

# LL SR01

## Application under section 1088 to make an address unavailable for public inspection by an individual member of a Limited Liability Partnership (LLP)

A fee is payable with this form.  
Please see 'How to pay' on the last page.

**What this form is for**  
You may use this form if you are,  
were, or propose to be, a member  
of an LLP.

**What this form is NOT for**  
You cannot use this form if you are  
a person who registers a charge. To  
do this, please use form LL SR02.

<b>1</b>	<b>Applicant's details</b>	For official use only	<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td>y</td><td>y</td></tr></table>							y	y
						y	y				
Title*				<b>→ Filling in this form</b> Please complete in typescript or in bold black capitals.  All fields are mandatory unless specified or indicated by *							
Full forename(s)											
Surname											
Former name(s)											

<b>2</b>	<b>Address for correspondence</b>	
Building name/number		
Street		
Post town		
County/Region		
Postcode		
Country		

<b>3</b>	<b>Appointment details</b>	
Please complete the name and registered number of each LLP of which you are or have been a member since 1 <sup>st</sup> January 2003.		<b>Continuation pages</b> Please use a continuation page if necessary.
<b>Appointment details</b>		
LLP number		
LLP name in full		
<b>Appointment details</b>		
LLP number		
LLP name in full		

## LL SR01

Application under section 1088 to make an address unavailable for public inspection by an individual member of a Limited Liability Partnership (LLP)

4

### Usual residential address to be made unavailable for public inspection

Building name/number

Street

Post town

County/Region

Postcode

Country

5

### Service address

Please give the service address that will replace the usual residential address on the public record.

Building name/number

Street

Post town

County/Region

Postcode

Country

LL SR01

Application under section 1088 to make an address unavailable for public inspection by an individual member of a Limited Liability Partnership (LLP)

6

Document details

Please list the documents where addresses appear on the Register. This only applies to documents registered on or after 1<sup>st</sup> January 2003.

Document details

LLP number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
LLP name in full	<input type="text"/>							
	<input type="text"/>							
Document type	<input type="text"/>							
	<input type="text"/>							
Registration date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Document details

LLP number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
LLP name in full	<input type="text"/>							
	<input type="text"/>							
Document type	<input type="text"/>							
	<input type="text"/>							
Registration date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Continuation pages**  
Please use a continuation page if necessary.

LL SR01

Application under section 1088 to make an address unavailable for public inspection by an individual member of a Limited Liability Partnership (LLP)

7

Grounds of the application

Please state the grounds for making the application.

**Continuation pages**  
Please use a continuation page if necessary.

Grounds of application

LL SR01

Application under section 1088 to make an address unavailable for public inspection by an individual member of a Limited Liability Partnership (LLP)

You must provide evidence in support of your application. You may want to list your evidence here.

Details of document(s)

8

Additional details if not applying for Section 243

Please complete the following details if you have not enclosed with this application a Section 243 application.

Date of birth

d

d

m

m

y

y

y

y

LLP name in full

LLP name in full

LLP name in full

LLP name in full

Continuation pages

Please use a continuation page if necessary.

9

Signature

Please sign below.

Applicant's signature

Signature

## **LL SR01**

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### **Where to send**

**Please return this form to the address below:**

The Registrar of Companies, PO Box 4082,  
Cardiff, CF14 3WE.