In accordance with section 109 of the Insolvency Act 1986

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



1	Company details		
Company number	0 9 8 4 6 6 4 9	→ Filling in this form Please complete in typescript or i	
Company name in full	EPA Projects Limited	bold black capitals.	
2	Liquidator's name		
Full forename(s)	Christopher		
Surname	Ratten		
3	Liquidator's address	·	
Building name/number	9th Floor		
Street	3 Hardman Street		
Post town	Manchester		
County/Region		_	
Postcode	M 3 3 H F		
Country			
4	Liquidator's email address or telephone number •	• You must give an email address or	
Email address	restructuring.manchester@rsmuk.com	telephone number. All informatio on this form will appear on the public record.	
Telephone number	0161 830 4000		
5	Insolvency practitioner number		
Number	9 3 3 8		

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6	Liquidator's name ¹⁰	
Full forename(s)	Lindsey J	Other Liquidator's details Use this section to tell us about another liquidator.
Surname	Cooper	
7	Liquidator's address @	
Building name/numbe	9th Floor	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	3 Hardman Street	
Post town	Manchester	-
County/Region		_
Postcode	M3 3 HF	
Country		_
8	Liquidator's email address or telephone number ®	You must give an email address or
Email address	restructuring.manchester@rsmuk.com	telephone number. All information on this form will appear on the
Telephone number	0161 830 4000	public record.
9	Insolvency practitioner number	 -
Number	8 9 3 1	
10	Statement of appointment	
	I confirm the appointment of the liquidator(s) on	
Date	$\begin{bmatrix} d & 1 & d & 2 \end{bmatrix}$ $\begin{bmatrix} m & 0 & m & 2 \end{bmatrix}$ $\begin{bmatrix} y & 2 & y & 1 \end{bmatrix}$	
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	<
Signature date	$\begin{bmatrix} 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 $	

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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	Tom Haley	
Company name	RSM Restructuring Advisory LLI	
Address	9th Floor	
	3 Hardman Street	
Post town	Manchester	
County/Region		
Postcode	M 3 3 H F	
Country		
DX		
Telephone	0161 830 4000	

✓ 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