

NF202A

Notification Form

Cessation of undertaking practice

To be completed in conjunction with guidance published at www.higa.ie



Section 1. Undertaking details			For official use
Undertaking name			
Undertaking address	Address line 1		
	Address line 2		
	County		
	Eircode		
Undertaking email address			
Undertaking contact number			
Section 2. Cessation of practice of undertaking			For official use
Date of proposed cessation of undertaking			

Section 3. Declaration			For official use
I, the undersigned, declare as the undertaking/on behalf of the undertaking that the information I have provided in this notification form is true to the best of my knowledge and belief.			
Signed by (tick as appropriate)	Sole trader	<input type="checkbox"/>	
	Partner of the partnership	<input type="checkbox"/>	
	Director of the company	<input type="checkbox"/>	
	Member of the committee of management or other controlling authority of an unincorporated body	<input type="checkbox"/>	
	Member of the board, directorate or other governance structure of the body corporate	<input type="checkbox"/>	
Name			
Job title			
Signature			
	Type your name in the signature field		
Date			