

**2001 No. 764**

**INSOLVENCY, ENGLAND AND WALES**

**COMPANIES**

**The Insolvent Companies (Reports on Conduct of Directors)  
(Amendment) Rules 2001**

<i>Made - - - -</i>	<i>1st March 2001</i>
<i>Laid before Parliament</i>	<i>7th March 2001</i>
<i>Coming into force</i>	<i>2nd April 2001</i>

The Lord Chancellor, in exercise of the powers conferred upon him by section 411 of the Insolvency Act 1986<sup>(a)</sup> and section 21(2) of the Company Directors Disqualification Act 1986<sup>(b)</sup>, and of all other powers enabling him in that behalf, with the concurrence of the Secretary of State, and after consulting the committee existing for that purpose under section 413 of the Insolvency Act 1986, hereby makes the following Rules:—

**1.**—(1) These Rules may be cited as the Insolvent Companies (Reports on Conduct of Directors) (Amendment) Rules 2001.

(2) These Rules shall come into force on 2nd April 2001.

(3) In these Rules “the 1996 Rules” means the Insolvent Companies (Reports on Conduct of Directors) Rules 1996<sup>(c)</sup>.

**2.**—(1) The 1996 Rules shall be amended in accordance with this rule.

(2) There shall be substituted for the Schedule to the 1996 Rules the Schedule to these Rules.

**3.**—(1) Where any of the events mentioned in sub-paragraphs (a), (b) or (c) of rule 3(1) of the 1996 Rules occurred before the coming into force of these Rules this rule shall apply.

(2) Until 1st August 2001—

(a) the forms contained in the Schedule to the 1996 Rules, before the coming into force of these Rules, which were required to be used for the purpose of complying with the 1996 Rules, or

(b) the Form D1 or D2, as appropriate, as set out in the Schedule to these Rules, and as substituted in the 1996 Rules, or a form which is substantially similar thereto, with such variations, if any, as the circumstances require,

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<sup>(a)</sup> 1986 c. 45.

<sup>(b)</sup> 1986 c. 46; amended by the Insolvency Act 2000 (c. 39), in relation to these Rules the relevant amendments are, the substitution of section 6(3) by sections 6(3), 6(3A), 6(3B) and 6(3C). The amendment made to section 21(2) by the Companies Act 1989 (c. 40) is not relevant for the purposes of these Rules.

<sup>(c)</sup> S.I. 1996/1909.

may be used for the purpose of complying with rules 3 or 4 of the 1996 Rules; but after that date the forms mentioned in sub-paragraph (b) of this paragraph shall be used for that purpose.

23rd February 2001

*Irvine of Lairg, C.*

I concur on behalf of the Secretary of State

1st March 2001

*Kim Howells,*  
Parliamentary Under-Secretary of State for  
Consumers and Corporate Affairs,  
Department for Trade and Industry

## SCHEDULE

Rule 2(2)

## FORMS

**D1: FULL REPORT****REPORT UNDER SECTION 7(3) OF THE COMPANY DIRECTORS  
DISQUALIFICATION ACT 1986.****PLEASE REFER TO THE GUIDANCE NOTES ISSUED BY THE INSOLVENCY SERVICE****NAME OF COMPANY:**

PLEASE PROVIDE THE FOLLOWING INFORMATION:

**SECTION 1: OFFICE-HOLDER**

1. NAME OF THE OFFICE-HOLDER(S):

2. NAME OF THE FIRM AND ADDRESS OF THE OFFICE-HOLDER(S):

3. ARE YOU REPORTING AS:

LIQUIDATOR IN A VOLUNTARY LIQUIDATION  
(Please give date of resolution for voluntary winding up.)

ADMINISTRATIVE RECEIVER

ADMINISTRATOR?  
(Tick as appropriate.)

4. DATE OF APPOINTMENT:

5. NAME OF THE MEMBER OF YOUR STAFF WITH DAY TO DAY RESPONSIBILITY FOR  
THE CASE:

TEL NO:

FAX NO:

POSITION:

**D1 SECTION 2: COMPANY**

6. NAME OF THE COMPANY: (Please include details of all registered names and trading styles of the company used in the last two years.)
  
