

Agreement no.

Employer  
**Fill in name and address below**

.....  
 .....  
 .....

**Please send the form to:**  
 Fora AB, SE-101 56 Stockholm

The insurance agreement may not be terminated as long as there are employees still covered by collective agreements.

We recommend that you maintain insurance coverage even if the company operates without employees, since self-employed persons and their spouses/registered partners who are active in the business are covered by Work Injury Insurance (TFA).

If you have taken out "Insurance for the self-employed" and want this to remain valid, your agreement for collective employee insurance must also remain in force.

In the event that there are no employees, the agreement for collective employee insurance currently costs SEK 450 per calendar year.

**The undersigned employer hereby terminates the insurance agreement for collective insurance**

---

**Reason**

<input type="checkbox"/> Operations in Sweden have ceased	Date
<input type="checkbox"/> No employees	End date of last employment
<input type="checkbox"/> Other reason	State reason and date for termination of the insurance agreement

**Other information**

**Signature**

Date	Authorised signatory	Contact	Telephone no. (with country and area code.)
Name (printed)		E-mail address	