



Quick-Phone: 1300 66 86 09

Quick-Fax: 1300 66 87 09

COMPANY DEREGISTRATION ORDER FORM

Name: _____

Firm: _____

Phone: _____

Email: _____

COMPANY DETAILS

Company Name: _____

ACN: _____

REGISTERED OFFICE

At the office of - c/- _____

Unit or office _____ level _____ building name _____

Street number & name _____

Suburb/City _____ State/Territory _____ Postcode _____

DIRECTOR DETAILS

Please provide the name of the Company Director who will sign the ASIC form

Family Name _____ Given Name/s _____

Residential Address _____
(not PO Box)

SHAREHOLDER/S DETAILS

NOTE: FULL names of ALL shareholders must be included

Full Name _____
(include ACN if Company)

Full Name _____
(include ACN if Company)

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(include ACN if Company)

Full Name _____
(include ACN if Company)

COMPULSORY DECLARATION

NOTE: A company cannot apply to be deregistered under subsection 601AA(1) and (2) of the Corporations Act 2001 (Cth) unless:

- (a) all members agree to the deregistration;
- (b) the company is not carrying on business;
- (c) the company's assets are worth less than \$1000.00;
- (d) the company has paid all fees and penalties payable under this Act;
- (e) the company has no outstanding liabilities; and
- (f) the company is not party to any legal proceedings.

PAYMENT DETAILS

Please debit the following credit card by the amount of \$ 144.00 (inc GST)

TYPE OF CARD: Visa Mastercard Diners Club Amex Bankcard

CARD NUMBER: _____ EXPIRY DATE: (/)

NAME ON CARD: _____ SIGNATURE: _____

Please return this application to FAX 1300 668 709 or call 1300 668 609 with any queries