

Application for Company Closure

Company Name _____ **Contact Number** _____

Premises Leased _____ **Location** _____ **Lease Exp.** _____

License Type _____ **License No.** _____ **License Exp.** _____

Legal Status: FZE FZC Branch of Local/Foreign Company

I / We being the Owner/Shareholder of the above mentioned Company, hereby declare that subject to approval of the SPC FZ, we wind up and deregister the Company in best interest of the business and in that regard I/we hereby give notice to liquidate my company

- With immediate effect (within 15 days of acceptance of closure application).
- Upon Expiry of its tenure i.e. _____
- After serving 90 days notice with effect from acceptance of closure application.

Reason for deregistration/liquidation:

Authorized representative for deregistration/liquidation on behalf of Company

- Name _____
- Contact Mobile _____
- Local Fax number _____
- Email ID _____

We the undersigned hereby declare and certify that the above details are accurate & confirm that the signature(s) in this request & attached board resolution (if applicable) is true & correct. In the event of any discrepancy to the above mentioned information, the undersigned and the company will be liable to Local and Federal Rules and any other penalty without prejudice and compensation by SPC Free Zone, any approval and the resultant documents and transactions will be treated as null and void with retrospective effect.

Authorized Signatory & Company Stamp	For SPC FREE ZONE official use (Signature Verified)
---	--

For SPC Free Zone Official use -----

Lease Amt.	Notice Date	Lease Expiry	Days Remaining	Notice Period	Chargeable Days	Completion Date	Notice period charges	Closing Down Fees
After 90 days								

Contents	Chargeable Amount	
CLOSING DOWN CHARGES		REMARKS ENTERED
PUBLICATION FEE		File Location Number