



**Ministry of Justice  
OFFICIAL RECEIVER LIQUIDATION SEARCH REQUEST FORM**

Please provide correct information in Part (A) & (B) only

**Part A**

Name of Company	_____
Tin Number	_____
Reason of Search	_____
Original place of business	_____
Telephone contact	_____

**Part B**

**For the Person filling the form**

Full Name: _____	Valid Identification (Please Specify): _____
Phone Contact: _____	Email Address: _____
Searches requested on behalf of _____	
Signature: _____	Date: _____

**Part C**

**For Official Use Only**

Winding Up Order:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	* please tick appropriate
If Yes: Date of Winding Up: _____	Winding Up Action No: _____		
Court: _____	Name of Petitioning Creditor: _____		
Solicitor Acting for the Petitioning Creditor: _____			
Interim stay Order	Yes <input type="checkbox"/>	No <input type="checkbox"/>	* please tick appropriate If Yes:
Date of interim Stay Order: _____	Receipt No: _____		
Signed: _____	Date: _____		
for: The Official Receiver			

(Request will not be processed without the signature and valid ID of the applicant) Fees: \$10.90