ETHIOPIAN INVESTMENT COMMISSION

Investment Permit Cancellation Form

	Responsibility Date
	Name Signature
	Comment of the respective Facilitation & Aftercare Directorate
FO	R OFFICE USE ONLY
	Responsibility Date
	Name Signature
10.	I hereby confirm that all the information given above are complete and correct.
1.0	5
	4
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9.	Indicate reason (s) of cancellation and major problem(s) encountered
	If yes, please describe the type(s) of incentive(s) or privilege(s)
	Yes No
	investment project?
8.	Have you got any incentive(s) (duty free, income tax or other privilege(s)) in relation to this
Г	Operational Other (specify)
	Machinery erection & installation Preparation for production/service
F	Under civil work construction Under machinery procurement
Γ.	Pre-implementation Under process of land acquisition
<i>3</i> .	Project Status
3.	Investment License No
2.	Name of Investor
1.	Name of Investor