**(Form No -19)**

**Application for Certificate of Insolvency Practitioner**

(1) Name …………………………………………………………..

(2) ID No./Passport No. …………………………………………………………..

(3) Qualifications (year) …………………………………………………………..

(4) Occupation …………………………………………………………..

(5) Practising certificate issued by …………………………………………………………...

Council(Serial Number/Date) …………………………………………………………..

(6) First Registeration Date as an …………………………………………………………..

insolvency practitioner; …………………………………………………………..

(7) Principal address as an …………………………………………………………...

insolvency practitioner; …………………………………………………………..

(8) Other address as an …………………………………………………………..

insolvency practitioner; …………………………………………………………..

(9) (a) Please describe the type of business;

(i) sole practitioner;

(ii) in partnership with other one or more person;

(iii) as a member of an insolvency practitioner, partnership and associations;

(b) Please describe which form ………………………………………………………….

Of business to do the above ………………………………………………………….

mentioned paragraph(a) …………………………………………………………..

(10) Member name of the associations ……………………………………………………….......

(or) other name(if any)(or) the …………………………………………………………..

name of the associations if it …………………………………………………………...

practices as an insolvency ……………………………………………………….......

practitioner; ……………………………………………………….....

(11) Please briefly described any …………………………………………………………...

Punishment relating to the breach .……………………………………………………………

of discipling; ……………………………………………………………

(12) Please Indicate if there are any …………………………………………………………..

restrictions on the applicant’s ………………………………………………………......

conditions in Conducting or …………………………………………………………..

practicing as an Insolvency …………………………………………………………..

practitioner; …………………………………………………………..

(13) Telephone No./ Email Address ……..............................................................................

…………………………………………………………..

Applicant

Signature ............................................................... Name ................................................................

Occupation................................................................

Date ...............................................................