

Insolvency, Restructuring and Dissolution (Voluntary Winding Up) Regulations 2020

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FORM VWU-1

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

INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

DIRECTORS' DECLARATION OF COMPANY'S INABILITY TO
CONTINUE BUSINESS BY REASON OF
ITS LIABILITIES

Name of Company:

Unique Entity No. / Registration No.:

*I / We, [name of declarant]
of [declarant's address], NRIC / Passport No
have made and lodged with the Official Receiver a statutory declaration on the day
of [month] [year] stating that:

- (1) *I / We *am / are (a) director(s) of the abovenamed company;
- (2) the abovenamed company cannot by reason of its liabilities continue its business; and
- (3) the meetings of the abovenamed company and of its creditors have been summoned for
the day of[month][year], being a date within one
month of the date of this Statutory Declaration;

Declared at[country] this day of [month] [year]

Signature:

.....

[Name of Director]

Signature:

.....

[Name of Director]

**Delete where inapplicable.*

FORM VWU-2

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

INSOLVENCY, RESTRUCTURING AND DISSOLUTION
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AFFIDAVIT OF POSTING OF
NOTICES OF MEETING

(Title)

I,[name of deponent] a (a), *make
oath / affirm and say as follows:

1. That I did on the day of[month][year] send to each creditor (or contributory) of mentioned in the above named company’s statement of affairs a notice of the time and the place of the (b) in the form hereunto annexed marked “A”.

2. That the notice to each creditor was sent to the address given in the creditor’s proof or, if the creditor has not proved, to the address given in the statement of affairs of the company, or to such other address as may be known to the person summoning the meeting. (c)

3. That the notice to each contributory was sent to the address mentioned in the company’s books as the address of such contributory, or to such other address as may be known to the person summoning the meeting. (d)

4. That I sent the said notices by putting the notices prepaid into the post office at a.m. / p.m. on the said day.

Sworn or affirmed, etc.

(a) State the description of the deponent.
(b) Insert here “general” or “adjourned general”
(c) & (d) Delete where inapplicable

FORM VWU-3

INSOLVENCY, RESTRUCTURING AND DISSOLUTION ACT 2018
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INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

LIST OF CREDITORS ASSEMBLED
TO BE USED AT EVERY MEETING

(Title)

Meeting held at [place of meeting] this day
of..... [month] [year].

Number	Name of creditors present or represented	Amount of proof
1		
2		
3		
4		
5		
6		
7		
8		
9		
	Total number of creditors present or represented.	

FORM VWU-4

INSOLVENCY, RESTRUCTURING AND DISSOLUTION ACT 2018
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INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

NOTICE OF APPOINTMENT AND SITUATION OF OFFICE OF
LIQUIDATOR(S)

Name of Company:

Unique Entity No. / Registration No:

Notice is hereby given that *Mr / Ms. [name of liquidator]
of [name of liquidator's firm], NRIC / Passport No.,
has been appointed as liquidator of the abovenamed company pursuant to a resolution passed at the
*members / creditors meeting on the day of [month] [year].

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

.....
.....

Dated this day of [month] [year]

.....
Liquidator

**Delete where inapplicable*

FORM VWU-5

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

INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

NOTICE OF CHANGE IN SITUATION OF OFFICE OF
LIQUIDATOR(S)

Name of Company:

Unique Entity No. / Registration No:

Notice is hereby given that the address of *Mr/Ms. [name of liquidator]
of[name of liquidator's firm], NRIC / Passport No., who is the
appointed liquidator of the abovenamed company, has been changed to the following on the
day of[month][year]:

The details of the liquidator's new office address are as follows:

.....
.....

Dated this day of [month][year]

.....
Liquidator

FORM VWU-6

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

INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

NOTICE OF CESSATION OF APPOINTMENT
OF LIQUIDATOR(S)

Name of Company:

Unique Entity No / Registration No.:

Notice is hereby given that *Mr / Ms. [name of liquidator]
of [liquidator's firm], NRIC / Passport No. , has ceased to act as
liquidator of the abovenamed company on the day of [month]
[year].