7. COMPANY REGISTERED NUMBER:
  
8. CURRENT REGISTERED OFFICE ADDRESS:
  
9. ANY OTHER REGISTERED OFFICE IN THE SIX MONTHS PRIOR TO:—  
YOUR APPOINTMENT AS ADMINISTRATIVE RECEIVER, THE DATE OF THE  
ADMINISTRATION ORDER, OR THE DATE OF THE RESOLUTION(S) FOR VOLUNTARY  
WINDING UP:
  
10. PRINCIPAL TRADING ADDRESS(ES):
  
11. NATURE OF THE COMPANY'S BUSINESS:
  
12. WHEN DID THE COMPANY COMMENCE TO TRADE?  
(Please state month and year if commencement was within the last five years, or year only if before that.)
  
13. DETAILS OF ANY OTHER ADMINISTRATIVE RECEIVERSHIP, VOLUNTARY  
LIQUIDATION OR ADMINISTRATION IN RELATION TO THE COMPANY:  
(Stating type, name of office-holder(s), date of appointment and (if appropriate) date of  
resolution(s) for voluntary winding up.)

**D1 SECTION 3: COMPANY DIRECTORS**

**14. PLEASE COMPLETE A BOX, AS SET OUT BELOW, FOR:**

(A) Any person who appears to you to be or have been a director<sup>(a)</sup> or shadow director of the company whose conduct, either considered in relation to this company alone or taken together with conduct as a director of any other company, makes him unfit to be concerned in the management of a company. Details of the conduct leading you to this view should be set out in the answer to question 16; and

(B) Any other person who appears to you to have been a director<sup>(a)</sup> or shadow director of the company at the relevant date<sup>(b)</sup> or at any time in the three years before that date.

**ADDITIONAL COPIES OF THIS SECTION SHOULD BE USED AS APPROPRIATE.**

<p>a. FULL NAME: (Including other known names.)</p> <p>b. CURRENT OR LAST KNOWN ADDRESS:</p> <p>c. DATE OF BIRTH: (Important for identification purposes at Companies House.)</p> <p>d. OCCUPATION, TRADE OR PROFESSION:</p> <p>e. BRIEFLY, WHAT WERE THE DIRECTOR’S DUTIES IN THE COMPANY?</p> <p>f. IS THIS A PERSON WHOSE CONDUCT MAKES IT APPEAR TO YOU THAT HE IS UNFIT (as described in paragraph 14(A) above)?      YES    <input type="checkbox"/>      NO    <input type="checkbox"/></p> <p>If yes, please answer both parts of question 16.</p> <p>g. PERIOD AS DIRECTOR—FROM:                              TO:</p>
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<p>a. FULL NAME: (Including other known names.)</p> <p>b. CURRENT OR LAST KNOWN ADDRESS:</p> <p>c. DATE OF BIRTH: (Important for identification purposes at Companies House.)</p> <p>d. OCCUPATION, TRADE OR PROFESSION:</p> <p>e. BRIEFLY, WHAT WERE THE DIRECTOR’S DUTIES IN THE COMPANY?</p> <p>f. IS THIS A PERSON WHOSE CONDUCT MAKES IT APPEAR TO YOU THAT HE IS UNFIT (as described in paragraph 14(A) above)?      YES    <input type="checkbox"/>      NO    <input type="checkbox"/></p> <p>If yes, please answer both parts of question 16.</p> <p>g. PERIOD AS DIRECTOR—FROM:                              TO:</p>
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Please note:

- (a)** “DIRECTOR” includes any person occupying the position of director, by whatever name called; and
- (b)** “THE RELEVANT DATE” has the same meaning as in rule 4(4) of the Insolvent Companies (Reports on Conduct of Directors) Rules 1996.

**D1 SECTION 4: CONNECTED COMPANIES**

15. PLEASE GIVE DETAILS OF ANY OTHER COMPANY WITH WHICH THE DIRECTOR(S), IN RESPECT OF WHOM YOU HAVE ANSWERED YES AT QUESTION 14(f), MAY HAVE HAD AN INVOLVEMENT WHICH YOU CONSIDER MAY BE RELEVANT TO THE CONSIDERATION OF HIS OR THEIR CONDUCT:

COMPANY NAME	COMPANY REGISTERED NUMBER	INFORMATION WHICH MAY BE RELEVANT

<b>D1 SECTION 5: UNFIT CONDUCT</b>
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16a. PLEASE GIVE DETAILS (ATTACHING ADDITIONAL PAGES IF NECESSARY) OF THE CONDUCT OF THE DIRECTOR(S) WHICH MAKES IT APPEAR TO YOU THAT THE CONDITIONS OF SECTION 6(1) OF THE COMPANY DIRECTORS DISQUALIFICATION ACT 1986 ARE SATISFIED. PARTICULAR REGARD SHOULD BE PAID TO THOSE MATTERS CONTAINED IN SCHEDULE 1 TO THAT ACT. PLEASE ALSO REFER TO THE GUIDANCE NOTES ISSUED BY THE INSOLVENCY SERVICE.

