

*Government Notice No. 157 of 2012***THE INSOLVENCY ACT****Regulations made by the Minister under section 411(1)(a) of the Insolvency Act**

1. These regulations may be cited as the Insolvency (Registration, Cessation to Hold Office by and Suspension or Removal from Practice of Insolvency Practitioners) Regulations 2012.
2. In these regulations –
  - “Act” means the Insolvency Act;
  - “Director” means Director of the Insolvency Service appointed under section 370 of the Act;
  - “Insolvency Practitioner” means a person who is appointed under the Insolvency Act to be and holds office as a liquidator (other than the official receiver), receiver, manager or administrator.
3. For the purposes of this Act –
  - (a) every person who intends to practise as an Insolvency Practitioner, and who is qualified under the Act, shall submit an application to the Director, as per the form specified in the First Schedule, for the registration of his name to be kept on the register of Insolvency Practitioners pursuant to section 374(1) of the Act;
  - (b) every Insolvency Practitioner, who for a period of 6 months has ceased to hold office as an Insolvency Practitioner, shall, within 7 days, give notice of that fact to the Director as per the form specified in the Second Schedule pursuant to section 374(3)(a) of the Act;

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- (c) every Insolvency Practitioner who is suspended or removed from the practice of accountancy or law or the practice of a company secretary by a professional body in Mauritius or by a comparable professional body outside Mauritius, shall give notice of that fact to the Director as per the form specified in the Third Schedule pursuant to section 374(4) of the Act, within 7 days of the Insolvency Practitioner receiving notice of the suspension or removal from practice.
4. The Director of the Insolvency Service may register a person as an Insolvency Practitioner and enter his name and such other particulars as he considers relevant in the register, where he is satisfied that such person –
- (a) has the required qualifications and necessary competence to practise as an Insolvency Practitioner; and
  - (b) meets the requirements laid down in the Act.
5. For the purpose of registration as an Insolvency Practitioner, the Director of the Insolvency Service –
- (a) may require the submission of such documentary evidence as may be necessary;
  - (b) may register a person subject to such conditions he may determine; and
  - (c) shall inform a person in writing of his registration in such manner as he may determine.
6. The Director of the Insolvency Service may refuse to register a person as an Insolvency Practitioner where that person does not satisfy the requirements laid down, and he shall inform that person in writing of such refusal within 7 days of receipt of all documents in support of an application.

7. Every person registered as an Insolvency Practitioner shall communicate to the Director of the Insolvency Service any change in the particulars initially submitted in an application within 14 days of such change taking place.
8. These regulations shall come into operation on 1 September 2012.

Made by the Minister on 28 August 2012.

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**FIRST SCHEDULE**  
[Regulation 3(a)]

**S374(1)/IS 9**

<b>APPLICATION FOR REGISTRATION AS AN INSOLVENCY PRACTITIONER</b> <b>[S. 374(1) of the Insolvency Act]</b>		
<b>PERSONAL DETAILS</b>		
<b>1.</b>	Title (Mr/Mrs/Ms/Dr)	
<b>2.</b>	Surname	
<b>3.</b>	Maiden name (if applicable)	
<b>4.</b>	First name(s)	
<b>5.</b>	Date of birth	
<b>6.</b>	Nationality	
<b>7.</b>	National Identity Card No.	
<b>8.</b>	In case of a non-citizen of Mauritius	Passport or travel document No. .... Issuing Authority ..... Date of issue ..... Date of expiry ..... Particulars of Occupation Permit, if applicable ..... Date of issue ..... Date of expiry .....
<b>9.</b>	Residential address Telephone No.	
<b>10.</b>	Office address. Telephone No. Mobile No. Facsimile No. E-mail address	
<b>11.</b>	Details of residence (for last 5 years, if other than Mauritius)	

<b>PROFESSIONAL QUALIFICATIONS AND EXPERIENCE</b>	
<b>12.</b>	Qualifications held
	Name of Institution
	Country
	Date of qualification
<b>13.</b>	Membership of professional body (Please tick as appropriate)  <input type="checkbox"/> Accountancy <input type="checkbox"/> Law <input type="checkbox"/> Secretary  Professional Body Membership No. ....
<b>14.</b>	Other professional qualifications and/or membership of International Insolvency Associations
<b>15.</b>	Experience as an Insolvency Practitioner *  *Applicant may wish to provide post qualification information on the nature of his involvement in managing insolvencies over the past 3 years
<b>16.</b>	Enclosures –  (a) photocopies of professional qualifications  (b) photocopies of certificates of professional bodies

<b>OTHER INFORMATION</b>		
<b>17.</b>	Are you presently performing duties of administrator/receiver /liquidator?  If yes, please give the name/s of the company/ies	
<b>18.</b>	Please list down the cases in which you have performed the duties of an Insolvency Practitioner	
<b>19.</b>	Please quote your business registration number, if any	

**DECLARATION BY APPLICANT**

**20.** On signing this application form, I declare that –

- (a) the particulars given in this form are true, accurate and complete to the best of my knowledge and belief, and I will provide such further information as the Director of Insolvency Service may request;
- (b) I have 3 years' relevant post qualification experience in the area covered by the professional qualification referred to above;
- (c) I am a fit and proper person, and I am not under any suspension;
- (d) I hold a professional indemnity insurance cover for not less than one million rupees, and will maintain that professional indemnity insurance coverage and, following expiry of the current policy, will renew it;
- (e) I am not incapacitated by reason of any physical or mental health;
- (f) I undertake to abide by the provisions of the Insolvency Act and the rules of professional conduct for Insolvency Practitioners;
- (g) I understand that a false declaration on this form may invalidate this application;
- (h) I authorise the Director of Insolvency Service to use, verify and make any enquiries relating to the information provided on this form and in relation to any other matter concerning this application.

.....  
Date

.....  
Signature

*For Official use only*

Registration Number .....

Date of Registration .....

**SECOND SCHEDULE**  
[Regulation 3(b)]

**S374(3)(a) IS10**

**NOTICE OF CEASING TO HOLD OFFICE AS AN INSOLVENCY PRACTITIONER**  
[S. 374(3)(a) of the Insolvency Act]

**TO:** The Director of the Insolvency Service

**TAKE NOTICE** that I have ceased to hold office as an Insolvency Practitioner for a period of 6 months.

- 1. Full name of Insolvency Practitioner  
.....  
[surname first, in block letters]
- 2. Date of ceasing to hold any office as an Insolvency Practitioner  
.....
- 3. State the nature of the office the Insolvency Practitioner last held and has now ceased to hold .....

(State whether liquidator, receiver or administrator in a Voluntary Administration)

Dated this ..... day of ..... 20....

.....  
Signature of Insolvency Practitioner

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**THIRD SCHEDULE**  
[Regulation 3(c)]

**S374(4)/IS 11**

**NOTICE OF SUSPENSION OR REMOVAL FROM PROFESSIONAL PRACTICE OF AN INSOLVENCY PRACTITIONER**  
[S. 374(4) of the Insolvency Act]

**TO:** The Director of the Insolvency Service

**TAKE NOTICE** that I have been suspended or removed from professional practice.

- 1. Full name of insolvency practitioner .....  
(surname first, in block letters)
- 2. Type of professional practice involved .....  
(Accountancy/Law/Secretary)
- 3. State whether suspension or removal from practice .....  
.....
- 4. Date of suspension or removal .....  
(Attach documentary evidence of receipt of notification from professional body)

Dated this ..... day of ..... 20....

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Signature of Insolvency Practitioner

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