

General Partnership and Individual Enterprises

The following checklist facilitates the efficient preparation for the upcoming notarisation. We therefore kindly ask you to complete the list as far as possible and submit it to us. Of course we are available for any further questions or personal assistance. We thank you in advance for contacting Schwab | Weiler | Notare and look forward to our further cooperation.

Legal Structure of Enterprise		
<input type="checkbox"/> Sole Enterprise	<input type="checkbox"/> General Commercial Partnership (<i>oHG</i>)	<input type="checkbox"/> Partnership Corporation
<input type="checkbox"/> GmbH & Co. KG	<input type="checkbox"/> Limited Partnership (<i>Kommanditgesellschaft</i>)	

Establishment of Enterprise			
Company Name			
Legal Seat (Town/City)			
Company's Address			
Purpose of Enterprise			
Shareholder	Individual Entrepreneur / Shareholder 1	Shareholder 2 (if given)	Shareholder 3 (if given)
(Company) Name			
(all) First Names			
Maiden Name			
Date of Birth / No. of Commercial Register			
Street, No.			
ZIP Code, Place			
Profession			
Phone / Fax			
E-Mail			
Nationality			
Power of Representation	<input type="checkbox"/> solely <input type="checkbox"/> jointly	<input type="checkbox"/> solely <input type="checkbox"/> jointly	<input type="checkbox"/> solely <input type="checkbox"/> jointly
Prohibition of Self-dealing	<input type="checkbox"/> release <input type="checkbox"/> no release	<input type="checkbox"/> release <input type="checkbox"/> no release	<input type="checkbox"/> release <input type="checkbox"/> no release
Portion of Share Capital (in EUR or in %)	€ / %	€ / %	€ / %
Liability Amount (only applicable if Limited Partnership – KG)	€	€	€

Changes in Enterprise			
New Company Name			
New Legal Seat (Town/City)			
New Company's Address (Street, No., ZIP Code, Place)			
New Purpose of Enterprise			
Others			
Changes regarding Shareholders	Individual Entrepreneur / Shareholder 1	Shareholder 2 (if given)	Shareholder 3 (if given)
New Shareholder	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
(Company) Name			
Maiden Name			
Date of Birth / No. of Commercial Register			
Street, No.			
ZIP Code, Place			
Profession			
Phone / Fax			
E-Mail			
Nationality			
Power of Representation	<input type="checkbox"/> solely <input type="checkbox"/> jointly	<input type="checkbox"/> solely <input type="checkbox"/> jointly	<input type="checkbox"/> solely <input type="checkbox"/> jointly
Prohibition of Self-dealing	<input type="checkbox"/> release <input type="checkbox"/> no release	<input type="checkbox"/> release <input type="checkbox"/> no release	<input type="checkbox"/> release <input type="checkbox"/> no release
New / Raised Liability Amount (only applicable if Limited Partnership)	€	€	€
Preparation of Resolution / Partnership agreement	<input type="checkbox"/> requested <input type="checkbox"/> not requested		
Lawyer / Tax Consultant involved			
Draft	<input type="checkbox"/> Post <input type="checkbox"/> Fax <input type="checkbox"/> E-Mail <input type="checkbox"/> Pick-Up		
Preferred Appointment Date			