


 Fill in the form on your computer or legibly by hand. Sign the form and send in the original. **More information on page 2.**

Skicka till | Send to

**Bolagsverket**

SE-851 81 Sundsvall, Sweden

**1. Org. nr | Registration no.      Företagsnamn | Business name**


**2. Kontaktperson | Contact person for this case** Fill in your email address and telephone number so we can contact you easily.

Kontaktpersonens förnamn och efternamn   First name and surname of the contact person		Företagsnamn   Business name	
Postadress   Postal address		Postnr   Postcode	Postort   Town/City
E-postadress   Email address		Telefonnr   Phone no. daytime	Deposit account, if any, 3 digits

**3. Anmälan gäller | Application regarding**

<input type="checkbox"/> Att företaget har gått i likvidation   The partnership has gone into liquidation	<input type="checkbox"/> Att likvidationen har avslutats   The liquidation has been completed
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**4. Dag för likvidation | Date of liquidation**

Datum då företaget ska gå i likvidation   Date of liquidation of the partnership	Datum då likvidationen avslutades   Date of completion of the liquidation
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**5. Företagets nya adress | The new address of the partnership**

Postadress   Postal address	
Postnummer   Postcode	Postort   Town/City
Kommun   Municipality	Län   County
E-postadress   Email address	
<input type="checkbox"/> Ta bort e-postadressen   Remove registered email address	

**6. Firmateckning | Signatory power**

<input type="checkbox"/> 1) Firmateckningen kvarstår   Signatory power is unchanged	<input type="checkbox"/> 2) Firman tecknas av bolagsmännen eller komplementärerna gemensamt   The partners or the general partners, together, are entitled to sign on behalf of the partnership	<input type="checkbox"/> 3) Firman tecknas enligt nedan   Signatory power is as stated below
Fyll i eventuell annan firmateckning här   If applicable, fill in another alternative for the signatory power here. Please note that the information must be in Swedish.		

**7. Övrigt | Other matters**


**8. Underskrifter | Signatures** The form must be signed by all the partners. Please use blue ink.

Datum   Date	
Namnteckning   Sign name	Namnförtydligande   Print name
_____	_____
_____	_____

**9. Registreringsavgift | Registration fee** Pay the fee to bank giro number 5050-0255.

Betalt belopp   Amount paid	Datum   Date of payment	
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## Information

**Use this form for notifying us of a liquidation of a trading partnership or a limited partnership, or for notifying us that the liquidation has been completed. More information is available on [bolagsverket.se](http://bolagsverket.se). When the application has been registered we will send you a registration certificate in Swedish.**

Liquidation means that the partnership will be dissolved by converting the assets into cash, the debts will be paid and the surplus, if any, will be divided between the partners of a trading partnership or the general and limited partners of a limited partnership. It is the partners of the trading partnership or the general partners and the limited partners of the limited partnership who decide on liquidation.

The liquidation is concluded by a written statement regarding the distribution of the assets. The statement must be signed by all the partners. This document is not to be submitted to Bolagsverket. You only need to fill in the above form regarding the termination of the liquidation and submit it to Bolagsverket.

### 1. Registration no. and business name

Fill in the company registration number and the business name.

### 2. Contact person for this case

If you choose to have a contact person or if the partnership has an agent, fill in their personal and address details. Please note that we usually send notifications by email. If you do not fill in an email address, we will send notifications by post.

If the agent has a deposit account with Bolagsverket and wants to use it for payment of the registration fee, you must also fill in the three-digit account number.

### 3. Application regarding

Tick the boxes for the changes you want to report to us.

If you want to report that the partnership is going to be wound up, you need to fill in the details in this form. Do you want to report that the liquidation has been completed? In that case you only need to fill in the following information:

- the company registration number and business name of the partnership
- the date of completion of the liquidation
- signatures.

### 4. Date of liquidation

Fill in the date of liquidation of the partnership or the date of completion of the liquidation.

### 5. The new address of the partnership

Fill in the new address as well as the email address, if any. If you want to remove the registered email address, please tick the box. Remember to state the municipality and the county. Please note that you must always report the change of the address both directly to Bolagsverket and with Svensk Adressändring or Skatteverket.

### 6. Signatory power

State the signatory power that applies for the partnership. During the liquidation procedure the partners, together (trading partnership) or the general partners, together (limited partnership) are entitled to sign on behalf of the partnership. However, the partners may decide otherwise.

### 7. Other matters

Fill in extra information here, if needed.

### 8. Signature

All partners must sign the form. If you represent a legal entity, write the company registration number after the printed name in the signature.

### 9. Registration fee

Please state the amount you will pay and the payment date. Pay the fee to bank giro number 5050-0255 and give the company registration number as the payment reference. We can start processing your application when we have received the payment. We cannot refund the payment once we have begun processing your case.