|  |
| --- |
| **Cancelling an Advocacy Firm Licence** |

* This form must be completed and signed by the firm's manager.
* All data and information included in the form should be correct**.**
* All details and documents marked with(\*) are mandatory**.**

|  |  |
| --- | --- |
| **Firm's Name as it appears on the licence issued by the Government of Dubai Legal Affairs Department) \*** |  |
| **Licence number\*** |  |
| **Firm's Email\*** |  |
| **Firm's Managing Partner Mobile number \*** |  |
| **Reasons for submitting the request\*** |  |

|  |  |
| --- | --- |
| **Declaration and Undertaking** | |
|  | I declare and undertake that there are no obligations on the advocacy firm resulting from the provision of legal services and that the cancellation of the Firm's licence will not affect the clients' interests. | |

|  |  |
| --- | --- |
| **Signature:** |  |
| **Date:** |  |