

# Declaration company not eligible for temporary restructuring relief

## Company details

Company name

ACN

## 1 Date eligibility criteria for temporary restructuring relief not met:

  /   /  

[D D] [M M] [Y Y]

## 2 Declaration

Please tick the box.

The directors of the company declare that there are not reasonable grounds to believe either or both of the following:

(i) that the company is insolvent, or is likely to become insolvent before the declaration under subparagraph 458E(1)(a)(i) expires;

(ii) that the eligibility criteria for restructuring would be met in relation to the company if a restructuring practitioner were appointed on the day on which notice of the declaration under subparagraph 458E(1)(a)(i) is published, or on any day afterwards on which the declaration has not expired; and

(b) one or more of the directors becomes aware of that fact.

## 3 Details of company directors

If there is insufficient space in this section to provide all director information, you may photocopy the relevant page(s) and submit as part of this lodgement

Family name

Given names

Postal address

Suburb/City

State/Territory

Postcode

Family name

Given names

Postal address

Suburb/City

State/Territory

Postcode

Family name

Given names

Postal address

Suburb/City

State/Territory

Postcode

Family name

Given names

Postal address

Suburb/City

State/Territory

Postcode

## Signature

This form must either be signed by one director on behalf of myself and all other company directors or by each director.

## Single director signing on behalf of all other directors

I certify that I am signing on behalf of myself and all other company directors and that the information in this declaration is true and complete.

Name

Signature

Date signed

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>
[D	D]		[M	M]		[Y	Y]

If there is insufficient space in this section for all directors to sign, you may photocopy the relevant page(s) and submit as part of this lodgement

## All directors signing the declaration

Name

Signature

Date signed

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>
[D	D]		[M	M]		[Y	Y]

Name

Signature

Date signed

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>
[D	D]		[M	M]		[Y	Y]

Name

Signature

Date signed

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>
[D	D]		[M	M]		[Y	Y]

Name

Signature

Date signed

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>
[D	D]		[M	M]		[Y	Y]