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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	1 0 2 5 3 1 2 5	→ Filling in this form Please complete in typescript or in bold black capitals.
Company name in full	WHP Investments UK Ltd	
2	Liquidator's name	
Full forename(s)	Christopher J	
Surname	Petts	
3	Liquidator's address	
Building name/number	Rotterdam House	
Street	116 Quayside	
Post town	Newcastle-Upon-Tyne	
County/Region		
Postcode	N E 1 3 D Y	
Country		
4	Liquidator's email address or telephone number ^①	① You must give an email address or telephone number. All information on this form will appear on the public record.
Email address	cmusupport@uk.gt.com	
Telephone number	0161 953 6906	
5	Insolvency practitioner number	
Number	1 2 3 9 0	

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6	Liquidator's name ^①		① Other Liquidator's details Use this section to tell us about another liquidator.
Full forename(s)	James E		
Surname	Hichens		
7	Liquidator's address ^②		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.
Building name/number	No 1 Whitehall Riverside		
Street	Whitehall Road		
Post town	Leeds		
County/Region			
Postcode	L S 1 4 B N		
Country			
8	Liquidator's email address or telephone number ^③		③ You must give an email address or telephone number. All information on this form will appear on the public record.
Email address	cmusupport@uk.gt.com		
Telephone number	0161 953 6906		
9	Insolvency practitioner number		
Number	2 8 7 3 2		
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	d 2 3 m 0 1 y 2 0 y 2 4		
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 type="checkbox"/> Members		
	<input checked="" type="checkbox"/> Creditors		
13	Sign and date		
Liquidator's signature	Signature X <i>James Hichens</i> X		
Signature date	d 2 6 m 0 1 y 2 0 y 2 4		

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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

Suzanne Blakey

Company name

Grant Thornton UK LLP

Address

11th Floor

Landmark St Peter's Square

Post town

1 Oxford St

County/Region

Manchester

Postcode

M 1 4 P B

Country

DX

Telephone

0161 953 6900

**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