Application for registration as a liquidator

Form 903B Corporations Act 2001 Schedule 2 - Insolvency Practice Schedule (Corporations) s20-5

If there is insufficient space in any section of the form, you may photocopy the relevant page(s) and submit as part of this lodgement

Lodgement details

Who should ASIC contact if there is a query about this form?
Firm/organisation
Contact name/position description
ASIC registered agent number (if applicable)
Telephone number
Email address
Postal address

1 Applicant details

	Family name	Given names	
	Date of birth		
	Place of birth (Town/City)	(State/Country)	
Residential address	Street number and street name		
	Suburb/City		State/Territory
	Postcode	Country (if not Australia)	
Employment	Present business or employment		
Employment		an employee - name of employer. If a sole pra	ctitioner - trading name.
	Organisation name		
	Date joined		

Name of practice If you are a sole practitioner or an employee and conduct business under a name other than your own, you may need to answer 'Yes' to this question.	Are you practising or do you intend to practise as a liquidator under a name other than your own name or the organisation name provided above?
2 Application	
Tick one box.	I apply:
	for registration under the Corporations Act 2001 as a liquidator registered to practise as an external administrator of companies, receiver and receiver and manager
	for registration under the Corporations Act 2001 as a liquidator registered to practise only as a receiver and receiver and manager
3 Principal place of prac	tice
	Current Proposed At the office of, C/- (if applicable)
4 Other place of practice	<u>}</u>
Complete if you have another place of practice	Current Proposed At the office of, C/- (if applicable) Office, unit, level Office, unit, level Street number and street name Street number and street name Suburb/City State/Territory Postcode Country (if not Australia) Phone number Mobile number Email address

5 Additional other place of practice

Complete if you have another place of practice

Current Prop	posed	
At the office of, C/- (if applicable)		
Office, unit, level		
Street number and street name		
Suburb/City		State/Territory
Postcode	Country (if not Australia)	
Phone number	Mobile number	
Email address		
If you have further additional other place this page and annex the completed page		

6 Requirements

6.1 Do you hold a tertiary qualification that includes at least 3 years of full-time
study (or its equivalent) in commercial law and accounting?
Yes No
 6.2 Have you completed the academic requirements for at least 2 course units accredited under the Australian Qualifications Framework Level 8 (or equivalent study) in the practice of external administrators of companies, receivers, receivers and managers and trustees under the Bankruptcy Act 1966? Yes
 6.3a For registration as an external administrator of companies, receiver and receiver and manager Have you during the 5 years immediately preceding the day on which this application is made, been engaged in at least 4000 hours of relevant employment at a senior level (see Insolvency Practice Rule (Corporations) s20-1(3))? Yes
6.3b For registration as a receiver and receiver and manager
Have you during the 5 years immediately preceding the day on which this application is made, been engaged in at least
4000 hours of relevant employment at a senior level (see Insolvency Practice Rule (Corporations) s20-1(4))?
6.4 Have you had your registration as a liquidator under the Corporations Act 2001 cancelled within 10 years before
making this application, other than in response to a written request by you to have the registration cancelled?
Yes No
6.5 Have you had your registration as a trustee under the Bankruptcy Act 1966 cancelled within 10 years before making this application, other than in response to a written request by you to have the registration cancelled?
Yes No
6.6 Are you resident in Australia?
Yes No
Provide documentary evidence of the above with the application by providing
all attachments listed in section 9 of this application form

7 Additional information

•
 7.1 Do you have or will you take out adequate and appropriate professional indemnity and fidelity insurance against the liabilities that you may incur working as a registered liquidator (see RG258)? Yes
7.2 Have you been convicted, within 10 years before making this application, of an offence involving fraud or dishonesty? Yes
7.3 Are you now, or have you been within 10 years before making this application, an insolvent under administration?
 7.4 Are you disqualified from managing corporations under Part 2D.6 of the Corporations Act 2001, or under a law of an external Territory or a law of a foreign country? Yes
7.5 Have you ever been refused membership of a relevant professional body? Yes No
7.6 Have you ever been subject to any legal or disciplinary action from a relevant professional body? Yes No
If you answered 'Yes' to any of the above questions, please provide written details as outlined in RG258.

8 Declaration

I understand that ASIC may contact overseas authorities to enquire about my solvency status and any criminal record.

I confirm that all the information contained in my application (including any attachments) is true and correct as at the date of signing this application.

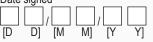
I provide the information within this application (including any attachments) in the clear understanding that, should it be incorrect, then if my application is granted, ASIC would be entitled under the provisions of the Corporations Act to refer this to a Disciplinary Committee for consideration.

I also understand that any false or misleading statement made in this application (including any attachments) may constitute a breach of the Corporations Act and result in prosecution or referral to a Disciplinary Committee.

Name

Signature

Date signed



9 Attachments

You will need to compile all the necessary documents to support this application before submitting it to ASIC.

See the 'Liquidator registration checklist' for the documents to accompany this application.

You can find further information and resources at http://asic.gov.au/liquidator-registration

Lodgement

Send a scanned copy of all supporting documents and a scanned copy of the signed application form by email to: LiquidatorRegistrationProofs@asic.gov.au. The size limit of each email we will accept is 10MB. If necessary, to meet size limits, please send multiple emails containing supporting documents. Make sure that you include the applicant name in the subject line of each email.

Alternatively, post all documents to: Licensing Australian Securities & Investments Commission GPO Box 9827 MELBOURNE VIC 3001 For help or more informationWebwww.asic.gov.auNeed help?www.asic.gov.au/questionTelephone1300 300 630