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INCORPORATED CELL COMPANIES ACT 2010

APPLICATION FOR THE DISCONTINUATION OF AN INCORPORATED CELL (IC) INCORPORATED UNDER THE COMPANIES ACT 2006

Pursuant to Part 2 of the
Incorporated Cells Regulations 2011

Company Name:	
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1. I/We, the under mentioned applicant, hereby apply for the above company to be discontinued in the Isle of Man and continued in, under the provisions of the above Regulations.

2. The following documents are attached as part of this application:
 - (a) a certified copy of a resolution of the members passed by a majority vote of 75% of each class of members and authorising the company's continuance in a named country or territory outside the Isle of Man;
 - (b) statutory declarations by all the company's directors containing the requirements of Para 6. (4)(b) of the above Regulations;
 - (c) a copy of a notice published at least 14 days prior to this application in two newspapers published and circulating in the Isle of Man and one newspaper circulating throughout the country or territory in which the company is to be continued containing the provisions of Para 6. (4)(c) of the above Regulations;
 - (d) an irrevocable and legally binding undertaking executed by the company and its directors containing the requirements of Para. 6. (4)(d) of the above Regulations;
 - (e) a copy of a notice delivered to all shareholders of the company at least 14 days prior to the application containing the requirements of Para. 6. (4)(e) of the above Regulations;
 - (f) the written consent to the making of this application from the Incorporated Cell Company (ICC) **and** the company incorporated in the country referred to in para. 1 above of which the IC is to become an incorporated cell;
 - (g) the written consent to the making of this application by the holders of all charges for the time being registered under Section 138 of the Companies Act 2006(if any);
 - (h) a certificate signed by an advocate in terms of Para. 6. (4)(h) of the above Regulations; and
 - (i) letters of consent to the making of this application from the Income Tax Division and Customs and Excise Division of the Treasury Department and from the Insurance and Pensions Authority.

For Official Use only:

Co No

Form Number IC14

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3. Details of the Applicant:

Name:	
Address:	
Post Code:	
Relationship to company:	

<hr/> Signature of Applicant <hr/> <hr/> (Print Name)	Dated: __ / __ / ____ (dd) (mm) (yyyy)
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