

FORM IP-1

INSOLVENCY, RESTRUCTURING AND DISSOLUTION ACT 2018  
(ACT 40 OF 2018)

INSOLVENCY, RESTRUCTURING AND DISSOLUTION  
(INSOLVENCY PRACTITIONERS) REGULATIONS 2020

NOTICE OF APPOINTMENT  
AND SITUATION OF OFFICE OF LIQUIDATOR(S) / SCHEME  
MANAGER(S)

Name of Company: .....

Unique Entity No. / Registration No: .....

Notice is hereby given that \*Mr / Ms. .... [name of liquidator / scheme manager] of ..... [name of liquidator / scheme manager's firm], NRIC / Passport No. ...., has been appointed as \*liquidator / scheme manager of the abovenamed company pursuant to a \*general meeting of the company / Order of Court on the ..... day of .....[month] ..... [year]

The details of the liquidator / scheme manager's office address are as follows:

.....  
.....

Dated this ..... day of ..... [month] ..... [year]

.....  
\*Liquidator / Scheme Manager

*\*Delete where inapplicable*

FORM IP-2

INSOLVENCY, RESTRUCTURING AND DISSOLUTION ACT 2018  
(ACT 40 OF 2018)

INSOLVENCY, RESTRUCTURING AND DISSOLUTION  
(INSOLVENCY PRACTITIONERS) REGULATIONS 2020

NOTICE OF APPEAL

Notice is hereby given that ..... [name of appellant]  
of ..... [address of appellant], NRIC / Passport  
No. .... intends to appeal to the Minister against the following decision(s) / order(s) made  
by the Licensing Officer on the ..... day of ..... [month] ..... [year]:

- (1) Refusal of my application for a \*new / renewal of the Insolvency Practitioner’s licence. [ ]
- (2) \*Addition / Variation of the following condition(s) on my Insolvency Practitioner licence under  
section 52(3) of the Insolvency, Restructuring and Dissolution Act 2018: [ ]

.....  
.....[insert details]

- (3) Imposition of the following order(s) pursuant to section 56(1) or (2) of the Insolvency,  
Restructuring and Dissolution Act 2018 [ ]

.....  
.....[insert details]

Signature: .....  
.....

[Name of Appellant]

Dated this ..... day of ..... [month] ..... [year]

\_\_\_\_\_  
*\*Delete where inapplicable*

*‡ Please mark “x” in the relevant [ ] brackets where applicable*

FORM IP-3

INSOLVENCY, RESTRUCTURING AND DISSOLUTION ACT 2018  
(ACT 40 OF 2018)

INSOLVENCY, RESTRUCTURING AND DISSOLUTION  
(INSOLVENCY PRACTITIONERS) REGULATIONS 2020

PETITION OF APPEAL

I, ..... [name of appellant]  
of ..... [address of appellant], NRIC / Passport No. ....  
am appealing to the Minister against decision(s) / order(s) made by the Licensing Officer  
dated ..... day of ..... [month] ..... [year].

The particulars of the decision(s) / order(s) appealed against are:

The reason(s) for my appeal are:

The issue(s) arising in my appeal are:

Signature: .....

.....

[Name of Appellant]

Dated this ..... day of ..... [month] ..... [year]

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*Note:* If the space provided above is insufficient, please provide the information / details in a separate document and attach it together with the Petition of Appeal