

Department for Enterprise COMPANIES REGISTRY

Requisition for a Certificate of Good Standing

A Standard Service Certificate costs £50 (48 hours) per certificate

Standard Service Certificates will be e-mailed and posted so please provide e-mail & address details below

Or

A Priority Service Certificate costs £100 (3 hours) & must be ordered before 2.30pm

Priority Certificates will be e-mailed and posted – unless asked to collect – please circle YES below for collection

Priority Service Certificate Payment MUST be made by card, cash or cheque (not bank transfer)

Where a request is received for a certificate to be dated on a particular day, this will be classed as a Special request & will require the same payment as a Priority request (£100)

Companies Registry, Registries Building, Deemsters Walk, Bucks Road, Douglas, Isle of Man, IM1 3AR
Tel: +44 (0) 1624 689389 Email: companies@gov.im

Company Name & Number.....

Ordered By...:.....

Address Cert to be Posted to:.....

.....

Cert to be collected from Office - (Priority Service Only) YES/NO

E-Mail Address.....

Phone Number: Date:

The summary will ALWAYS contain the following information:

- (1) The date of incorporation of the Company/Re-Registration/Continuance;
- (2) The Registered Office Address of the Company;
- (3) The last annual return date of the company (if filed);
- (4) The name of the Registered Agent;
- (5) The company is on the register of companies and is in Good Standing with this office;
- (6) There are no documents on the company file relating to winding up or dissolution of the company or the appointment of a receiver in respect of any of its assets;
- (7) No proceedings to strike the name of the company off the register of companies have been instituted.

For official use only:

Order Received/Completed by..... Date.....

A Standard Service Certificate of Fact costs £50.00 per certificate (48 Hours)

Or

A Priority Service Certificate of Fact cost £100 per certificate (3 Hours) - must be ordered before 2.30pm

Payment methods:

Cheques must be drawn on a UK clearing bank and made payable to the Isle of Man Government.

Alternatively, please complete the following instruction to debit your credit/debit card: -

If this request is being sent by post, e-mail or fax, the following section must be completed.

Please debit my account with the total amount shown: £

Mastercard Switch Visa Credit/Debit * (* delete which doesn't apply)

Other, please specify **Please note we cannot accept American Express**

The name of the card issuer:

Start date (debit cards only) / ___/ ___/ Expiry Date (all cards) / ___/ ___/

Signature _____

Card issue number (if present) for Switch and Solo Cards:

Card Number

Security Code (This is the Last 3 digits on the back of your card)

Cardholder's name and initial as they appear on the card:

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Cardholder's full postal address/statement address (if different to delivery address):

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