Application for cancellation of Practicing Certificates and removal from ICPAC'S Public Registries (Firm)

To: Admissions and Licensing Department

Full name .....

ICPAC Reg. Number.....

Name of the Firm.....

Firm's ICPAC Reg. Number.....

Hereby, I declare responsibly that I wish to cancel the following practicing certificates that the firm currently holds:

- ☐ General Practicing Certificate
- ☐ Statutory Firm Certificate
- ☐ Administrative Service Provider

Certificate(s) cancellation reasons:

- ☐ Retirement
- ☐ Termination of Business Operations/Company Closure
- ☐ Focus on another specialisation
- ☐ Opening of a new firm

  Name of the Firm και Firm's ICPAC Reg. Number
  .....
- ☐ Transfer to another Supervisory Authority. Please specify which:.....
- ☐ Other.....

.....

.....

*** Due to the cancellation(s) of the certificate(s), the original(s)must be returned to ICPAC.**

Member's Signature/

Legal Representative of the firm Date: .....

.....

Official stamp of the firm / statutory audit firm:

***Note*: This declaration can be sent either to the postal address of ICPAC or by email at licensing@icpac.org.cy**