


 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 information in 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		Telefonr Phone number daytime	Deposit account, if any, 3 digits

3. Personer som anmäler sin egen avgång | Individuals notifying us that they have decided to resign You may fill in the following assignments: board member, deputy member, chair of the board, managing director, deputy managing director, signatory (not board member), person authorized to receive service of process.

Personnummer Personal identity number (date of birth, if resident abroad)	Avgår från uppdrag Resigning as (one or more positions)	
Efternamn Surname	Samtliga förnamn All first names	
Postadress Postal address	Postnr Postcode	Postort Town/City
Personnummer Personal identity number (date of birth, if resident abroad)	Avgår från uppdrag Resigning as (one or more positions)	
Efternamn Surname	Samtliga förnamn All first names	
Postadress Postal address	Postnr Postcode	Postort Town/City
Personnummer Personal identity number (date of birth, if resident abroad)	Avgår från uppdrag Resigning as (one or more positions)	
Efternamn Surname	Samtliga förnamn All first names	
Postadress Postal address	Postnr Postcode	Postort Town/City

4. Övrigt | Other matters


5. Försäkran och underskrift | Declaration and signature The form must be signed by one of the individuals notifying us of their resignation. Please use blue ink.

I do hereby declare that the board of directors and/or the appointing body, if other than the shareholders' meeting, has been duly notified of the resignation.		
Datum Date	Namnteckning Sign name	Namnförtydligande Print name

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 notifying us that you have chosen to resign from a limited company, or use the e-service on the website verksam.se (in Swedish only). E-services and more information are available on bolagsverket.se. When the application has been registered we will send you a registration certificate in Swedish.

If the notification concerns the auditor, use form Egen avgång som revisor, number 703 (Auditor's resignation in Swedish only).

1. Registration no. and business name

Fill in the company registration number and business name.

2. Contact information for this case

Fill in the contact information for this case. 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 contact person 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. Individuals notifying us that they have chosen to resign

Fill in personal and address details as well as about the assignment from which you are resigning. This is especially important if you have more than one assignment in the same company, as we need to know if you are resigning from all your assignments or just one of them.

4. Other matters

Fill in any extra information, if needed.

5. Declaration and signature

One of the individuals resigning must sign the form. Please note that other individuals authorized to sign on behalf of the company may only sign the form regarding their own resignation.