

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	0	2	4	2	7	4	1	1
Company name in full	RICHMOUNT MANAGEMENT LIMITED							

→ Filling in this form
Please complete in typescript or in
bold black capitals.

2 Liquidator's name

Full forename(s)	STEVEN GEORGE
Surname	HODGSON

3 Liquidator's address

Building name/number	VICARAGE CHAMBERS
Street	9 PARK SQUARE EAST
Post town	LEEDS
County/Region	WEST YORKSHIRE
Postcode	L S 1 2 L H
Country	

4 Liquidator's email address or telephone number ^①

Email address	admin@cloughcs.co.uk
Telephone number	0333 456 0078

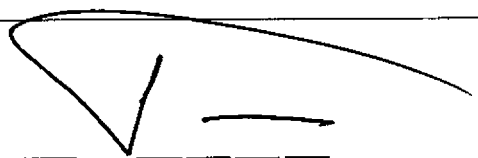
① You must give an email address or
telephone number. All information
on this form will appear on the
public record.

5 Insolvency practitioner number

Number	1	3	5	5	0			
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6	Liquidator's name^①	
Full forename(s)	CHRISTOPHER	
Surname	WOOD	
		① Other Liquidator's details Use this section to tell us about another liquidator.
7	Liquidator's address^②	
Building name/number	VICARAGE CHAMBERS	
Street	9 PARK SQUARE EAST	
Post town	LEEDS	
County/Region	WEST YORKSHIRE	
Postcode	L S 1 2 L H	
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	admin@cloughcs.co.uk	
Telephone number	0333 456 0078	
		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	9 5 7 1	
10	Statement of appointment	
I confirm the appointment of the liquidator(s) on		
Date	d 1 d 0 m 1 m 1 y 2 y 0 y 2 y 3	
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>X</div> <div></div> <div>X</div>	
Signature date	d 1 d 4 m 1 m 1 y 2 y 0 y 2 y 3	

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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	EMMA WILBY									
Company name	CLOUGH CORPORATE SOLUTIONS									
	LIMITED									
Address	VICARAGE CHAMBERS									
	9 PARK SQUARE EAST									
Post town	LEEDS									
County/Region	WEST YORKSHIRE									
Postcode	L	S	1		2	L	H			
Country										
DX										
Telephone	0333 456 0078									



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