

Continuation page

Name and address of insolvency practitioner

What this form is for

Use this continuation page to tell us about another insolvency practitioner where more than 2 are already jointly appointed. Attach this to the relevant form. Use extra copies to tell us of additional insolvency practitioners.

What this form is NOT for

You can't use this continuation page to tell us about an appointment, resignation, removal or vacation of office.

→ Filling in this form

Please complete in typescript or in bold black capitals.

1

Appointment type

Tick to show the nature of the appointment:

- ☐ Administrator
- ☐ Receiver
- ☐ Nominee
- ☐ Supervisor
- ☐ Liquidator
- ☐ Provisional liquidator

2

Insolvency practitioner's name

Full forename(s)

Surname

3

Insolvency practitioner's address

Building name/number

Street

Post town

County/Region

Postcode

Country