An accordance with section 109 of the Insolvency Act 1986

600

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

Companies House

FRIDAY

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A28 13/12/2019 #53

COMPANIES HOUSE

1 Company details

Company number	0 3 2 9 7 0 4 6
Company name in full	DENNIS PRICE WOODWORKING MACHINERY LIMITED

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

2 Liquidator's name

Full forename(s)	NICOLA
Surname	BAKER

3 Liquidator's address

Building name/number	RUSHTONS INSOLVENCY LIMITED
Street	3 MERCHANT'S QUAY
	ASHLEY LANE
Post town	SHIPLEY
County/Region	WEST YORKSHIRE
Postcode	B D 1 7 7 D B
Country	

4 Liquidator's email address or telephone number ❶

Email address	sarobinson@rushtonsifs.co.uk
Telephone number	01274 598585

❶ 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 5 8 5 2

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6 Liquidator's name ❶

Full forename(s)

Surname

❶ **Other Liquidator's details**
Use this section to tell us about another liquidator.

7 Liquidator's address ❷

Building name/number

Street

Post town

County/Region

Postcode

Country

❷ **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 ❸

Email address

Telephone number

❸ 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

10 Statement of appointment

I confirm the appointment of the liquidator(s) on

Date d0 d5 m1 m2 y2 y0 y1 y9

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 d0 d5 m1 m2 y2 y0 y1 y9

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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	SIMON ROBINSON
Company name	RUSHTONS INSOLVENCY LIMITED
Address	3 MERCHANT'S QUAY
	ASHLEY LANE
Post town	SHIPLEY
County/Region	WEST YORKSHIRE
Postcode	B D 1 7 7 D B
Country	
DX	
Telephone	01274 598585

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

In accordance with section 109 of the Insolvency Act 1986.

600 - continuation page

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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 ❶

Email address

Telephone number

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

5 Insolvency practitioner number

Insolvency practitioner number