

600

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



Companies House

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

1 Company details

Company number	00242864	→ Filling in this form Please complete in typescript or in bold black capitals.
Company name in full	WALKRIGHT LIMITED	

2 Liquidator's name

Full forename(s)	Derek
Surname	Hyslop

3 Liquidator's address

Building name/number	Atria One
Street	144 Morrison Street
Post town	Edinburgh
County/Region	
Postcode	EH3 8EX
Country	

4 Liquidator's email address or telephone number ^①

Email address	dhyslop1@parthenon.ey.com	① You must give an email address or telephone number. All information on this form will appear on the public record.
Telephone number	020 7951 2000	

5 Insolvency practitioner number

Number	9970
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6	Liquidator's name^①	
Full forename(s)	Colin	
Surname	Dempster	
	① Other Liquidator's details Use this section to tell us about another liquidator.	
7	Liquidator's address^②	
Building name/number	Atria One	
Street	144 Morrison Street	
Post town	Edinburgh	
County/Region		
Postcode	E H 3 8 E X	
Country		
	② Other Liquidator's details Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.	
8	Liquidator's email address or telephone number^③	
Email address	cdempster@parthenon.ey.com	
Telephone number	020 7951 2000	
	③ You must give an email address or telephone number. All information on this form will appear on the public record.	
9	Insolvency practitioner number	
Number	8 9 0 8	
10	Statement of appointment	
	I confirm the appointment of the liquidator(s) on	
Date	d 0 d 8 m 0 m 3 y 2 y 0 y 2 y 2	
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	Signature X  X	
Signature date	d 1 d 5 m 0 m 3 y 2 y 0 y 2 y 2	

600

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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 **Lilia Gordon**

Company name **Ernst & Young LLP**

Address **No.1 Colmore Square**

Post town **Birmingham**

County/Region

Postcode **B 4 6 H Q**

Country

DX

Telephone **+44 (0) 12 1535 2195**

 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.

 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