PLEASE USE THE FORMAT BELOW TO PROVIDE DETAILS OF THE CONDUCT OF EACH DIRECTOR WHICH MAKES IT APPEAR TO YOU THAT THE DIRECTOR IS UNFIT AS DESCRIBED IN PARAGRAPH 14(A) ABOVE. ALTERNATIVELY, IF YOU HAVE ALREADY PREPARED A REPORT WHICH DETAILS THIS, ATTACH A COPY AND SUMMARISE YOUR FINDINGS BELOW.

DETAILS OF UNFIT CONDUCT	NAME OF DIRECTOR(S) AND NATURE OF SUPPORTING EVIDENCE

b. ARE THERE ANY OTHER RELEVANT MATTERS? (e.g. Ill health, personal guarantees, individual voluntary arrangement, bankruptcy, etc.)

YES  NO

If yes, please give brief details.

**D1 SECTION 6: STATEMENT OF AFFAIRS, ACCOUNTS AND REPORT TO CREDITORS**

**STATEMENT OF AFFAIRS**

17. PLEASE ATTACH A COPY OF THE STATEMENT OF AFFAIRS TO THIS FORM.

If a copy is not attached, please state why not and attach details of the known assets and liabilities of the company.

18. IF THERE IS A MATERIAL DIFFERENCE BETWEEN THE STATEMENT OF AFFAIRS AND THE EXPECTED FINAL POSITION, PLEASE PROVIDE DETAILS OF THE AMOUNT AND THE REASON FOR ANY DISCREPANCY:

**ACCOUNTS**

19. PLEASE ATTACH TO THIS FORM A COPY OF THE LAST TWO SETS OF THE AUDITED ACCOUNTS OF THE COMPANY AND ANY DRAFT OR MANAGEMENT ACCOUNTS PREPARED AFTER THEN.

If none are attached, please state why not:  
(e.g. None prepared, none in your possession, etc.)

**REPORT TO CREDITORS**

20. PLEASE ATTACH A COPY OF THE REPORT TO CREDITORS TO THIS FORM.

If you are not able to provide a copy of the report to creditors, please attach a report detailing the company's history.



**D1 SECTION 7: OTHER PROCEEDINGS**

21. PLEASE PROVIDE DETAILS OF ANY ACTION COMMENCED, OR LIKELY TO BE COMMENCED, BY YOU AGAINST OFFICERS OF THE COMPANY: (e.g. for recovery of assets, wrongful trading or to enforce co-operation.)

22. ARE THERE ANY OTHER CIVIL OR CRIMINAL PROCEEDINGS IN RELATION TO THE COMPANY TAKEN OR LIKELY TO BE TAKEN AGAINST ANY DIRECTOR? (e.g. By the Police, Inland Revenue, Customs and Excise, Department of Trade and Industry, etc.)

YES  NO

If yes, please provide details of those proceedings and, where relevant, the name and telephone number of the officer/official dealing with the case.

THE DETAILS GIVEN IN THIS FORM ARE CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

PLEASE SIGN THE FORM:

DATE:

**PLEASE ENSURE THAT COPIES OF THE FOLLOWING ARE ATTACHED:**

- a) Statement of affairs (or details of assets and liabilities);**
- b) Last two sets of audited accounts and draft or management accounts subsequently prepared, if any;**
- c) Report to creditors (or report detailing the company's history); and**
- d) Questionnaire(s), if any, completed by director(s).**

NOW SEND THE COMPLETED FORM TOGETHER WITH ENCLOSURES TO:

THE INSOLVENCY SERVICE  
INSOLVENCY PRACTITIONERS COMPLIANCE UNIT  
LADYWOOD HOUSE  
45-46 STEPHENSON STREET  
BIRMINGHAM B2 4UZ

