



**PARTNERSHIP AND BUSINESS NAMES ACT
NOTICE OF DISSOLUTION OF PARTNERSHIP OR
PARTNERSHIP CEASING TO CARRY ON BUSINESS
WITHIN THE NORTHWEST TERRITORIES**

FILED – DÉPÔT <i>Internal Use Only/À Usage Interne Seulement</i>
File : _____
Date : _____
REGISTRAR OF CORPORATIONS REGISTRAIRE DES SOCIÉTÉS

1) NAME OF PARTNERSHIP

2) Six digit registration number

3) **(CHOOSE ONE)** The Partnership

a. has dissolved (no longer exists)

OR

b. has ceased to carry on business within the Northwest Territories

4) Effective date (cannot be a future date)

month day year

I HEREBY DECLARE that this notice is made under Section 51(1) of the *Partnership and Business Names Act*, and that the information set forth in this notice is true.

★ Forms with original signatures must be submitted.

(Scans, photocopies etc. cannot be accepted)

Dated this _____ day of _____, 20_____.

Per: _____
(original signature of partner/authorized officer of corporation)