



**FORM 06n**

# Application for voluntary cancellation of incorporation

*Associations Incorporation Act 2015 s130 and 141*

**Purpose**

For use when an incorporated association passes a special resolution in accordance with the *Associations Incorporation Act 2015* (the Act) to voluntarily cancel its incorporation.

The incorporation of an association can only be voluntarily cancelled if it is solvent.

**Instructions**

- Type directly into this form electronically before printing and signing it or hand print neatly using an ink pen in block letters.
- Tick  where appropriate and attach additional pages if space in this form is insufficient.
- An incomplete application cannot be processed
- Please do not staple the documents
- Keep a copy of the application (including attachments) for your own records.

<b>OFFICE USE ONLY</b>

## SECTION A: PROPOSED INCORPORATED ASSOCIATION PARTICULARS

1. What is the name of the association?  
*The association's name as shown on the certificate of incorporation.*

2. What is the incorporated association's registration number (IARN):

## SECTION B: TERMS OF THE SPECIAL RESOLUTION TO VOLUNTARILY CANCEL

3. At a meeting of members, the association resolved by special resolution to:  
*Select all that apply*

- Apply for the voluntary cancellation of the association's incorporation
- Approve the distribution plan set out in **Section C** for the transfer of the association's surplus property

4. What is the date of the general meeting where members passed the required special resolutions?

<i>Day</i>	<i>Month</i>	<i>Year</i>

5. Provide the terms (wording) of the special resolution to voluntarily cancel below:


## SECTION C: DISTRIBUTION PLAN

Only complete this section if the association has any surplus property after the satisfaction of all debts and liabilities. If there is no surplus property proceed directly to **Section D**.

**IMPORTANT: Consumer Protection will provide written advice of when the distribution plan is approved for implementation. The association must not distribute its surplus property before receiving this advice.**

6. Provide the details of the association's property remaining after the satisfaction of all debts and liabilities.

Funds	
<b>Other property or assets:</b>	

*If there is insufficient space, please attach an annexure labelled "Surplus Assets"*

1. The members agreed by special resolution to that the surplus assets to be distributed to:

*Select all that apply*

- An association incorporated under the Act
- A company limited by guarantee under the *Corporations Act 2001*
- A company under the *Corporations Act 2001* that is registered under the *Australian Charities and Not-for-profits Commission Act 2012*
- A body corporate which holds a licence under the *Charitable Collections Act 1946*
- A body corporate whose rules prevent the distribution of property to members and is a former member of the incorporated association that is applying for cancellation
- A non-distributing Co-operative registered under the *Co-operatives Act 2009*
- A trustee for a body corporate that is a member or former member of the incorporated association which at the time of the distribution has rules that prevent the distribution of property to members

7. Provide the name of the entity or entities that the assets are to be distributed to, and the estimated value of assets being transferred:

Entity name	Estimated value of assets

*If there is insufficient space, please attach an annexure labelled "Distribution"*

8. Do the terms of the distribution plan comply with the association's rules?

- Yes  No

## SECTION D: AUTHORISED PERSONS PARTICULARS & DECLARATION

Tick only **one (1)** option. If you do not hold a position on the committee, select the Agents declaration and provide a signed copy of the **Certificate and statement of a management committee member**

**Committee Member's declaration**

*I hereby certify that:*

- *I am a duly elected committee member of the association who is authorised to lodge this application along with any accompanying documents under the Act;*
- *before the special resolution to voluntarily cancel the incorporation of the association was passed by members, the management committee examined the association's affairs and by resolution declared the association has met, or is able to meet its debts and liabilities;*
- *the special resolution to cancel the incorporation of the association was duly passed by special resolution of the members at a general meeting called in accordance with the rules and the requirements of the Associations Incorporation Act 2015;*
- *the distribution plan, if any, set out in this application for voluntary cancellation was approved by special resolution of the association's members; and*
- *I understand that it is an offence under section 177 of the Act to make a false and misleading declaration in relation to this application.*

**Agent's declaration**

*I certify that:*

- *I am authorised by the association's committee to lodge this application any accompanying documents under the Act;*
- *I have prepared this application in accordance with the information supplied by the association's committee;*
- *I have attached a Certificate and Statement of a Committee Member form signed by a member of the association's management committee; and*
- *I understand that it is an offence under section 177 of the Act to make a false and misleading declaration in relation to this application.*

Signed

Date

Title

Mr  Mrs  Ms  Miss  Other ► \_\_\_\_\_

Name

Surname

Address  
(Street or PO)

Suburb

State

Postcode

Email

Telephone

**IMPORTANT: Before you sign this form, check that you have provided true and correct information.**

**Privacy Statement – please read.** The Department of Mines, Industry Regulation and Safety, Consumer Protection Division is collecting and holding information supplied for the purposes of the Act. In accordance with this legislation, a copy of this form and the information it contains will be available for purchase by the public upon payment of a prescribed fee.

## SUBMITTING THIS APPLICATION

Return the completed application, with any supporting documentation and the applicable fees:

In person at:	Level 1, Mason Bird Building, 303 Sevenoaks Street, CANNINGTON WA
By mail to:	Department of Mines, Industry Regulation and Safety, Consumer Protection, Associations & Charities Branch, Locked Bag 100 EAST PERTH 6892
Online	You can submit this form online using AssociationsOnline by visiting <a href="http://www.commerce.wa.gov.au/associationsonline">www.commerce.wa.gov.au/associationsonline</a>

**Do not submit by email. We cannot accept forms containing credit card numbers that are emailed**

### What happens next;

- The application and attachments will be reviewed. You will be notified in writing if further information is needed.
- If any change occurs in the information you have provided in your application, you must notify Consumer Protection as soon as possible.

If you need assistance completing this form contact the Associations and Charities Branch on **1300 30 40 74** or **6552 9300 between 8.30am and 4.30pm weekdays.**

## PAYMENT

**GST is not applicable on fees. A receipt will not be issued unless specifically requested.**

Cash  
(Pay in person – do not send cash in the mail)

Payment method  Money Order / Cheque  
(Made payable to the Department of Mines, Industry Regulation and Safety)

Debit / Credit Card ► Complete details below

### IMPORTANT

**Consumer Protection cannot accept debit/credit card details over the phone or email (including any attachments) in accordance with the Payment Card Industry Data Security Standards.**

**If an email is received containing debit /credit card details, it will be deleted immediately and your application and payment will not be processed.**

Charge my  VISA  MASTERCARD

Debit/Credit card number

Expiry Date  M  M /  Y  Y Amount authorised \$

Cardholder's name:

Cardholder's signature  Date:  DD /  MM /  YYYY

**If the payment has been made by another person on behalf of the applicant, please complete below**

Postal address:

Suburb:  State:  Postcode:

Telephone  Email