## Firm closure notification



Use this form to tell us that your firm:

- is closing or ceasing to provide legal services
- no longer needs to be authorised
- is ceasing because of an acquisition or merger with another authorised body.

You should submit this form no more than seven days before you intend to close.

| Section 1 - Closure details |                       |                                |                               |                    |      |  |  |
|-----------------------------|-----------------------|--------------------------------|-------------------------------|--------------------|------|--|--|
| 1.1                         | Firm name             |                                |                               | SRA number         |      |  |  |
| 1.2                         | Closure date          |                                |                               |                    |      |  |  |
| 1.3                         | Why is your f         | irm closing?                   |                               |                    |      |  |  |
|                             | Ref                   | tirement                       | Difficulty obtaining P        | II                 |      |  |  |
|                             | III h                 | ealth                          | Merger or acquisition         | ı                  |      |  |  |
|                             | Fin                   | ancial reasons                 | Other (provide detail         | s below)           |      |  |  |
|                             | Give a brief          | summary below of the circu     | mstances leading to the clos  | sure               |      |  |  |
|                             |                       |                                |                               |                    |      |  |  |
|                             |                       |                                |                               |                    |      |  |  |
|                             |                       |                                |                               |                    |      |  |  |
| 1.4                         | Has the firm p        | provided legal services or c   | arried out reserved legal act | ivities? <b>Ye</b> | s No |  |  |
|                             | If <b>No</b> , you do | not need to fill in sections 2 | 2-6 of this form              |                    |      |  |  |
|                             |                       |                                |                               |                    |      |  |  |
|                             |                       |                                |                               |                    |      |  |  |
|                             |                       |                                |                               |                    |      |  |  |
|                             |                       |                                |                               |                    |      |  |  |

| Merger or acquisition details  Fill in the rest of this section if your firm is ceasing because it is merging with, or has been acquired by another firm. |   |  |                     |                    |  |  |  |
|---|---|--|---------------------|--------------------|--|--|--|
| Merg  | Merger  |  |                     |                    |  |  |  |
| The a   | The authorisation of two or more firms ends and the businesses come together to form a new firm. If you're merging into a new firm, you need to apply for authorisation before you start. You can find the forms and guidance on our website. |  |                     |                    |  |  |  |
| Acqu  | isition   |  |                     |                    |  |  |  |
| A firm  | n's authorisa   | tion ends and the business is acquired by, or am | algamates with, one | e or more existing |  |  |  |
| 1.5   | ls it a merge   | r or acquisition?                                |                     |                    |  |  |  |
|   |   | Merger Acquisition                               |                     |                    |  |  |  |
| 1.6   | Date  |  |                     |                    |  |  |  |
| 1.7   | Briefly desc  | ribe the merger or acquisition                   |                     |                    |  |  |  |
|   |   |  |                     |                    |  |  |  |
|   |   |  |                     |                    |  |  |  |
| 4.0   | D :: 1.   |  |                     |                    |  |  |  |
| 1.8   | Provide deta  | ails of the acquiring, or new, firm(s)           |                     |                    |  |  |  |
|   | Firm name   |  | SRA no              |                    |  |  |  |
|   | Contact   |  | SRA no              |                    |  |  |  |
|   | Firm name   |  | SRA no              |                    |  |  |  |
|   | Contact SRA no  |  |                     |                    |  |  |  |
| We will contact these firms to verify the information provided  |   |  |                     |                    |  |  |  |
|   |   |  |                     |                    |  |  |  |