Dated this day of [month][year]

.....
Liquidator

**Delete where inapplicable*

FORM VWU-7

INSOLVENCY, RESTRUCTURING AND DISSOLUTION ACT 2018
(ACT 40 OF 2018)INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020LIQUIDATOR'S ACCOUNTS OF RECEIPTS AND PAYMENTS
AND
STATEMENT OF THE POSITION IN THE WINDING UP

Name of Company:

Unique Entity No / Registration No.:

Date of commencement of winding up:

The period covered by this account is from to

#ACCOUNTS OF RECEIPTS AND PAYMENTS
(If space is insufficient, please use Continuation Sheet(s))

Date	From whom received/ To whom paid	Nature of receipts/ payments	Amount \$
Balance brought forward			
+ Balance carried forward			

Full details of investments made by the liquidator and of the realisation of the investments are to be given in a separate statement attached to and forming part of this account. Any profit or loss on realisation must appear in the "Account of Receipts and Payments" as a notional receipt or payment, as the case may be, with a reference to the particular investment.

+ A balance is not to be shown on this account. Show only the total receipts and payments which are to be carried forward to the next account.

Continuation Sheet 1

Name of Company:

Unique Entity No / Registration No.:

ACCOUNTS OF RECEIPTS AND PAYMENTS*
(If space is insufficient, please use Continuation Sheet(s))

Date	From whom received/ To whom paid	Nature of receipts/ payments	Amount \$
		Balance brought forward	
+ Balance carried forward			

Continuation Sheet 2

Name of Company:

Unique Entity No / Registration No.:

#ACCOUNT OF RECEIPTS AND PAYMENTS

Total receipts	...	...	...	...	...	...	...	\$
Total payments	...	...	...	...	...	...	...	\$
							Balance	\$

The balance is made up as follows:-

1. Cash in hands of liquidator	...	...	...	...	...	...	\$
2. Cash in bank	...	...	...	...	...	...	\$
Credit as per pass-book	...	...	\$		
Less unrepresented cheques	...	...	\$				\$
3. Amounts invested by liquidator and not converted into cash							\$
						Balance as above	\$

Full details of investments made by the liquidator and of the realisation of the investments are to be given in a separate statement attached to and forming part of this account. Any profit or loss on realisation must appear in the "Account of Receipts and Payments" as a notional receipt or payment, as the case may be, with a reference to the particular investment.

Continuation Sheet 3

Name of Company:

Unique Entity No / Registration No.:

PARTICULARS OF RATES OF DIVIDENDS AND DATES DECLARED

Dividend of in the \$, paid on

Name of creditors in alphabetical order (If space is insufficient, please use Continuation Sheet)	Amount of proof	Amount of dividend	
		Paid	Unclaimed
	Total as per Previous return \$	\$	\$
Total			

Continuation Sheet 4

Name of Company:

Unique Entity No / Registration No.:

**PARTICULARS OF RATES PER SHARE OF RETURN OF SURPLUS ASSETS
PAYABLE TO CONTRIBUTORIES**

Return of surplus assets to contributories at rate of per share
paid on

Name of contributories in alphabetical order (If space is insufficient, please use Continuation Sheet)		Amount of return to contributories	
		Paid	Unclaimed
	Total as per Previous return \$	\$	\$
Total			

Continuation Sheet 5

Name of Company:

Unique Entity No / Registration No.:

STATEMENT OF THE POSITION IN THE WINDING UP

1.	The amount of the estimated assets and liabilities at the date of the commencement of the winding up	#Assets Liabilities Secured creditors Debenture-holders Unsecured creditors
2.	The total amount of the capital paid up at the date of the commencement of the winding up	Paid up in cash Issued as paid up Otherwise than for cash
3.	The general description and estimated value of outstanding assets (if any)	
4.	Total amount of unsecured debts in respect of which proofs have been admitted	
5.	Estimated amount of debts or claims remaining for proof	
6.	Details of any arrangement whereby assets of the company have been disposed of by the liquidator for a consideration other than cash	
7.	Details of any assets of the company that is not realised, and to provide reason(s) for the non-realisation	
8.	The causes which delay the completion of the winding up	
9.	The period within which the winding up may probably be completed	

after deducting amounts charged to secured creditors and debenture-holders.

