In accordance with section 109 of the Insolvency Act 1986

## 600



# Notice of appointment of liquidator in a members' or creditors' voluntary winding up

For further information, please refer to our guidance at www.gov.uk/companieshouse

1	Company details				
Company number		→ Filling in this form			
Company name in full		Please complete in typescript or in bold black capitals.			
2	Liquidator's name				
Full forename(s)					
Surname					
3	Liquidator's address				
Building name/number					
Street					
Post town					
County/Region					
Postcode					
Country					
4	Liquidator's email address or telephone number •	• You must give an email address or			
Email address		telephone number. All information on this form will appear on the			
Telephone number		public record.			
5	Insolvency practitioner number				
Number					

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6	Liquidator's name <sup>10</sup>		
Full forename(s)		Other Liquidator's details Use this section to tell us about	
Surname		another liquidator.	
7	Liquidator's address @		
Building name/number Street		Other Liquidator's details  Use this section to tell us about another liquidator. Use the continuation page to tell us about	
Post town		more than two liquidators.	
County/Region			
Postcode			
Country	Liquidator's email address or telephone number ©		
8	You must give an email address o		
Email address		telephone number. All information on this form will appear on the	
Telephone number		public record.	
9	Insolvency practitioner number		
Number			
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	d d y y y		
11	Appointment details		
	The appointment was made by (Tick one)  □ Company □ Creditors		
12	Type of liquidation		
	Tick to confirm the liquidation type  ☐ Members ☐ Creditors		
13	Sign and date		
Liquidator's signature	X Lawart	×	
Signature date	d		

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### **Presenter information**

You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.

Contact name				
Company name				
Address				
Post town				
County/Region				
Postcode	 	 	 -	 
Postcode				
Country				
DX				
Telephone				

### Checklist

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following:

- ☐ The company name and number match the information held on the public Register.
- ☐ You have signed and dated the form.

### Important information

All information on this form will appear on the public record.

### Where to send

You may return this form to any Companies House address, however for expediency we advise you to return it to the address below:

The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ. DX 33050 Cardiff.

### **7** Further information

For further information please see the guidance notes on the website at www.gov.uk/companieshouse or email enquiries@companieshouse.gov.uk

This form is available in an alternative format. Please visit the forms page on the website at www.gov.uk/companieshouse

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600 - continuation page Notice of appointment of liquidator in a members' or creditors' voluntary winding up

1	Company details	
Company number		
Company name in full		
2	Liquidator's name	
Full forename(s)		
Surname		
3	Liquidator's address	
Building name/number		
Street		
Post town		
County/Region		
Postcode		
Country		
4	Liquidator's email address or telephone number •	
Email address		• You must give an email address or telephone number. All information
Telephone number		on this form will appear on the public record.
5	Insolvency practitioner number	public record.
Insolvency practitioner		
number		