# **Section 2 - Professional indemnity insurance**

| You must make sure that your firm's professional indemnity insurance cover continues after it closes, unless your firm is exempt or has a waiver.   |  |   |                                    |            |          |  |  |
|---|--|---|------------------------------------|------------|----------|--|--|
| 2.1   | Does the firm have a waiver, or an exemption, from the requirement to hold professional indemnity insurance?  Yes  |   |                                    |            | No       |  |  |
| If <b>Ye</b>  | If <b>Yes</b> , you do not need to answer the rest of the questions in this section.   |   |                                    |            |          |  |  |
| 2.2   | How will your firm be  | our firm be insured after it closes?  |                                    |            |          |  |  |
|   | Run-off cover  | Successor practice  |                                    |            |          |  |  |
| Run   | -off cover   |   |                                    |            |          |  |  |
| 2.3   | Participating insurer  |   |                                    |            |          |  |  |
| 2.4   | Policy number  |   |                                    |            |          |  |  |
| 2.5   | Have you paid the rui  | n-off premium?  |                                    | Yes        | No       |  |  |
| You   | must send with this for  | m, evidence that you have paid the pren   | nium. This could be                | <b>)</b> : |          |  |  |
| <ul> <li>A policy certificate which states that it has been issued on receipt of payment of the premium.</li> <li>Written confirmation from your insurer or broker that the premium has been paid.</li> <li>A quotation, policy documents or invoice along with evidence of payment such as a bank statement or evidence of bank transfer.</li> </ul> |  |   |                                    |            |          |  |  |
| • /   | Written confirmation fro<br>A quotation, policy docu   | m your insurer or broker that the premiul<br>uments or invoice along with evidence of | m has been paid.                   | ·          | ement or |  |  |
| • /   | Written confirmation fro<br>A quotation, policy docu   | m your insurer or broker that the premiul<br>uments or invoice along with evidence of | m has been paid.                   | ·          | ement or |  |  |
| Suc   | Written confirmation fro<br>A quotation, policy docu<br>evidence of bank transf  | m your insurer or broker that the premiul<br>uments or invoice along with evidence of | m has been paid.                   | ·          | ement or |  |  |
| Suc   | Written confirmation from the Writte | m your insurer or broker that the premiul<br>uments or invoice along with evidence of | m has been paid. payment such as a | ·          | ement or |  |  |

### **Section 3 - Informing your clients**

| You must tell all your clients that you are closing so that they can choose a firm to deal with their matter. Your clients must consent for you to transfer their property or money to another firm. |   |            |          |  |  |
|--|---|------------|----------|--|--|
| 3.1  | Do you have any live files?   | Yes        | No       |  |  |
|  | If <b>No</b> , skip to question 3.4   |            |          |  |  |
| 3.2  | If <b>Yes</b> , how many live files do you have?  |            |          |  |  |
| 3.3  | What are you going to do with your live files?  |            |          |  |  |
|  |   |            |          |  |  |
|  |   |            |          |  |  |
|  |   |            |          |  |  |
| 3.4  | Have you transferred any live files to other firms?   | Yes        | No       |  |  |
|  | If <b>No</b> , skip to question 3.7   |            |          |  |  |
| 3.5  | If Yes, provide the names of the firms and how many files were transferred to e                   | ach        |          |  |  |
|  |   |            |          |  |  |
|  |   |            |          |  |  |
|  |   |            |          |  |  |
|  |   |            |          |  |  |
|  |   |            |          |  |  |
| 3.6  | Did your clients consent for you to transfer files to other firms?                                | Yes        | No       |  |  |
| 3.6<br>3.7   | Did your clients consent for you to transfer files to other firms?  Do you have any undertakings? | Yes<br>Yes | No<br>No |  |  |
|  |   |            |          |  |  |
| 3.7  | Do you have any undertakings?   |            |          |  |  |
| 3.7  | Do you have any undertakings?  If <b>Yes</b> , how many?  |            |          |  |  |
| 3.7  | Do you have any undertakings?  If <b>Yes</b> , how many?  |            |          |  |  |
| 3.7  | Do you have any undertakings?  If <b>Yes</b> , how many?  |            |          |  |  |

### **Section 4 - Client money**

You must deal promptly with any money remaining in your client account(s), or any money you receive after your firm has closed.