Name of Company:

Unique Entity No / Registration No.:

STATUTORY DECLARATION VERIFYING LIQUIDATOR'S ACCOUNTS AND STATEMENT

* I / We * NRIC / Passport No.
of
and * NRIC / Passport No.
of

the liquidator(s) of the abovenamed company do solemnly and sincerely declared that -
(a) + [the account of receipts and payments set out above contains a full and true account of my / our receipts and payments in the winding up of the company], from, to, +[and that] I / we have not, nor has any other person by *my / our order or for my use during that period, received or paid any moneys on account of the company +[other than and except the items mentioned and specified in that account];
(b) the particulars contained in the statement of the position in the winding up made up to set out above are true to the best of *my / our knowledge and belief; and *I / we make this solemn declaration by virtue of the provisions of the Oaths and Declarations Act (Cap. 211), and subject to the penalties provided by that Act for the making of false statements in statutory declarations, conscientiously believing the statements contained in this declaration to be true in every particular.

Declared at) #1. Signature:
this day) Name of Liquidator:
of)
) 2. Signature:
) Name of Liquidator:

Before me –

Signature:
.....
Name of Commissioner for Oaths/Notary Public

* Delete where inapplicable
+ If there are no receipts or payments, delete the words within the []
If there is more than one liquidator, all liquidators must sign.

FORM VWU-8

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

INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

NOTICE OF LIQUIDATOR'S ACCOUNTS OF RECEIPTS AND
PAYMENTS AND
STATEMENT OF THE POSITION IN THE WINDING UP

Name of Company:

Unique Entity No / Registration No.:

Date of commencement of winding up:

The period covered by this account is from: to

Date of lodgement of the accounts of the liquidator's receipts and payments and a statement of the position in the winding up with the Official Receiver:

Details of Liquidator(s)

Name of Liquidator:

NRIC / Passport No. of Liquidator:

Date of appointment of Liquidator:

Date of Cessation of Liquidator (where applicable):

FORM VWU-9

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

INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

STATEMENT OF AFFAIRS

Name of Company:

Unique Entity No / Registration No.:

Statement of Assets and Liabilities as at the day of [month]..... [year]		
	Cost or Book Value (\$)	Estimated Realisable Value (\$)
Current Assets [insert description of current assets]		
Total Current Assets		
Non-Current Assets [insert description of non-current assets]		
Total Non-Current Assets		
Total Assets		
		Amount owing (\$)
Current Liabilities [insert description of current liabilities]		
Total Current Liabilities		
Non-Current Liabilities [insert description of non-current liabilities]		
Total Non-Current Liabilities		
Total Liabilities		
Net Assets / Liabilities		

	Cost or Book Value (\$)
Estimated Expenses of Winding Up [insert description of estimated expenses]	

***I / We hereby declare that the particulars contained in this Statement of Affairs are true to the best of my / our knowledge and belief.**

Name of Officer: Address:	NRIC / Passport No: Position:	Signature & Date
Name of Officer: Address:	NRIC / Passport No: Position:	Signature & Date
Name of Officer: Address:	NRIC / Passport No: Position:	Signature & Date

**Delete where inapplicable*

FORM VWU-10

INSOLVENCY, RESTRUCTURING AND DISSOLUTION ACT 2018
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INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

NOTICE OF HOLDING OF MEETING OF CREDITORS

Name of Company:

Unique Entity No. / Registration No.:

*I / We, [name of liquidator]
of[liquidator's firm], NRIC / Passport No hereby give
notice that a meeting of creditors of the abovenamed company was summoned and held on the
day of..... [month][year].

