

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

More information on page 3.

Skicka till | Send to

Bolagsverket

SE-851 81 Sundsvall, Sweden

1. 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 number daytime	Deposit account, if any, 3 digits

2. Företagets adress | Address of the partnership

Postadress Postal address		
Postnr Postcode	Postort Town/City	E-postadress Email address
Kommun Municipality		Län County

3. 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

4. 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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5. Bolagsmän (delägare) | Partners (part-owners)

Personnr/org.nr Personal identity no./Registration no. (date of birth, if resident abroad)	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
Personnr/org.nr Personal identity no./Registration no. (date of birth, if resident abroad)	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

5. Bolagsmän (fortsättning) | Partners (continued)

Personnr/org.nr Personal identity no./Registration no. (date of birth, if resident abroad)	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
Personnr/org.nr Personal identity no./Registration no. (date of birth, if resident abroad)	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
Personnr/org.nr Personal identity no./Registration no. (date of birth, if resident abroad)	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
Personnr/org.nr Personal identity no./Registration no. (date of birth, if resident abroad)	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
Personnr/org.nr Personal identity no./Registration no. (date of birth, if resident abroad)	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
Personnr/org.nr Personal identity no./Registration no. (date of birth, if resident abroad)	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

6. Firmateckning | Signatory power

<input type="checkbox"/> 1. Firman tecknas av bolagsmännen var för sig The partners are entitled to sign on behalf of the partnership, individually.	<input type="checkbox"/> 2. Firman tecknas av bolagsmännen gemensamt The partners, together, are entitled to sign on behalf of the partnership.
<input type="checkbox"/> 3. Firman tecknas av bolagsmännen två i förening The partners, any two together, are entitled to sign on behalf of the partnership.	<input type="checkbox"/> 4. Firman tecknas av bolagsmännen tre i förening The partners, any three together, are entitled to sign on behalf of the partnership.
<input type="checkbox"/> 5. 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

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8. Underskrift | Signature, please use blue ink

The form must be signed by all the partners

Datum Date	
<hr/>	
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 you want to register a new trading partnership or use the e-service on the website verksamt.se (in Swedish only). You will find e-services and more information on bolagsverket.se. When the application has been registered we will send you a registration certificate in Swedish.

1. Contact information for this case

Fill in the contact information for this case. Please note that we usually send notifications by email.

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.

2. Address of the partnership

Fill in the address. Remember to fill in the municipality and the county.

3. 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. Read more about choosing a business name on bolagsverket.se.

4. Business activities

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

5. Partners (part-owners)

Fill in the personal and address details of the partners. A foundation or a non-profit association may be a partner if they solemnly declare that they have not been declared bankrupt. Write the declaration in box 7. Other matters.

Attachments, when applicable

- A certified copy of their passport for each person who is not registered in the Swedish population register. The copy must contain name, date of birth, validity dates, signature and photo. Copy the whole double-page spread in the passport containing the photo page. At least one other person must sign the copy to certify that it matches the original. Their signature, printed name and telephone number must be included on the copy.
- A certified copy of the certificate of registration, not older than six months, if the person is a foreign legal entity.

Under the age of 18

Individuals older than 16, but younger than 18, may be partners if the legal guardians and the Chief Guardian of the municipality give their consent. The consent of the guardians and the Chief Guardian must be included in the application form or enclosed as an attachment.

6. Signatory power

State the signatory power that applies for the partnership.

7. Other matters

Procurator holder

If the partnership has a procurator holder, fill in their personal and address details in this box. A procurator holder is a person holding a special power of attorney (a power of procurator), and therefore has the right to represent the partnership in all matters regarding its business activities. A procurator holder cannot be one of the signatories of the partnership.

Auditor

If the partnership has an authorised or approved auditor, fill in their details here.

Specially authorized signatories

If the partnership has appointed a person who is not a partner to be a signatory, fill in their personal and address details in this field. You must also fill in the extent of their signatory power for the partnership in box 6. Signatory power.

Secondary business name

If the partnership is to have a secondary business name, you must state name proposals for the secondary business name here. Submit more than one name proposal. Fill in the business activities to be carried out under the secondary business name and be exact regarding the line of business. The business activities to be carried out under the secondary business name must be a part of the business activities of the partnership.

8. Signature

All the partners must sign the form. If you represent a legal entity, write the company registration number after the printed name in the signature. The person signing the form thereby insures that the individuals to be registered are not in bankruptcy, have not been prohibited from carrying on business or do not have a custodian as stated in the Swedish Parental Code.

Register beneficial ownership information within four weeks

All new trading partnerships must register beneficial ownership information with Bolagsverket within four weeks from their date of registration. Go to bolagsverket.se for more information.