4.1 Has your firm ever held client money?

Yes

No

If **No**, you do not need to answer the rest of the questions in this section.

| 4.2                        | Is there still money in your client account(s)?   | Yes         | No         |  |  |  |
|----------------------------|---|-------------|------------|--|--|--|
|                            | If <b>No</b> , skip to question 4.9   |             |            |  |  |  |
| 4.3                        | What is the total balance of your client account(s)?  |             |            |  |  |  |
| 4.4                        | When do you estimate the client account(s) will reach a final nil balance? (MM/YYYY)  |             |            |  |  |  |
| Clos                       | sed matter balances   |             |            |  |  |  |
| 4.5                        | Do you have any closed matter balances?   | Yes         | No         |  |  |  |
|                            | If <b>No</b> , you do not need to answer the rest of the questions in this section.   |             |            |  |  |  |
| 4.6                        | How much of the total balance in your account(s) relates to closed matters?   |             |            |  |  |  |
| 4.7                        | How much is the largest individual closed matter balance?   |             |            |  |  |  |
|                            | u can't return balances to the rightful owner(s), you need our written authorisation<br>Professional Ethics for guidance.   | to withdrav | w it. Con- |  |  |  |
| 4.8                        | How are you going to distribute closed matter balances? Then go to Section 5  |             |            |  |  |  |
|                            |   |             |            |  |  |  |
|                            |   |             |            |  |  |  |
|                            | sing to hold  |             |            |  |  |  |
| <b>Cea</b><br>4.9          | sing to hold  Do you expect to receive more client money?   | Yes         | No         |  |  |  |
|                            |   | Yes         | No         |  |  |  |
| 4.9                        | Do you expect to receive more client money?   | Yes         | No         |  |  |  |
| 4.9                        | Do you expect to receive more client money?  If <b>No</b> , go to question 4.11.  When do you estimate the client account(s) will reach a final nil balance?  | Yes         | No         |  |  |  |
| 4.10<br>4.11               | Do you expect to receive more client money?  If <b>No</b> , go to question 4.11.  When do you estimate the client account(s) will reach a final nil balance?  (MM/YYYY) <b>Then go to Section 5</b>   |             |            |  |  |  |
| 4.10<br>4.11<br>You        | Do you expect to receive more client money?  If <b>No</b> , go to question 4.11.  When do you estimate the client account(s) will reach a final nil balance? (MM/YYYY) <b>Then go to Section 5</b> When did the client account(s) reach a final nil balance?  |             |            |  |  |  |
| 4.10<br>4.11<br>You<br>Sec | Do you expect to receive more client money?  If <b>No</b> , go to question 4.11.  When do you estimate the client account(s) will reach a final nil balance?  (MM/YYYY) <b>Then go to Section 5</b> When did the client account(s) reach a final nil balance?  must send with this form, evidence that you no longer hold any client money, e.g.  | bank state  | ments.     |  |  |  |
| 4.10<br>4.11<br>You<br>Sec | Do you expect to receive more client money?  If No, go to question 4.11.  When do you estimate the client account(s) will reach a final nil balance? (MM/YYYY) Then go to Section 5  When did the client account(s) reach a final nil balance?  must send with this form, evidence that you no longer hold any client money, e.g.  tion 5 - Client documents and closed files  u hold files and other documents for former clients, you will need to tell us what you | bank state  | ments.     |  |  |  |

| 5.3 Tell us what you are doing with wills, deeds and closed files. Tick all that apply below |                        |  |                      |         |              |  |  |
|--|------------------------|--|----------------------|---------|--------------|--|--|
|  |                        |  | Wills and de         | eds C   | losed files  |  |  |
|  | Giving to c            | lients   |                      |         |              |  |  |
| Using a storage provider   |                        |  |                      |         |              |  |  |
| Storing at another firm  |                        |  |                      |         |              |  |  |
|  | Storing electronically |  |                      |         |              |  |  |
|  | Destroying files       |  |                      |         |              |  |  |
|  | Other                  |  |                      |         |              |  |  |
| Stora  | age provider(s)        |  |                      |         |              |  |  |
| If you   | u have told us tha     | at you are using a storage provider, provide the | e information below. |         |              |  |  |
| 5.4  | Provider name          |  |                      |         |              |  |  |
|  | Email                  |  |                      |         |              |  |  |
|  | Phone                  |  |                      |         |              |  |  |
| 5.5  | What payment           | arrangements have been made for ongoing sto      | orage?               |         |              |  |  |
|  |                        |  |                      |         |              |  |  |
|  |                        |  |                      |         |              |  |  |
|  |                        |  |                      |         |              |  |  |
|  | You must send,         | with this form, evidence that you have made a    | rrangements to pay   | for ong | oing storage |  |  |
| Stori  | ng at another fi       | rm   |                      |         |              |  |  |
| 5.6  | Firm name              |  | SRA no               |         |              |  |  |
| 5.7  | Do you have clie       | ent consent to transfer files here?              |                      | Yes     | No           |  |  |
| Stori  | ng electronical        | ly   |                      |         |              |  |  |
| 5.8  | Tell us more if y      | ou are storing files and documents electronica   | ally                 |         |              |  |  |
|  |                        |  |                      |         |              |  |  |
|  |                        |  |                      |         |              |  |  |
|  |                        |  |                      |         |              |  |  |