Dated this day of [month] [year]

Signature:

.....

Name of Liquidator

Signature:

.....

Name of Liquidator

FORM VWU-11

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

INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

PROOF OF DEBT FORM

1 Name of Company

--

2 Particulars of Creditor Claiming Debt

Name of Creditor:	
NRIC / Passport / Unique Entity / Registration No.:	
Postal Address (<i>Please see note a</i>):	
Contact Nos. (Tel / HP):	E-mail Address:
Fax No.:	
Creditor's Reference No. (<i>Please see note b</i>):	

3 Particulars of Debt

Date Incurred	Details of Debt (<i>Please see notes c, d, & e</i>)	Currency	Amount (\$) (<i>Please see note f</i>)
Total Amount of Debt Claimed:			

4 Particulars of Interest / Late Charge (*Please indicate "NIL" if interest / late charge is not applicable*)

Date Incurred	Details of Interest / Late Charge (<i>Please see note g</i>)	Currency	Amount (\$)

5 Security Held (*Please indicate whether any securities are held by you*)

Brief Description (<i>to include the date on which the security was given & its value</i>):

6 Particulars Of Persons Authorised To Complete This Proof Of Debt Form

(If same as in box 2 above, please indicate "see box 2 above")

Name:	
NRIC / Passport No.:	
Relationship to Creditor: <i>(State whether director / employee / solicitors / accountant, etc)</i>	
Name of Company / Firm: <i>(Where applicable)</i>	
Contact Nos. (Tel / HP):	
Fax No.:	E-mail address:

7 Signature of Creditor / Person Authorised To Complete This Proof Of Debt Form

7.1 I declare that to the best of my knowledge and belief, the company owes the amount claimed in boxes 3 and 4.	
7.2 I declare that I am duly authorised, by the creditor / under the seal of the creditor company, to complete this proof of debt form.	
Signature: _____	Date: ____/____/____ <i>(Day) (Month) (Year)</i>

WARNING
Lodging a false proof of debt is a criminal offence punishable with fine or imprisonment or both.

Note:

- a. Please inform the liquidator / Official Receiver of any change in address.
- b. Please indicate the reference number that will be quoted in future correspondences with the liquidator.
- c. Example of Debts are:

- Good Supplied	- Services Rendered	- GST	- Others (please specify)
- Wages and Salaries	- Personal Loan	- Overdraft facilities	
- Income Tax	- Property Tax	- CPF	
- d. Please attach copies of documents substantiating the debt. The onus is upon the creditor to prove the debt.
- e. For claims made by an authorised person on behalf of a group of workmen and others employed by the company, please provide a schedule reflecting the name, identification / passport no., address, debt description, period of which wages are due and the amount due, for each individual workman / employee.
- f. Please state whether the amount claimed includes goods and services tax and if so, the amount of the tax.
- g. Please provide a brief description on the terms of the interest / late charge and attach copies of documents substantiating the amount.

For Official Use Only

Adjudicated on day of [month] [year] _____

Admitted as follows:

Preferential	\$ _____	
Ordinary	\$ _____	
Total Admitted	\$ _____	_____
Amount Rejected	\$ _____	Liquidator
Total Amount of Debt Claimed	\$ _____	

FORM VWU-12

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

INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

NOTICE OF INTENDED DIVIDEND

Name of Company :

Unique Entity No. / Registration No. :

Address of Registered Office :

Last Day for Receiving Proofs :

Name of Liquidator :

Address :

Dated :

FORM VWU-13

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

INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

NOTICE TO CREDITORS OF INTENTION TO DECLARE
DIVIDEND

(Title)

A (a) dividend is intended to be declared in the above matter. *You are mentioned in the statement of affairs / You appear to be a creditor of the company, but you have not yet proved your proof of debt.

If you do not prove your debt by the day of [month] [year], you will be excluded from this dividend.

Dated this day of [month] [year]

.....
Liquidator

Name and address of Liquidator
.....

