Form IV

(Regulation 2B)



**THE PATENTS AND COMPANIES REGISTRATION AGENCY**

**The Corporate Insolvency Act**

**(Act No. 9 of 2017)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**The Corporate Insolvency (Insolvency Practitioner Accreditation)**

**Regulations, 2022**

 **APPLICATION FOR VARIATION OFACCREDITATION**

 **Please write in BLOCK LETTERS** Shaded fields for Application No.:

 Official use only Date/Time

 Information Required Information Provided

 **PART I**

**TO BE COMPLETED BYAPPLICANT**

1. Name (s) of Applicant: Plot No.:

Street:

Postal Address: Telephone No.: Mobile Phone No.: E-mail Address: Town:

District; Province:

Country:

 **PART II**

 **TYPE OF VARIATION**

2.

 **PARTICULARS OF**

 **VARIATION DESCRIPTION OF VARIATION**

(a) (b) (c)

 3.  **EXISTING** **PROPOSED VARIATION** **REASONS**

OFFICIAL STAMP

4.  **Attachment**

Relevant documents relating to proposed variation as required by the Registrar

DECLARATIONAND SIGNATURE

I declare that all the information I have stated is correct and truthful to the best of my knowledge and belief.

……………………………………… …………………………………………

Name Designation

……………………………………… ......……………………………………

Signature Date

FOR OFFICIAL USE ONLY

Date of Submission: .............................................................................................................. Application Number: ........................................................................................................... Payment Receipt No.: ......................................................................................................... Application accepted (Proceed for inspection): .................................................................. Application rejected (Notify applicant): .............................................................................

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Registrar