| Other storage   |   |  |                  |                |         |  |
|---|---|--|------------------|----------------|---------|--|
| 5.9   | Tell us more if you ticked 'Other' on the previous page |  |                  |                |         |  |
|   |   |  |                  |                |         |  |
|   |   |  |                  |                |         |  |
|   |   |  |                  |                |         |  |
| Sec   | tion 6 - Co   | ntact details  |                  |                |         |  |
|   | •   | entact details of a manager who worked at your   | firm that we car | n give to clie | nts who |  |
| wan   |   | files or documents.  |                  |                |         |  |
| 6.1   | Contact name  |  | SRA no           |                |         |  |
| 6.2   | Post  |  |                  |                |         |  |
| 6.3   | Email   |  |                  |                |         |  |
| 6.4   | Phone   |  |                  |                |         |  |
| 6.5   | How would the   | contact prefer to be contacted?  | ·                | Email          | Phone   |  |
|   |   |  |                  |                |         |  |
| Sec   | tion 7 - Yo   | ur authorisation   |                  |                |         |  |
| auth  | orisation under   | nger providing legal services, we need to end it<br>the SRA Authorisation of Firms Rules if a firm n<br>asider it in the public interest to do so. |                  | •              |         |  |
|   | e practices   |  |                  |                |         |  |
| 7.1   |   | s to revoke your firm's authorisation?   |                  | Yes            | No      |  |
| Par   | tnerships   |  |                  |                |         |  |
| If your firm no longer exists because the partnership has dissolved or wound up, authorisation ends automatically. Otherwise you should ask us to revoke authorisation. |   |  |                  |                |         |  |
| 7.2   | Will the partne services?                               | rship continue to exist after it has stopped provi   | ding legal       | Yes            | No      |  |
| 7.3   | When did the partnership dissolve? (DD/MM/YYYY)         |  |                  |                |         |  |
| 7.4   | Do you want u   | s to revoke your firm's authorisation?   |                  | Yes            | No      |  |
| Limited companies and LLPs  |   |  |                  |                |         |  |
| 7.5   | Do you want u   | s to revoke your firm's authorisation?   |                  | Yes            | No      |  |
|   |   |  |                  |                |         |  |

#### **Section 8 - Declaration**

| This section must be completed by the firm's COLP or an individual manager In providing this information on behalf of the closed/closing firm, I confirm that:   |   |  |  |  |  |
|--|---|--|--|--|--|
| <ul> <li>the information provided is correct and complete to the best of my knowledge and be</li> <li>I have the authority to provide this information on behalf of the firm and all of its management.</li> </ul> | · |  |  |  |  |
| 8.1 I have read and understood the declaration - tick to confirm   |   |  |  |  |  |
| 8.2 Forename(s) Surname  |   |  |  |  |  |
| 8.3 SRA no Date of birth   |   |  |  |  |  |
| 8.4 Date   |   |  |  |  |  |
| Section 9 - Returning the form   |   |  |  |  |  |
| To help us process your application, check that you have completed all relevant sections and that the form declaration has been completed correctly.   |   |  |  |  |  |
| Section 10 - What we will do with your data  |   |  |  |  |  |
|  |   |  |  |  |  |