

Government of the Republic of the Union of Myanmar
Ministry of Investment and Foreign Economic Relations
Directorate of Investment and Company Administration

Notification No. 95 /2020

(3rd) Waning of Thidingyut , 1382 M.E

(3rd , November 2020)

The Prescribed Forms and Fees
for the Insolvency Practitioner Registration Certificate

In exercise of the power conferred under the Insolvency Rule 4(b), the Directorate of Investment and Company Administration hereby issue the Notification as follow:

1. In accordance with the Insolvency Rule 47(b), an applicant shall submit the prescribed form 19 to the Registrar for the Insolvency Practitioner Registration Certificate.
2. Subject to the Insolvency Rule 5, the fee of the Insolvency Practitioner Registration Certificate is to be paid 200,000 kyats.
3. The extension fee of the Insolvency Practitioner Registration Certificate is to be paid 50,000 kyats.
4. Any fees of the above paragraph 2 and 3 under this Notification shall be paid in such manner directed by the Registrar.

(Thant Sin Lwin)

Registrar

Directorate of Investment and Company Administration

(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 Registration 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 describe any
 Punishment relating to the breach
 of disciplining;
- (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