Form 8

(Regulation 9)

(In typescript and completed in duplicate)



**THE PATENTS AND COMPANIES REGISTRATION AGENCY**

**The Companies Act, 2017**

**(Act No. 10 of 2017)**

**\_\_\_\_\_\_\_\_\_\_\_\_**

**The Companies (Prescribed Forms) Regulations, 2018**

***(Section 48, 49, 50, 51, 52 and 53)***

***Available at*** [***www.pacra.org.zm***](http://www.pacra.org.zm)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **APPLICATION FOR CONVERSION OF A COMPANY** | | | | | | | | |
| **PART A**  **COMPANY DETAILS** | | | | | | | | |
|  | Company Number  *Indicate the 12 digit registration number* | | | |  | |  | |
|  | Company Name  *Indicate the name as captured on the certificate of incorporation* | | | |  | |  | |
|  | Phone Number *Include the international code (e.g. +260 for Zambia)* | | *Mobile* | |  | |  | |
| *Landline* | |  | |
|  | Email Address | | | |  | |  | |
|  | Reason for Change  *Provide Reasons For Conversion.* | | | |  | |  | |
|  | Type of Company  *Select one type of company by marking with “X”* | | | | Private Company Limited by Shares |  |  | |
| Private Company Limited by Guarantee |  |
| Public Limited Company |  |
| Unlimited Private Company |  |
|  | Conversion Date  *Provide Reasons For Conversion.* | | | |  | |  | |
|  | New Company Type  *Select one type of company by marking with “X”* | | | | Private Company Limited by Shares |  |  | |
| Private Company Limited by Guarantee |  |
| Public Limited Company |  |
| Unlimited Private Company |  |
| ***This form must be accompanied by a special resolution and other documents as specified under section 54*** | | | | | | | | |
| **PART B**  **DECLARATION** | | | | | | | | |
|  | *I, the undersigned, declare that the information stated in this document is true and correct.*  *Identity Number:*  *First Name:*  *Surname:*   |  |  |  |  |  | | --- | --- | --- | --- | --- | | *Capacity:* | *Director* |  | *Secretary* |  |   *Signature: Date:* | | | | | | | |
| **PART C**  **PARTICULARS OF PERSON LODGING APPLICATION** | | | | | | | | |
|  | First Name | | |  | | | |  |
|  | Surname | | |  | | | |
|  | Gender | | |  | | | |
|  | Date of Birth | | |  | | | |
|  | Nationality | | |  | | | |  |
|  | Identity Type  For Zambians: *NRC*  For non-Zambians: *NRC/Passport/ Driver’s Licence/Resident Permit* | | |  | | | |  |
|  | Identity Number | | |  | | | |
|  | Phone Number | *Mobile* | |  | | | |
| *Landline* | |  | | | |
|  | Email Address | | |  | | | |  |
|  | Physical Address | *Plot/House/ Village* | |  | | | |  |
| *Street* | |  | | | |
| *Area* | |  | | | |
| *Town* | |  | | | |
| *Province* | |  | | | |
| *Country* | |  | | | |
|  | Signature: Date: | | | | | | | |