



Swedish Companies Registration Office

SE-851 81 Sundsvall, Sweden

+46 771-670 670

bolagsverket.se

Nyregistrering | Registration of new grouping

Europeisk ekonomisk intressegruppering | European economic interest grouping (EEIG)

Fill in the form on your computer or legibly by hand. Sign the form and send the original.

More information on page 4.

Skicka till | Send to

Bolagsverket

SE-851 81 Sundsvall, Sweden

1. Anmälan gäller | Application regarding

<input type="checkbox"/> Registrering av en gruppering som ska ha sitt säte i Sverige Registration of a grouping with its registered office in Sweden	<input type="checkbox"/> Registrering av en gruppering som har huvudkontor eller avdelningskontor men inte sitt säte i Sverige Registration of a grouping which has its main office or branch office but not its registered office in Sweden
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2. Kontaktuppgifter i ärendet | Contact information for this case

Fill in your email address and telephone number so we can contact you easily.

Kontaktpersonens för- 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. Företagets adress | Address of the grouping

Postadress Postal address		
Postnr Postcode	Postort Town/City	E-postadress Email address

4. Registreringsort och registreringsnummer | Place of registration and registration number

Registreringsort Place of registration	Registreringsnummer Registration number
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5. Företagsnamn | Business name

Give more than one proposal.

Förslag nr 1 Proposal no.1
Förslag nr 2 Proposal no.2
Förslag nr 3 Proposal no.3

6. Medlemmar | Members (may be legal entities)

Personnummer/organisationsnummer Personal identity number/Registration number	Land om bosatt utomlands Country (if resident abroad)	
Efternamn/registrerat företagsnamn Surname/If legal entity, registered business name	Samtliga förnamn All first names	
Postadress Postal address	Postnr Postcode	Postort Town/City
Personnummer/organisationsnummer Personal identity number/Registration number	Land om bosatt utomlands Country (if resident abroad)	
Efternamn/registrerat företagsnamn Surname/If legal entity, registered business name	Samtliga förnamn All first names	
Postadress Postal address	Postnr Postcode	Postort Town/City

Fortsättning 6. Medlemmar | Continued 6. Members

Personnummer/organisationsnummer Personal identity number/Registration number	Land om bosatt utomlands Country (if resident abroad)	
Efternamn/registrerat företagsnamn Surname/If legal entity, registered business name	Samtliga förnamn All first names	
Postadress Postal address	Postnr Postcode	Postort Town/City
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Postadress Postal address	Postnr Postcode	Postort Town/City
Personnummer/organisationsnummer Personal identity number/Registration number	Land om bosatt utomlands Country (if resident abroad)	
Efternamn/registrerat företagsnamn Surname/If legal entity, registered business name	Samtliga förnamn All first names	
Postadress Postal address	Postnr Postcode	Postort Town/City

7. Företagsledare | Business manager

Personnummer Personal identity number	Land om bosatt utomlands Country (if resident abroad)	
Efternamn Surname	Samtliga förnamn All first names	
Postadress Postal address	Postnr Postcode	Postort Town/City
Personnummer Personal identity number	Land om bosatt utomlands Country (if resident abroad)	
Efternamn Surname	Samtliga förnamn All first names	
Postadress Postal address	Postnr Postcode	Postort Town/City

8. Delgivningsmottagare | Person authorized to receive service of process

Personnummer Personal identity number		
Efternamn Surname	Samtliga förnamn All first names	
Postadress Postal address	Postnr Postcode	Postort Town/City

9. Firmateckning | Signatory power

Must be filled in if more than one person is authorized to sign on behalf of the grouping.

<input type="checkbox"/> Grupperingen tecknas av företagsledarna var för sig The business managers, individually, are entitled to sign on behalf of the grouping.	<input type="checkbox"/> Grupperingen tecknas av företagsledarna gemensamt The business managers, together, are entitled to sign on behalf of the grouping.
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10. Verksamhet | Business activities

Specify the line of business. Please note that the description of the business activities must be in Swedish.

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11. Tiden för grupperingens bestånd | The duration of the grouping

The duration must be filled in if not indefinite.

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12. Övrigt | Other matters

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13. Bevittnad namnteckning för delgivningsmottagaren | Signature and witness of signature of the person authorized to receive service of process

Namnteckning Sign name	Namnförtydligande Print name
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Ovanstående namnteckning bevittnas av två personer | The above signature witnessed by two individuals

Namnteckning Sign name	Namnförtydligande Print name
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Namnteckning Sign name	Namnförtydligande Print name
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**14. Försäkran och underskrift | Declaration and signature, please use blue ink**

The form must be signed by all the members.

I hereby declare that the specified members have not been declared bankrupt and have not been prohibited from carrying on business.

Datum | Date

Namnteckning | Sign name

Namnförtydligande | Print name

Företagsledare | Business manager

I hereby declare that

- I have not been declared bankrupt and I do not have a custodian as stated in chapter 11, section 7 of the Swedish Parental Code
- the person authorized to receive service of process does not have a custodian as stated in chapter 11, section 7 of the Swedish Parental Code.

Datum | Date

Namnteckning | Sign name

Namnförtydligande | Print name

Ovanstående namnteckningar bevittnas av två personer | The above signature witnessed by two individuals

Namnteckning Sign name	Namnförtydligande Print name
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Namnteckning Sign name	Namnteckning Print name
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Registreringsavgift | Registration fee

We will send a notification to the contact person for this case with information about the registration fee and how to pay it. We can start processing your application when we have received the payment.

Information

Use this form when you want to register a new European economic interest grouping (EEIG). When the application has been registered we will send you a registration certificate in Swedish. You will find more information on bolagsverket.se.

Attachment

- Certified copy of the grouping's contract in Swedish.

1. Application regarding

State the alternative you want to report for registration.

2. Contact information for this case

Fill in the contact information for this case.

3. Address of the grouping

Fill in the address as well as the email address, if any.

4. Place of registration and registration number

Fill in the place of registration and registration number. This is only to be filled in by groupings with their head office or branch office in Sweden.

5. Business name

State more than one proposal for your business name. If you submit more than one proposal, we will examine them in the order you have listed them in. We will register the first proposal we examine that we are able to accept, without first contacting you.

6. Members

Fill in the personal and address details of the members. For individuals who do not have a Swedish personal identity number you must fill in their birth date (YYYY-MM-DD). If the individual is not registered in the Swedish population register, you must fill in their country of residence. Even a legal person may be a member. In that case you must fill in the legal person's company registration number and business name.

7. Business manager

Fill in the personal and address details of the business managers. For individuals who do not have a Swedish personal identity number you must fill in their birth date (YYYY-MM-DD). If the individual is not registered in the Swedish population register, you must fill in their country of residence

8. Person authorized to receive service of process

A grouping with its registered office in Sweden must report a person authorized to receive service of process for registration, if none of the business managers of the grouping are resident (domiciled) in Sweden. Fill in the personal and address details of the person authorized to receive service of process.

9. Signatory power

State the signatory power that applies for the grouping.

10. Business activities

Describe the business activities in as much detail as possible. You must be precise regarding the line of business, for example retail sale of shoes or consulting business within IT.

11. The duration of the grouping

The duration of the grouping must be filled in if not indefinite.

12. Other matters

Fill in extra information here, for example if the grouping has special provisions stipulated in the contract.

13. Signature and witness of signature of the person authorized to receive service of process

The person authorized to receive service of process must sign the form and the signature must be certified by two people.

14. Declaration and signature

All the members must sign the form and their signatures must be certified by two people.