

Form IS5 Version — 31 August 2023

www.societies.govt.nz | 0508 762 438

Send your completed form to: Companies Office, Private Bag 92061, Victoria Street West, Auckland 1142 or <a href="mailto:companiesoffice.govt.nz">compliance@companiesoffice.govt.nz</a>

## Request to dissolve an incorporated society

Section 28 of the Incorporated Societies Act 1908

## Notes

- Where the Registrar of Incorporated Societies is satisfied that a society is no longer carrying on its operations, the Registrar may make a declaration that the society is dissolved (removed from the register). The Registrar will give notice of the dissolution in the Gazette.
- A society may initiate the dissolution process. If your society is no longer operating and you would like to request that it be dissolved, an officer of the society can complete this request form and send it to the Registrar.
- Please ensure that the society's assets (if any) have been fully distributed and all liabilities discharged in accordance with the rules of the society before submitting this request.

Society name	
Society number or NZBN	
I am authorised by the above society to request its dissolution no longer carrying on its operations.	n and removal from the register on the grounds that it is
In support of this request, I confirm the following information:  All of the following conditions must apply for the society to be eligible to re	equest dissolution
The society is no longer operating, and	
The society has no assets — all surplus assets have been dispersed requirements of the Incorporated Societies Act 1908, and	osed of in accordance with the society's rules and the
The society has no liabilities (debts) including contingent liabi	lities, and
The society is not a party to any legal proceedings or general disputes, and	
A resolution has been passed to apply to the Registrar for the society to be dissolved, and	
A copy of the society resolution to dissolve the society is attached.	
Signature	
Signatory's name:	
Designation Officer or Authorised agent (Accountant/Lawyer etc)	
Date	
Presenter details	
Name:	Postal address:
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Email address:	
Telephone number:	