To: [name of creditor]
..... [address of creditor]

(a) Insert here "first" or "second" or "final" or as the case may be.

**Delete where inapplicable*

FORM VWU-14

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

INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

NOTICE OF REJECTION OF PROOF OF DEBT

(Title)

Take notice that, as liquidator of the abovenamed company, I have this day rejected your claim against the company (a) (to the extent of \$ _____) on the following grounds:

[state grounds for rejection]

And further take notice that subject to the power of the Court to extend the time, no application to reverse or vary my decision in rejecting your proof will be entertained after the expiration of *(b)* _____ days from this date.

Dated this day of [month] [year].

.....
Liquidator

To Address

- (a) If proof wholly rejected strike out words underlined.
- (b) 21 days or 7 days, as the case may be.

FORM VWU-15

INSOLVENCY, RESTRUCTURING AND DISSOLUTION ACT 2018
(ACT 40 OF 2018)INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

GENERAL PROXY

(Title)

I, (a) of [address of person or firm], a creditor [or contributory] hereby appoint (b) as (c) general proxy to vote at the meeting of creditors (or contributories) to be held in the above matter on the day of [month][year], or at any adjournment thereof.

Dated this day of [month] [year].

(Signature/ Common Seal) (d)

(Signature) (e).....

Witness:

NOTES

1. The person appointed general proxy must be either the Official Receiver or a person in the regular employ of the creditor [or contributory].
2. The proxy must be lodged with the liquidator not later than the time named for that purpose in the notice convening the meeting at which it is to be used.
3. This instrument appointing a proxy or proxies must be under the hand of the appointor or of his attorney duly authorised in writing. Where the instrument appointing a proxy or proxies is executed by a corporation, it must be executed either under its seal or under the hand of any officer or attorney duly authorised.

(a) If a firm writes "We" instead of "I", and set out the full name of the firm.

(b) Insert "Mr. or a clerk, manager, etc., in my regular employ", in which case the standing of the person appointed must be clearly set out, or "the Official Receiver in the above matter.

(c) "My" or "our".

(d) If a firm, sign the firm's trading title, and add "by A.B., a partner in the firm".

(e) The signature of the creditor or contributory appointing a proxy must not be attested as witness by the person nominated as proxy.

FORM VWU-16

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

INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

SPECIAL PROXY

(Title)

I, (a) of[address of person or firm], a creditor (or contributory), hereby appoint (b) as (c) proxy at the meeting of creditors (or contributories) to be held on the day of [month] [year], or at adjournment thereof, to vote (d)

Dated this day of [month] [year].

(Signature/ Common Seal) (e)

Signature of witness

Witness:

NOTES

1. A creditor (or contributory) may give a special proxy to any specified meeting or adjournment thereof on all or any of the following matters:

(a) for or against the appointment or continuance in office of any specified person as liquidator or as member of the committee of inspection; and

(b) on all questions relating to any matter, other than those above referred to, arising at a specified meeting or adjournment thereof.

2. The proxy must be lodged with the Official Receiver or liquidator not later than the time named for that purpose in the notice convening the meeting at which it is to be used.

3. This instrument appointing a proxy or proxies must be under the hand of the appointor or of his attorney duly authorised in writing. Where the instrument appointing a proxy or proxies is executed by a corporation, it must be executed either under its seal or under the hand of any officer or attorney duly authorised.

(a) If a firm write "We" instead of "I", and set out the full name of the firm

(b) Insert either "Mr. or the Official Receiver in the above matter".

(c) "My" or "our".

(d) Insert the word "for" or the word "against", as the case may require, and specify the particular resolution.

(e) If a firm, sign the firm's trading title and add "by A.B., partner in the firm".

