



## Company Applying for Strike-Off

This form should be completed by all companies, resident in Guernsey, which are applying for strike-off from a company register (wherever situated). Depending on the responses given on the form, the Revenue Service may request further information.

All completed forms should be emailed to [revenueservice@gov.gg](mailto:revenueservice@gov.gg) with a subject header of "Company applying for strike-off".

1. COMPANY INFORMATION		
Company Name		
Tax Reference Number		
Registered Address	Post Office Box <i>(optional)</i>	
	Suite <i>(optional)</i>	
	Floor <i>(optional)</i>	
	Building Name/Number	
	Street	
	City	
	Country	
	Post Code	
Contact Name		
Daytime telephone number		
E-mail Address		
Date company applied for strike-off from the Register		

## 2. CERTIFICATE

Please tick which certificate applies. **If the company can't complete Certificate 2 or 3 then Certificate 1 must be ticked.**

- |   |                          |  |
|---|--------------------------|--|
| 1 | <input type="checkbox"/> | If this Certificate is ticked, a tax return must be completed and the relevant accounts and computations should be provided to the date of strike-off.   |
| 2 | <input type="checkbox"/> | The company hasn't traded, has no assets other than those relating to incorporation and no income from any source whatsoever; or only owned Guernsey property from which no income has been received.  |
| 3 | <input type="checkbox"/> | The company has no Guernsey employees (other than directors), no Guernsey resident beneficial members, no income taxable at 10%/20%, no qualifying loans to Guernsey resident participators and hasn't made a request under section 62AB(1)(a) of the Law. |

## 3. REQUIRED INFORMATION

This form can't be processed, and confirmation of the tax position sent, without this information.

Has the following been submitted:	Yes	No	Submitted Online	N/A
Outstanding tax returns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outstanding accounts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outstanding computations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Payment (for assessment)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outstanding distribution returns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Payment (distribution tax)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outstanding ETI returns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Payment (ETI tax)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have answered 'no' to any of the above questions, please provide further information:

Any further relevant information:

4. OTHER REPORTING REQUIREMENTS	
<p><b>Is the company the reporting entity for country by country reporting?</b></p> <p>Please go to <a href="http://www.gov.gg/cbcr">www.gov.gg/cbcr</a> for more information</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
<p><b>Is the company required to submit information for either of the following:</b></p> <p style="text-align: center;"><b>FATCA</b></p> <p style="text-align: center;"><b>Common Reporting Standard</b></p> <p>Please go to <a href="http://www.gov.gg/crs">www.gov.gg/crs</a> for more information</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>

5. SUBSTANCE	
<p><b>Has the company carried out any of the following relevant activities? Please tick all that apply:</b></p>	
Banking <input type="checkbox"/>	Head Quartering <input type="checkbox"/>
Finance & Leasing <input type="checkbox"/>	Insurance <input type="checkbox"/>
Fund Management <input type="checkbox"/>	Shipping <input type="checkbox"/>
Distribution Centre <input type="checkbox"/>	IP Holdings <input type="checkbox"/>
Service Centre <input type="checkbox"/>	Pure Equity <input type="checkbox"/>

Please note that if the company has ticked Certificate 2 or Certificate 3 and hasn't ticked any box in Section 5, it won't be required to provide accounts or income tax computations in respect of the year the company is struck off (i.e. for any period from 1st January to the date of strike off). All companies ticking Certificate 1 or any box in Section 5 will be required to provide a copy of the company's accounts and tax computations for the period to the date of strike off (unless it's a Guernsey company that has confirmed to the Guernsey Registry that it hasn't traded in the last 3 months, and this covers the period from the date the last accounts were submitted).

## 6. DECLARATION

The person signing this declaration should be fully aware of the circumstances of the company, and either hold an appropriate position in the applicant's business with sufficient authority to make the declaration or have authority to deal on the applicant's behalf.

**I hereby declare that the information I have given in this application is correct and complete to the best of my knowledge and belief.**

**I will confirm the date of strike off from the Registry, to the Revenue Service, when this occurs.**

Signature..... Date .....

Printed Name .....

Position.....

## FAIR PROCESSING NOTICE:

The information you have provided on this form is required under the Income Tax (Guernsey) Law, 1975 for the purposes of the assessment and collection of income tax. This information will be processed in line with the Data Protection (Bailiwick of Guernsey) Law, 2017. For full details of our Fair Processing Notice and how we look after your data please visit: <https://www.gov.gg/revenueservice>. If you don't have access to the internet please contact us and a paper copy will be provided.

## FOR OFFICE USE ONLY:

Have all outstanding returns been submitted? YES ☐ NO ☐ N/A ☐

Has all outstanding debt been paid? YES ☐ NO ☐ N/A ☐

Has the case been brought up to date? YES ☐ NO ☐ N/A ☐

Date made inactive, and registry advised:

Comments

Signature..... Date .....

Name.....

Form 713 (05/22)

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