

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.companieshouse.gov.uk

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Company details

Company number	0	2	1	0	0	3	5	6		→ Filling in this form Please complete in typescript or in bold black capitals.
Company name in full	Hospital Plan Insurance Services									

2

Liquidator's name

Full forename(s)	Nicholas James	
Surname	Timpson	

3

Liquidator's address

Building name/number	15	
Street	Canada Square	
Post town	London	
County/Region		
Postcode	E 1 4 5 G L	
Country	United Kingdom	

4

Liquidator's email address or telephone number ❶

Email address	Kelsey.Berchie@kpmg.co.uk	❶ You must give an email address or telephone number. All information on this form will appear on the public record.
Telephone number	0207 694 2616	


5

Insolvency practitioner number

Number	2	0	6	1	0				
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600

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

6	Liquidator's name ①											
Full forename(s)	Mark Jeremy										① Other Liquidator's details Use this section to tell us about another liquidator.	
Surname	Orton											
7	Liquidator's address ②											
Building name/number	15										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.	
Street	Canada Square											
Post town	London											
County/Region												
Post code	E	1	4		5	G	L					
Country	United Kingdom											
8	Liquidator's email address or telephone number ③											
Email address	Kelsey.Berchie@kpmg.co.uk										③ You must give an email address or telephone number. All information on this form will appear on the public record.	
Telephone number	0207 694 2616											
9	Insolvency practitioner number											
Number	8	8	4	6								
10	Statement of appointment											
	I confirm the appointment of the liquidator(s) on											
Date	1	0		0	3		2	0	2	1		
11	Appointment details											
	The appointment was made by (Tick one) <input checked="" type="checkbox"/> Company <input type="checkbox"/> Creditors											
12	Type of liquidation											
	Tick to confirm the liquidation type											
	<input checked="" type="checkbox"/> Members											
	<input type="checkbox"/> Creditors											
13	Sign and date											
Liquidator's signature	<div>Signature</div> <div>  </div>											
Signature date	2	5		0	3		2	0	2	1		

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 Kelsey Berchie

Company name KPMG LLP

Address

15 Canada Square

Post town London

County/Region

Postcode	E	1	4		5	G	L
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Country United Kingdom

DX 157460 Canary Wharf 5

Telephone 0207 694 2616

✓ 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 attached the required documents.
- ☐ You have signed 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.

i Further information

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

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