FORM VWU-17

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

INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

NOTICE OF DISCLAIMER UNDER SECTION 230 OF THE
INSOLVENCY, RESTRUCTURING AND DISSOLUTION ACT
(ACT 40 OF 2018)

(Title)

Name of Company:

Unique Entity No. / Registration No.:

I, [name of liquidator], the liquidator of the abovenamed company, hereby disclaim all interest in the following property from the date of this notice:

No.	Description of Property Disclaimed	Address of Property Disclaimed (if applicable)	Reasons for Disclaiming

Details of liquidator:

Notice of this disclaimer is given to: *Official Receiver / [name of creditor]
[address of Official Receiver / creditor]

Dated this day of [month] [year].

.....
Liquidator

**Delete where inapplicable*

FORM VWU-18

INSOLVENCY, RESTRUCTURING AND DISSOLUTION ACT 2018
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INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

NOTICE OF DIVIDEND

Name of Company :
Unique Entity No. / Registration :
No.
Address of Registered Office :
Amount per centum :
First and Final or otherwise :
When payable :
Where payable :
Dated :

FORM VWU-19

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

INSOLVENCY, RESTRUCTURING AND DISSOLUTION
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AUTHORITY TO LIQUIDATOR TO PAY DIVIDENDS TO
ANOTHER PERSON

(Title)

To the liquidator

I / We hereby authorise and request you to pay to [name of person] of [address of person], of identification no. (a) , all dividends as they are declared in the abovenamed matter, and which may become due and payable to *me / us in respect of the proof of debt for the sum of \$..... against the abovenamed Company.

It is understood that this authority is to remain in force until revoked by me/us* in writing.

(Signature)
Creditor:

(Signature)
Witness:

- (a) NRIC / Passport No./ Unique Entity No./ Business Registration No.
- (b) For corporate creditors, this form is to be signed by authorised officers. Name and designation are to be indicated.

**Delete where inapplicable*

FORM VWU-20

INSOLVENCY, RESTRUCTURING AND DISSOLUTION ACT 2018
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INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

LIQUIDATOR'S TRADING ACCOUNT

Name of Company:

Unique Entity No. / Registration No.:

RECEIPTS

Date	From whom received	Nature of receipts	Amount \$
		Total	

PAYMENTS

Date	To whom paid	Nature of payments	Amount \$
		Total	

STATUTORY DECLARATION VERIFYING LIQUIDATOR'S TRADING ACCOUNT

* I / We * NRIC / Passport No.
of
and * NRIC / Passport No.
of
the liquidator(s) of the abovenamed company do solemnly and sincerely declared that

+ [the trading account set out above contains a full and true account of my / our receipts and payments in the winding up of the company], from, to, +[and that]
*I / we have not, nor has any other person by *my / our order or for my use during that period, received or paid any moneys on account of the company +[other than and except the items mentioned and specified in that account];

and *I / we make this solemn declaration by virtue of the provisions of the Oaths and Declarations Act (Cap. 211), and subject to the penalties provided by that Act for the making of false statements in statutory declarations, conscientiously believing the statements contained in this declaration to be true in every particular.

Declared at) #1. Signature:
this day) Name of Liquidator:
of)
) 2. Signature:
) Name of Liquidator:

Before me –

Signature:
Name of Commissioner for Oaths/Notary Public

- * Delete where inapplicable
+ If there are no receipts or payments, delete the words within the []
If there is more than one liquidator, all liquidators must sign.

*I / We have examined this account with the vouchers and find the same correct, and we are of the opinion that the receipts and payments are proper.

Dated this day of [month] [year].

.....
[Committee of Inspection /
a member of the Committee of Inspection /
a person nominated by the creditors]

FORM VWU-21

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

INSOLVENCY, RESTRUCTURING AND DISSOLUTION
(VOLUNTARY WINDING UP) REGULATIONS 2020

CERTIFICATE OF RECEIPT OF MONEYS BY THE
OFFICIAL RECEIVER
(Title)

This is to certify that the Official Receiver has received a sum of \$..... being the unclaimed funds and undistributed assets of the abovenamed company from the appointed liquidator of the abovenamed company on day of [month] [year].

Dated this day of [month][year] .

.....
Official Receiver