Postnummer   Postcode	Postort   Post town
Namnteckning   Signature	Namnförtydligande   Clarification of signature (typed or in block letters)	

## **Attachments and information**

A liquidation procedure is winding-up of a company by converting the assets of the company into money, paying all the debts and dividing the surplus, if any, between the shareholders. When liquidation has been decided, the company is represented by the board of directors and the managing director until one or more liquidators have been appointed. Thereafter the liquidators represent the company, and their task is to accomplish the liquidation, i.e. wind up the company until it has been dissolved. Bolagsverket appoints the liquidator for the company.

The shareholders' meeting decides on the liquidation. The shareholders' meeting attends to reporting the decision on the liquidation to Bolagsverket for appointment of a liquidator. The company may propose a suitable liquidator to Bolagsverket.

## **Application for registration must contain**

- information on the registration number of the company
- information on the date of commencement of the liquidation (if liquidation is to commence at a later date); please note that this date cannot be set at a later date than the first day of the start of the next financial year, unless the articles of association prescribes a later date
- personal particulars for all the proposed liquidators, deputy liquidators and other special signatories appointed by the liquidators
- the personal particulars must include
  - name in full
  - personal identity number
  - postal address and
  - the municipality in which the person is registered (domiciled) as well as
- information on signatory power during the liquidation procedure. If the signatory power is decided in a different way than "jointly by all the liquidators", a certified copy of the minutes from a meeting with all the liquidators, stating the signatory power, must be enclosed. During the liquidation procedure the signing on behalf of the company must be followed by the addition "in liquidation" or similar.

Further, the company must report which address the company will have during the liquidation, normally the address of the liquidator.

## **Attachments which must always be enclosed to the application:**

- A certified copy of the minutes from the shareholders' meeting showing the decision on liquidation. When the shareholders' meeting has decided liquidation, the liquidation will normally take effect from the date of the decision of the shareholders' meeting, i.e. the date of the minutes. Mark with an X in the field for "Immediately", i.e. the date of the shareholders' meeting (see page 1). If the shareholders' meeting has decided liquidation as of a later date, mark with an X in the other field and state the date as mentioned in the minutes from the shareholders' meeting, (see page 1); please note that this date cannot be set at a later date than the first day of the next financial year unless the articles of association prescribes a later date.
- A curriculum vitae for the liquidator, in which the proposed liquidator shows his competence to act as such.

An authorized representative for the company or an agent with power of attorney must sign the application for voluntary liquidation.

More information on [www.bolagsverket.se](http://www.bolagsverket.se).

**An example of the contents of the minutes of a shareholders' meeting:**

Organisationsnummer \_\_\_\_\_

Protokoll för vid extra bolagsstämma med aktieägarna i \_\_\_\_\_ den \_\_\_\_\_ i \_\_\_\_\_.

§ 1. Till ordförande vid bolagsstämman utsågs \_\_\_\_\_ och till justeringsman \_\_\_\_\_

§ 2. Följande förteckning över närvarande aktieägare upprättades:

Namn	Antal aktier	Antal röster
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
Summa:	_____	_____

Ovanstående förteckning godkändes som röstlängd.

§ 3. Bolagsstämman konstaterades vara sammankallad i behörig ordning och dagordningen godkändes.

§ 4. Bolagsstämman beslutade att \_\_\_\_\_ skulle träda i likvidation \_\_\_\_\_. Stämman beslutade att \_\_\_\_\_ skulle ges i uppdrag att ge in anmälan om likvidation till Bolagsverket. Till likvidator föreslås \_\_\_\_\_.

§ 5. Bolagsstämman avslutades.

Ordförande vid bolagsstämman

Justeringsman

.....

.....

**A translation of the contents of the above minutes:**

Registration number

Minutes kept at the extraordinary shareholders' meeting of (company name) on (date) in (place).

§ 1. (Name) was appointed chairman of the shareholders' meeting and (name) was appointed person to verify the minutes.

§ 2. List of the present shareholders:

Name	Number of shares	Number of votes
_____	_____	_____
_____	_____	_____
_____	_____	_____
Sum:	_____	_____

The above list was approved as voting list.

§ 3. It was determined that the shareholders' meeting was summoned in due course and the agenda was approved of.

§ 4. The shareholders' meeting decided that (name of the company) should go into liquidation on (date). The meeting decided that (name of an authorized representative) be appointed as the person to report the liquidation to Bolagsverket. The meeting proposes (name) as liquidator.

§ 5. The shareholders' meeting was concluded.

Signed by the chairman of the meeting

and by the verifying person