OR

DX 713897 BIRMINGHAM 37

**D2: INTERIM RETURN****FINAL RETURN**  
(Tick as appropriate.)**RETURN BY OFFICE-HOLDER UNDER RULE 4 OF THE INSOLVENT COMPANIES (REPORTS ON CONDUCT OF DIRECTORS) RULES 1996.****PLEASE REFER TO THE GUIDANCE NOTES ISSUED BY THE INSOLVENCY SERVICE****NAME OF COMPANY:**

PLEASE PROVIDE THE FOLLOWING INFORMATION:

**SECTION 1: OFFICE-HOLDER**

1. NAME OF THE OFFICE-HOLDER(S):

2. NAME OF THE FIRM AND ADDRESS OF THE OFFICE-HOLDER(S):

3. ARE YOU REPORTING AS:

LIQUIDATOR IN A VOLUNTARY LIQUIDATION

ADMINISTRATIVE RECEIVER

ADMINISTRATOR?  
(Tick as appropriate.)

4. DATE OF APPOINTMENT:

5. NAME OF THE MEMBER OF YOUR STAFF WITH DAY TO DAY RESPONSIBILITY FOR THE CASE:

TEL NO:

FAX NO:

POSITION:

**D2 SECTION 2: COMPANY**

6. NAME OF THE COMPANY: (Please include details of all registered names and trading styles of the company used in the last two years.)

7. COMPANY REGISTERED NUMBER:

8. CURRENT REGISTERED OFFICE ADDRESS:

9. PRINCIPAL TRADING ADDRESS(ES):

10. NATURE OF THE COMPANY'S BUSINESS:

11. WHEN DID THE COMPANY COMMENCE TO TRADE?  
(Please state month and year if commencement was within the last five years, or year only if before that.)

12. DETAILS OF ANY OTHER ADMINISTRATIVE RECEIVERSHIP, VOLUNTARY LIQUIDATION OR ADMINISTRATION IN RELATION TO THE COMPANY:  
(Stating type, name of office-holder(s) and date of appointment.)



**D2 SECTION 4: INTERIM/FINAL RETURN**

14. AS APPROPRIATE, PLEASE EITHER:

COMPLETE **a** AND DELETE **b** (IF YOU ARE SUBMITTING AN INTERIM RETURN)

OR

DELETE **a** (IF YOU ARE SUBMITTING A FINAL RETURN)

- a.** No report or final return has yet been submitted because: (Please state reasons e.g. “the company’s affairs are still being examined” or “sufficient information is not yet to hand”.)

A report or final return is expected to be submitted by:

.....  
(month)                      (year)

- b.** At the date of this return, I have not become aware of any matters which would require me to make a report under section 7(3) of the Company Directors Disqualification Act 1986.

THE DETAILS GIVEN IN THIS FORM ARE CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

PLEASE SIGN THE FORM:

DATE:

NOW SEND THE COMPLETED FORM TO:

THE INSOLVENCY SERVICE  
INSOLVENCY PRACTITIONERS COMPLIANCE UNIT  
LADYWOOD HOUSE  
45-46 STEPHENSON STREET  
BIRMINGHAM B2 4UZ

OR

DX 713897 BIRMINGHAM 37

## EXPLANATORY NOTE

*(This note is not part of the Rules)*

These Rules substitute new forms in place of those contained in the Schedule to the Insolvent Companies (Reports on Conduct of Directors) Rules 1996 (S.I. 1996/1909). The forms are used for the purpose of complying with rules 3 and 4 of the Insolvent Companies (Reports on Conduct of Directors) Rules 1996. The new forms are substantially the same as the previous forms, but contain minor further requirements for information to be provided by office-holders to the Insolvency Practitioners Compliance Unit of the Insolvency Service. The new forms may be obtained from the Insolvency Service, Insolvency Practitioners Compliance Unit, Ladywood House, 45–46 Stephenson Street, Birmingham B2 4UZ. Those further requirements are in the case of Form D1, to provide the date of any winding up resolutions made by a company and any registered offices of a company within the six months prior to the commencement of the relevant insolvency procedure. They also provide, in the case of both forms, for a change of address to which to send them. Where the insolvency procedure commenced before 2nd April 2001 the office-holder may use either the old forms or the new amended forms until 1st August 2001. After that date such an office-holder must use the new amended forms.



**2001 No. 764**

**INSOLVENCY, ENGLAND AND WALES**

**COMPANIES**

**The Insolvent Companies (Reports on Conduct of Directors)  
(Amendment) Rules 2001**

**£3.00**

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